@Health

Monthly Focus

MicroActive

Improving cancer diagnosis in Europe and the US

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Recent developments in the area of "point of care" diagnostics may allow the transfer of molecular diagnostics from central laboratories to the doctor's office and to the homes of the patients.

Currently, molecular methods diagnostic often require a number of steps, such as laborious sample preparation, creation master-mixes and the performance of several assays concurrently, each with their own complexities. Such is the complexity of current molecular assays that they cannot be adapted to simple dipstick formats such as the currently used pregnancy tests or glucose meters.



The device accepts 3 ml of sample and performs the extraction in a disposable polymer chip of credit card size. Tests performed using cancer cell lines and cervical liquid based cytology specimens confirm the extraction of HPV-mRNA by the system.

vision of the European funded project MicroActive has been to develop an integrated system microtechnology based on and biotechnology for automated diagnosis of a wide range of diseases. In the project, the developed system was tested successfully for the "proof-of-principle" detection of biomarkers indicative of cervical precancer. Specifically the system was designed for the ion of transcription of oncogenic HPVE6/E7. The analysis detects mRNAs¹ (messenger ribonucleic acid), which are indicative of a biologically significant HPV² (Human Papillomavirus) infection. On-chip biological procedures have been compared to "gold standard" laboratory procedures.

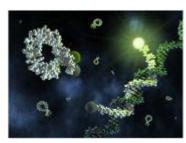
MicroActive has developed two instruments and two microfluidic chips that can be joined together into one system for a full analysis of a patient sample. The analysis is miniaturized and the analysis procedure for diagnostics of HPV is more automated than those currently used in the laboratories. The procedure starts with metering up 3 ml of the buffer with patient

cervical smear containing cells and mucus from a standard test container into a syringe. The syringe with the sample is then placed into the instrument with the sample preparation microfluidic chip. The extraction

of mRNA, with a sufficient high quality for later NASBA³ (Nucleic Acid Sequence Based Amplification), is performed automatically in the chip and the output is about 50 microliter of elute. This elute is mixed with reagents and then transferred to the amplification/detection chip in the second instrument where the liquid is automatically pulled into the chip, and split into separate amplification volumes. The mRNA for a specific HPV is amplified if the patient sample was positive for that active HPV virus, and

fluorescent
signal is
monitored real
in the reaction
ers. From the signal

time in the reaction chambers. From the signal a HPVE6/E7 mRNA positive result is determined.



Functional instruments and functional microfluidic chips have been used for tests on clinical specimens, in total more than 300 biological analyses on clinical samples were performed. Using clinical cervical cytology smear specimens from an established biobank, the functionality of the developed nucleic acid extraction with following on-chip amplification was demonstrated. Both instruments and chips are developed for production and for future use in a commercial system.

The project has achieved state-of-the-art scientific results in all of the disciplines involved. This has been proven by accepted publications on microfluidics, onchip sample reparation, and miniaturized nucleic acid

¹ http://en.wikipedia.org/wiki/Messenger_RNA

² http://en.wikipedia.org/wiki/Human_papillomavirus

³ http://www.pcr-encyclopedia.com/sequence-based-amplification-1480.html

Why targeting HPV?

Human Papillomaviruses ("HPVs") are a group of more than 100 related viruses, of which many types are considered relatively harmless, as they may only result in benign warts, or Papillomas. However, a few types of HPV are carcinogenic viruses that may result in cervical cancer. There currently exists an unmet medical need for further prevention of ICC (Invasive Cervical Cancer). Papsmears and liquid based cytology lack the

required sensitivity to further reduce the incidence of ICC. Diagnostic tests detecting presence of HPV are generally more sensitive than Pap smears and liquid based cytology, but much less specific - presence of HPV virus is not an ideal marker since more than 97% of HPV infections are dealt with by the immune system and do not lead to ICC.

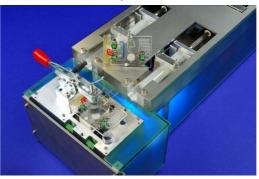
In summary, current standard of care diagnostics do not detect the oncoproteins responsible for the carcinogenesis. NorChip's commecial macroscale tests provide equivalent sensitivity to other next-generation genetic tests, but with significantly greater specificity, thereby providing higher diagnostic accuracy to doctors and patients.

What has been the progress to date?

NorChip achieved its first CE-marked product in 2003 and then in 2007 an international license agreement was signed with the French diagnostic group bioMérieux for the sale and distribution of their macroscale PreTect HPV-Proofer technology world-wide.

What does the future hold?

To date, NorChip has pioneered the development of cost-effective, miniaturized, disposable, and fully automated in vitro diagnostic devices that concentrate, extract, and detect RNA and DNA targets on an integrated micro-fluidics platform. The current status is a prototype system where **proof-of-principle** analyses of patient specimens have been performed. We believe that the development and deployment of certain diagnostic tests, in particular for certain cancers, will necessitate advanced technology for the



high-throughput and highly multiplexed detection of RNA. NorChip therefore expects to codevelop proprietary tests based on microtechnologies, license out the technology, and manufacture its own systems.

They will present their recent technological advances during the next **pHealth2009** conference to be held in Oslo on **25 June**. More information in the June Oslo Bio Update Newsletter

(http://www.norbiobase.no/no/Information/Oslo_Bio-Update/).

Partners:

- SINTEF (NO)
- NorChip AS (NO)
- Institut für Mikrotechnik Mainz GMbH (DE)
- IMTEK, University of Freiburg (DE)
- BioFluidix GmbH (DE)
- The Coombe Lying-in Hospital (IE)

Timetable: from Dec. 2005 to Nov. 2008

Total cost: €2.779.600 **EC funding**: € 1.600.000 **Instrument**: STREP

Project Identifier: FP6-IST-2005-017319

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Important Links:

Project website: www.sintef.no/microactive

Project publications: http://www.sintef.no/Projectweb/Microactive/Publications/eHealth Research: http://ec.europa.eu/information_society/activities/health/research

eHealth FP6 Projects: http://ec.europa.eu/information_society/activities/health/research/fp6projects

pHealth2009: http://www.sintef.no/Projectweb/pHealth2009/programme

For further information:

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