BioFire Meningitis/Encephalitis (ME) Pathway

The goal of rapid diagnostics is to swiftly and safely de-escalate empiric therapy

Detects 14 pathogens (see bottom right), requiring 0.2mL of cerebrospinal fluid (CSF) Optimal turnaround time ≈ 1 hour

Always prioritize CSF volume for traditional Gram stain and culture!

NOT validated for

- post-neurosurgical patients nor patients with an indwelling device (e.g., shunts)
 - e.g., does not detect Staphylococcus, Pseudomonas, etc.
- patients having received antibiotics prior to lumbar puncture
 - can identify a pathogen in this setting but sensitivity data is lacking

Does CSF from the patient with suspected meningitis/encephalitis have

 \square > 10 nucleated cells/ μ L in cerebrospinal fluid (CSF)



Approve but remain aware:

- Only the 14 pathogens on the panel are detected!
- If HSV encephalitis suspected based on radiographic appearance
 - continue acyclovir IV even if panel negative
 - repeat test with specific HSV 1/2 PCR if suspicion is high
- Consult ID if concern for CNS infection despite negative testing
- Infectious Diseases or Emergency Department can override criteria for any 1 of the following
- HIV infection
- Immunosuppressant medication (including steroid, rejection or recent chemotherapy)
- Aplastic anemia
- Primary immunodeficiency

Considerations

Bacteria

- 97.5% percent positive agreement (PPA)
- does not detect non-encapsulated E. coli nor N. meningitidis
- does not detect mycobacterium, syphilis, tick-borne disease, etc.

<u>Virus</u>

- 90.1% PPA
- cannot differentiate active vs latent infection
- does not detect West Nile virus (order WNV IgM on CSF if suspected)
- HHV6 detection requires clinical correlation
 - detection can reflect chromosomally integrated virus

Fungus (only Cryptococcus)

- 92.3% PPA relative to cryptococcal smear/culture
- but only 52% PPA relative to cryptococcal antigen!
 - should not supplant CSF cryptococcal Ag testing if suspected

Pathogens Detected

Bacteria	Virus	Fungus
Escherichia coli K1	Cytomegalovirus (CMV)	Cryptococcus neoformans/gattii
Haemophilus influenza	Enterovirus	
Listeria monocytogenes	Herpes simplex virus 1 (HSV1)	
Neisseria meningitidis	Herpes simplex virus 2 (HSV2)	
Streptococcus agalactiae	Human herpesvirus 6 (HHV6)	
Streptococcus pneumoniae	Human parechovirus	
	Varicella zoster virus (VZV)	