

To: (10)(2e) [(10)(2e) @rivm.nl]
Cc: (10)(2e) [(10)(2e) @rivm.nl]
From: (10)(2e)
Sent: Tue 5/26/2020 5:48:34 PM
Subject: AW: Use of SARS-CoV-2 antibody tests in your PIENTER Corona Study
Received: Tue 5/26/2020 5:48:45 PM

Dear (10)(2e)

Thank you very much for these precious information you gave me. Meanwhile we also contacted our colleagues in the other department.

Best wishes,

(10)(2e)

-----Ursprüngliche Nachricht-----

Von: (10)(2e) [(10)(2e) @rivm.nl]

Gesendet: Mittwoch, 20. Mai 2020 10:43

An: (10)(2e)

Cc: (10)(2e)

Betreff: FW: Use of SARS-CoV-2 antibody tests in your PIENTER Corona Study

Dear (10)(2e), dear (10)(2e)

To answer your questions, we have developed our own (custom) multiplex immunoassay (MIA) for COVID-19, based on Luminex-based bead technology. This assay has passed a rigorous validation process, so we have a pretty good picture on the IgG sensitivity and specificity of this assay now for serosurveillance purposes, which is very competitive and possibly even better than some of the currently advocated commercial EIAs, and we also have some first validation against neutralization as well, but will not apply NT on a routine basis. The greatest benefit of the Luminex bead assay is that it consumes very little volume of serum, so for this purpose we indeed collect self-sampled fingerstick blood, in a very simple way using a small collecting tube and a disposable microneedle, all by mail to the recipient and back to the lab (UN 3373 certified of course). We initialized this approach for specific mumps serosurveillance several years ago during outbreaks of mumps among students (see papers attached). Here we still used fingerstick blood collected on typical blood cards (termed dried blood specimens or DBS). However, for more accurate quantitation of antibodies, we changed to the collection of venous blood and small tubes, so a miniaturized version of venous blood sampling.

Hope this information is of help.

Since you are at (10)(2a) you may contact measles experts (10)(2e) or (10)(2e), I know them very well from our (10)(2a) work together on measles and rubella, they are also very much involved in (sero-) surveillance for measles and rubella, also incorporating fingerstick blood and saliva sampling strategies.

best wishes,

(10)(2e)
 National Institute for Public Health and the Environment (RIVM) Center for Infectious Diseases Control (CIb) Center for Immunology and Infectious Diseases and Vaccines (IIV) (10)(2e)
 3720 BA Bilthoven
 The Netherlands
 T+ 31 (0)30 (10)(2e)

-----Original Message-----

From: (10)(2g) <(10)(2e)@rivm.nl>

Sent: woensdag 20 mei 2020 09:40

To: (10)(2e) <(10)(2e)@rivm.nl>

Subject: FW: Use of SARS-CoV-2 antibody tests in your PIENTER Corona Study

Hoi (10)(2e)

Kun jij deze beantwoorden? Of mij een antwoord geven die ik kan sturen?

Groet (10)(2e)

-----Original Message-----

From: (10)(2e) <(10)(2e)@rki.de>

Sent: maandag 18 mei 2020 20:00

To: Pienteronderzoek <(10)(2e)@rivm.nl>
Subject: Use of SARS-CoV-2 antibody tests in your PIENTER Corona Study

Dear colleagues,

I am a research assistant in the Department for Epidemiology and Health Monitoring at the (10)(2a). In a special working group, we collect information on population-based seroprevalence studies on SARS-CoV-2 infections (which have already started or will begin soon) in (10)(2a) and worldwide. In this context, we would like to know which serological tests you use to determine SARS-CoV-2 antibodies in your PIENTER Corona study. We are particularly interested in how you examine the samples of the fingerprint blood. Will there be an ELISA for testing that capillary blood? And are you planning neutralization tests in whole blood?

Thank you very much for your support.

With kind regards.

(10)(2e)

(10)(2e)

(10)(2a)

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