

# ApoH as a tool for ultrasensitive detection of pernicious microorganisms and to extract metagenomic data in low concentration pathogens

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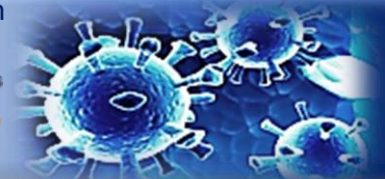
*Orion Integrated Biosciences, NY, US*

[www.apohtech.com](http://www.apohtech.com)

Increasing sensitivity  
Improving diagnostics



technologies  
**ApoH**



# ApoH capture: a proprietary technology

A poly-specific capture of microorganisms

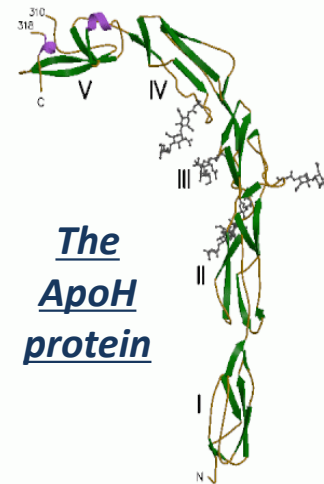
## ApoH<sub>a</sub> or apolipoprotein H or $\beta$ 2-glycoprotein I

A conserved protein with pleiotropic functions

- ✓ An innate immunity component exhibiting **a role of scavenger protein**
- ✓ Regulate blood coagulation pathway
- ✓ Regulate the migration of endothelial cells during angiogenesis
- ✓ Auto-antibodies against ApoH are associated with the anti-phospholipid-syndrome such as lupus erythematosus

ApoH<sub>a</sub> is **a**ctivated with a proprietary procedure to capture pathogens elements, including proteins, phospholipids, myristoiled or palmitoiled groups →

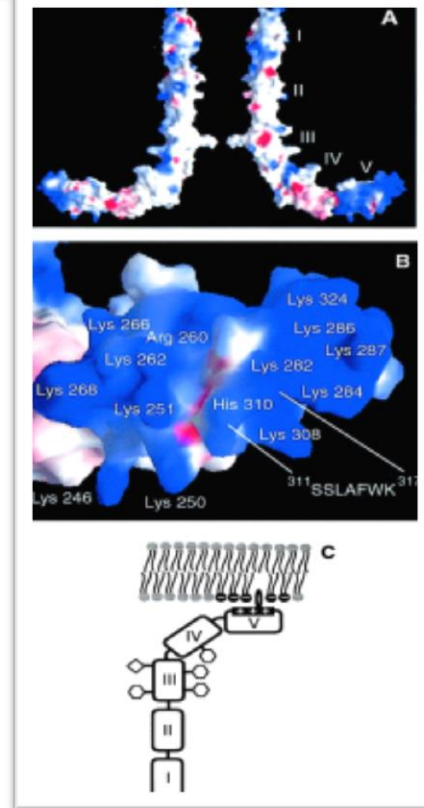
**interacting specifically with micro-organisms including infectious viruses, bacteria, fungi, parasites & prions**



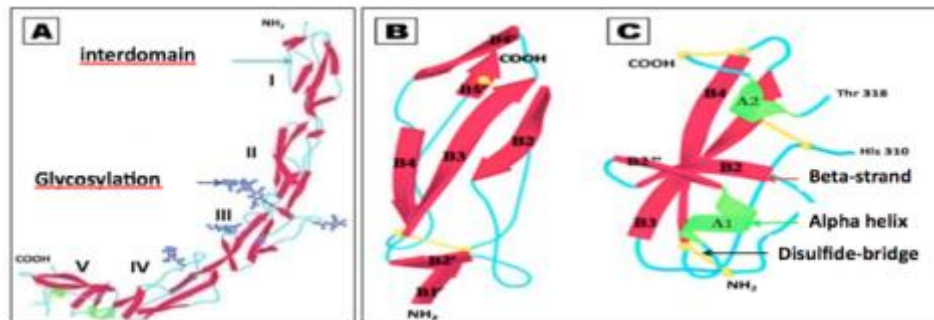
# ApoH capture: a proprietary technology

## Main characteristics

- ✓ molecular mass varying 43 -54 kDa (**Glycosylation**)→**345aa**
- ✓ plasmatic concentration → **200 mg/L**
- ✓ ApoH comprises **5 sushi domains**: 4 SCR (short consensus repeats) from CCP (complement control protein) module type & a fifth **lysine rich** domain (with a large patch of 14 positively charged residues)→**electrostatic interactions**
- ✓ unusual composition with **6.2 % cysteine** and **8.3 % proline**
- ✓ **Hydrophobic interactions** with anionic phospholipids (PS, Cardiolipin, some of which are present in HIV, HCV..)
- ✓ **Protein-Protein interactions** (Sbi of *S. aureus*; Microbiol 1999, 145: 177-); protein H of *S. pyogenes*; Mol Microbiol. 2008, 67(3): 482-92)
- ✓ **High microorganism capture affinity and efficiency of through novel physico-chemical conditions**



(EMBO Journal. 1999, 18 (19) : 5166–)



... enabling ultra-sensitive microbiology

## ApoHa key features & advantage on other “concentration” methods (Ultracentrifugation, membrane concentration, cationic surfaces, etc)

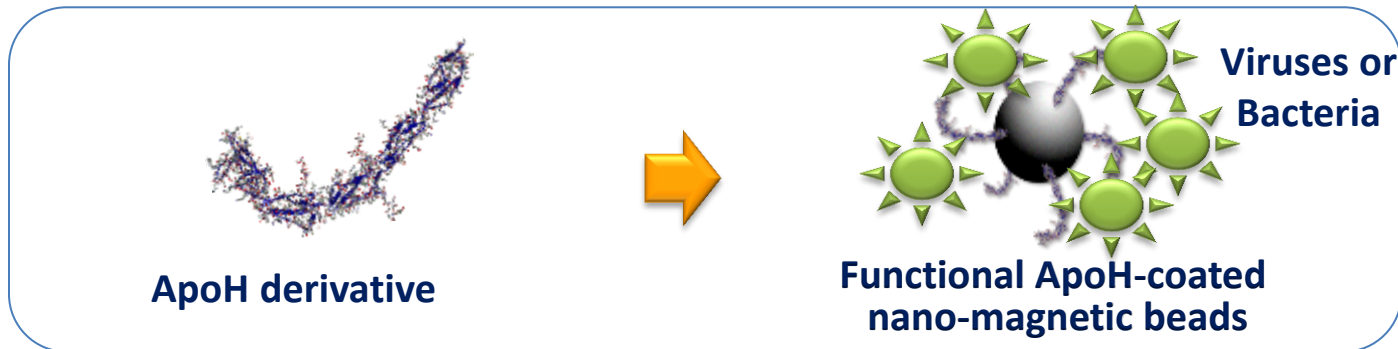
- Efficiently captures **pernicious** bacteria, viruses, parasites and prions independently of their antigenic variation
- Concentrates micro-organisms from **any complex sample**
- Cleanses the sample from inhibitors or antibiotics for **optimal detection**
- Simple, fast and highly profitable
- Used fixed on various solid supports (magnetic-coated beads, ELISA plates...)
- A same support can be used to bind several and different pathogens, **enabling multiplexing**

ApoHa increases the sensitivity of **any** currently existing detection method (PCR, ELISA, Culture, etc...)

→ **Asserted results through multiple studies**

# Virus concentration & purification using the ApoH-based technology

5



## Workflow

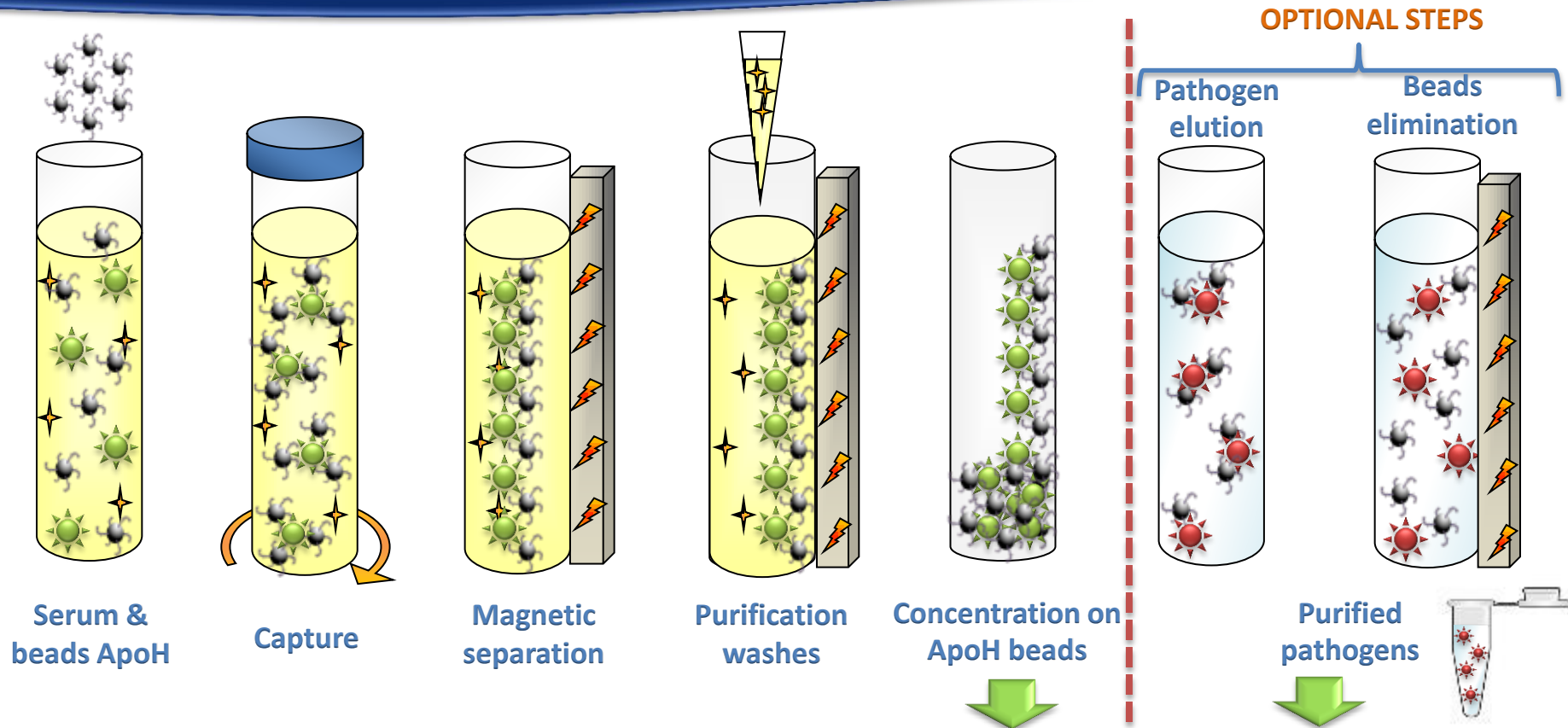
1- Viral or bacteria **capture** (ApoH CptoVIR kit or CptoBac)

2- Viral or Bacterial **cleaning & concentration** on ApoHa-magnetic beads

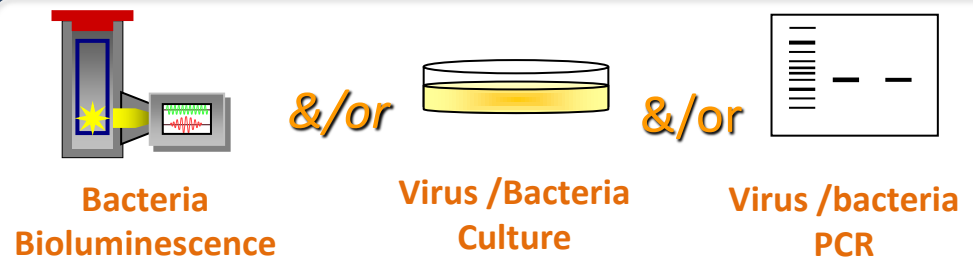
3- Viral or Bacterial **detection** using any appropriated method

# ApoH capture

Enabling ultrasensitive micro-organism culture or PCR



**DETECTION & DIAGNOSTIC or ISOLATION**



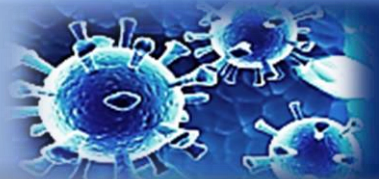


# ApoH for ultrasensitive detection of clinical viral infections

Increasing sensitivity  
Improving diagnostics



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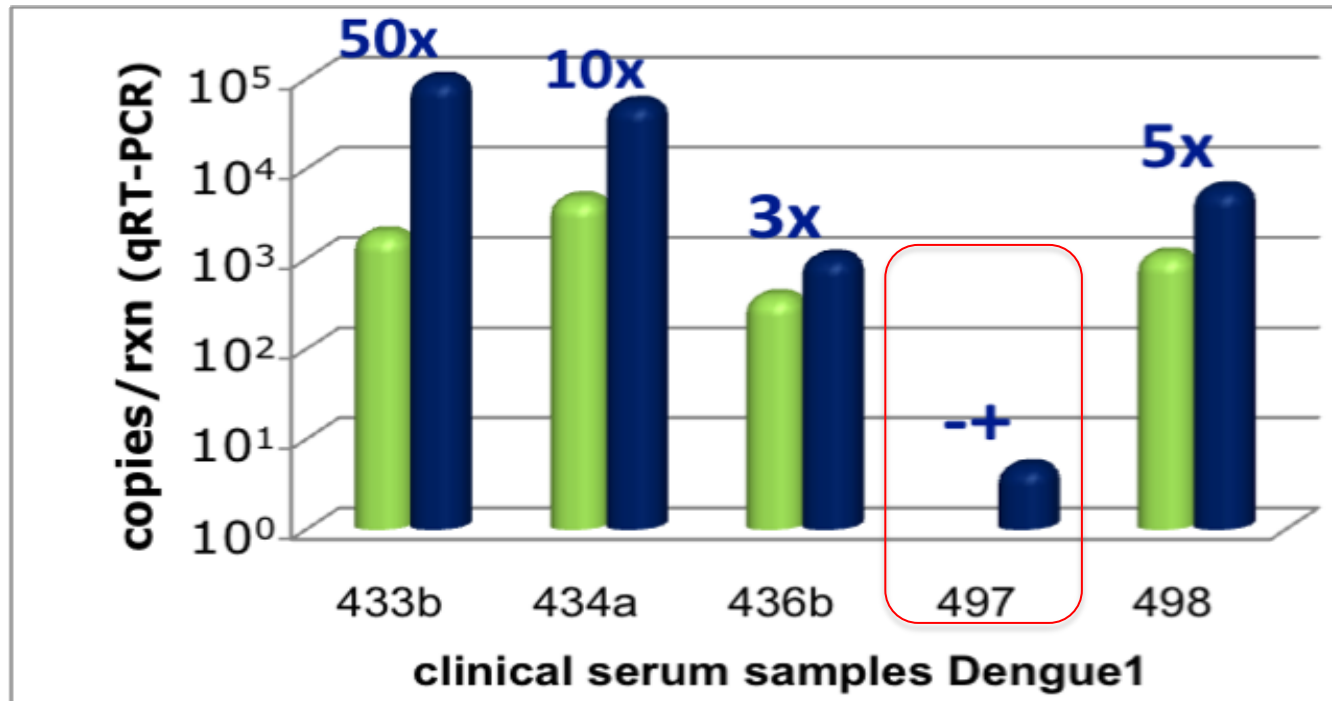


# ApoH & clinical detection of viral infections

8

The USDEP European Project

Dengue



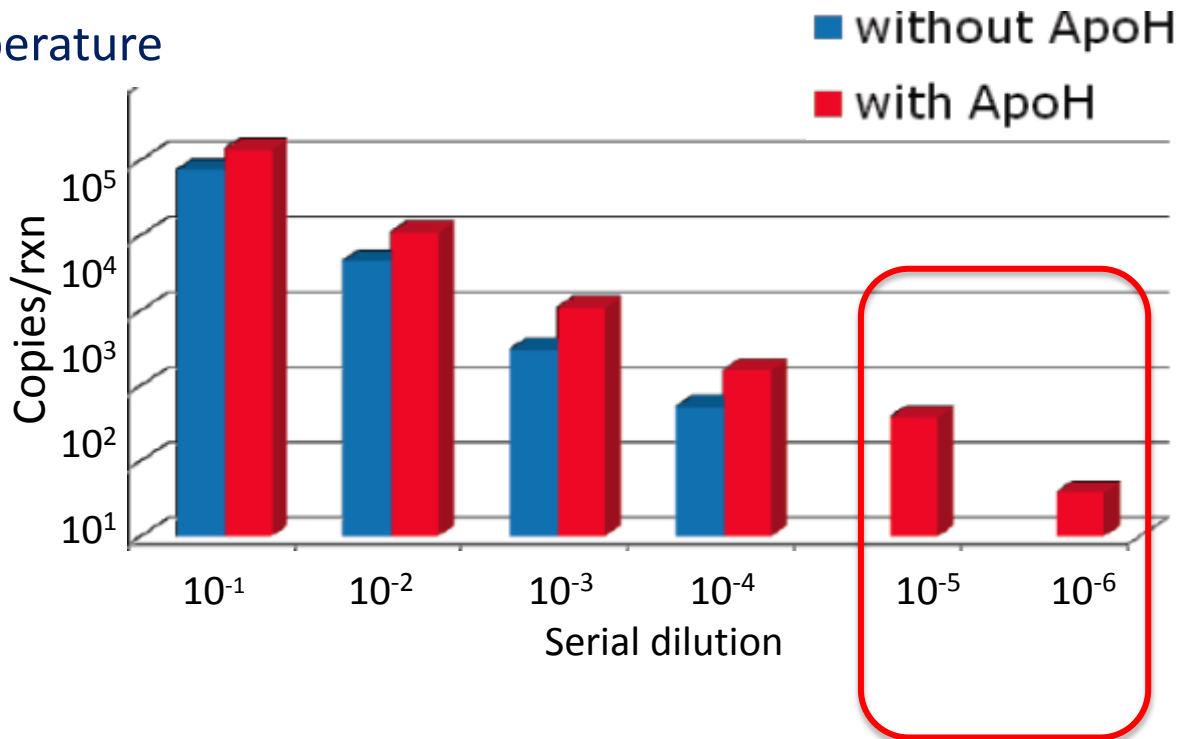
QPCR on DENV suspected sera from five German patients having been submitted (blue bars) or not (green bars) to a previous pre-analytical ApoH step. Higher values were obtained for four of them with the ApoH pre-analytical method. One false-negative was solved by ApoH.



### Swabs spiked with H3N2 Influenza virus:

- Spiked with cell cultured viruses
- Stored for 24 h at room temperature
- Diluted in 4 mL MEM
- Without ApoH
- With ApoH-beads

Patient sample copies/rxn	
Without ApoH	With ApoH
1.7 <sup>E</sup> +05	1.8 <sup>E</sup> +06

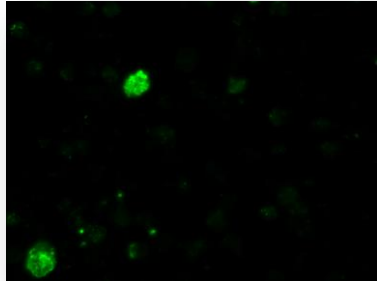


→ Functional protocol established to enrich respiratory viruses from nasal swabs

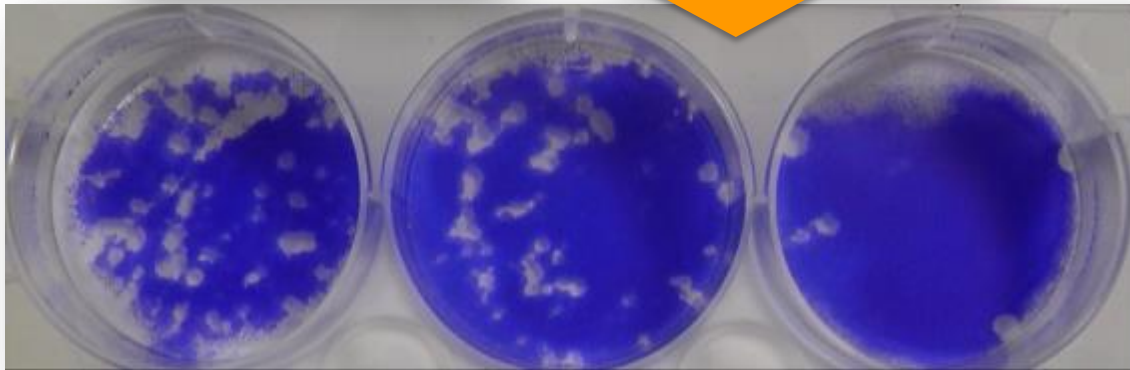
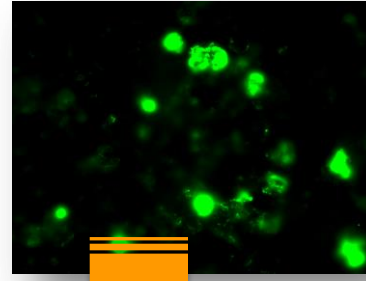
# ApoH isolation of respiratory viruses

## Capture & culture of replicating Influenza viruses

H3N2 infection (**without ApoH**)  
Detection using an anti-H3N2 MAb



Infection **with ApoH-captured** H3N2  
Detection using an anti-H3N2 MAb



**ApoH-captured of a cultivated H3N2 strain & subsequent infection of its target cells → cytopathogenic effects**

# ApoH for clinical detection of low viral infections

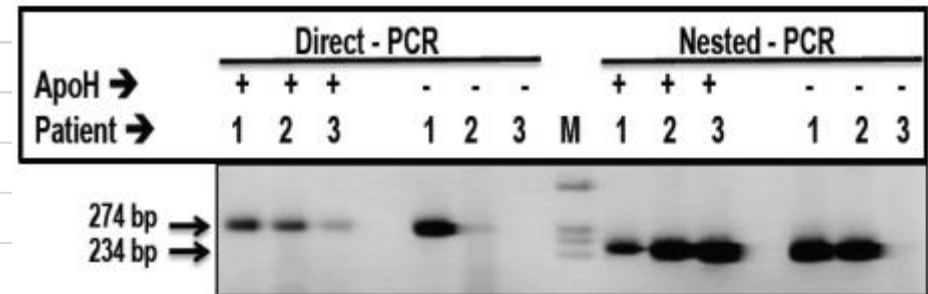
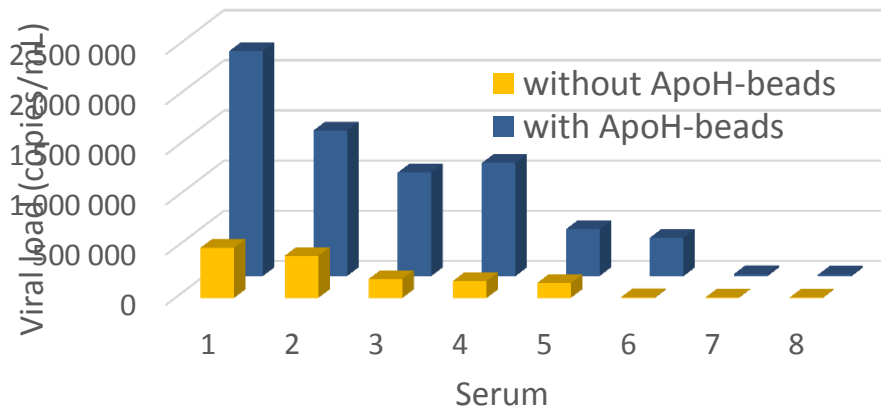
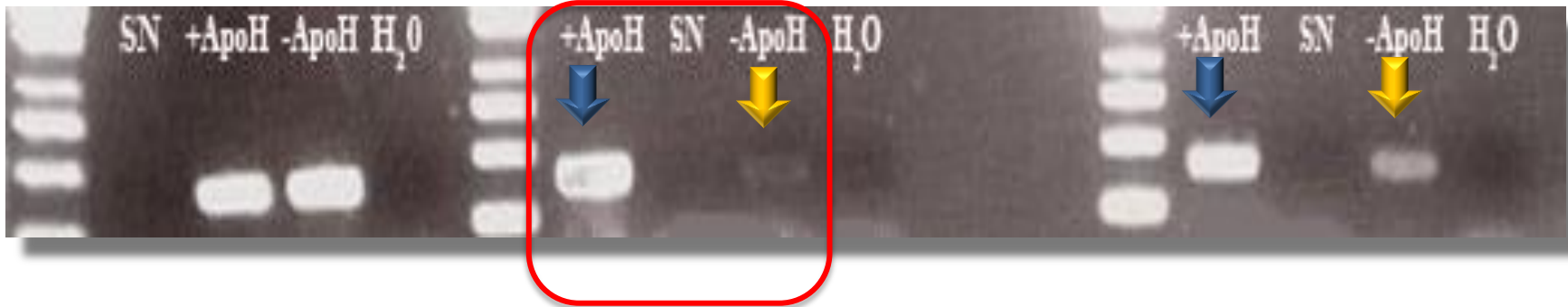
The USDEP European Project

HCV

Highly positive Plasma

Suspected Plasma

Low positive Plasma

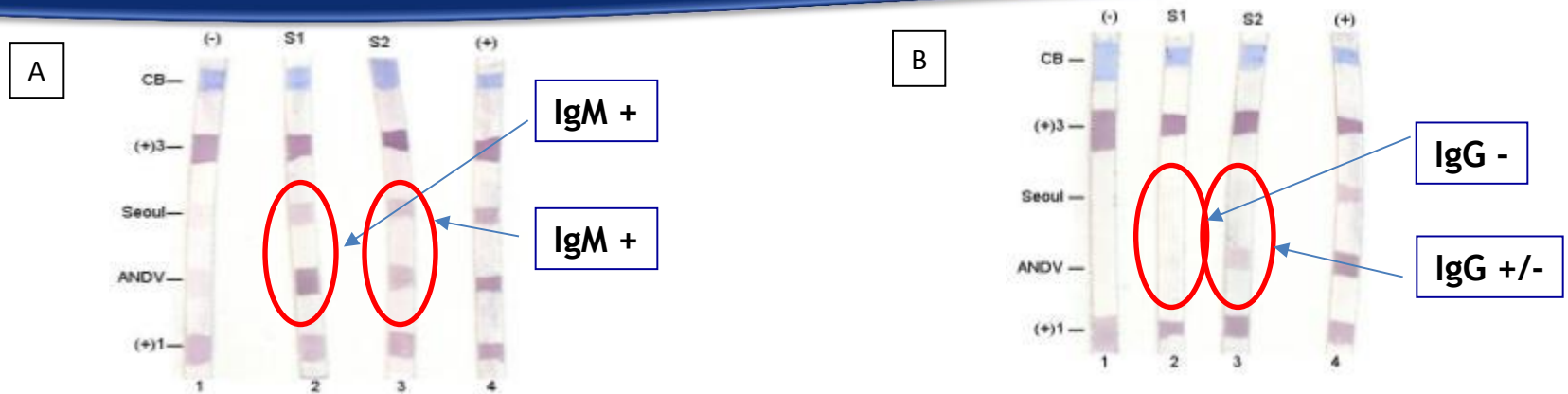


**ApoHa-viral capture strongly enhances the HCV-detection sensitivity**

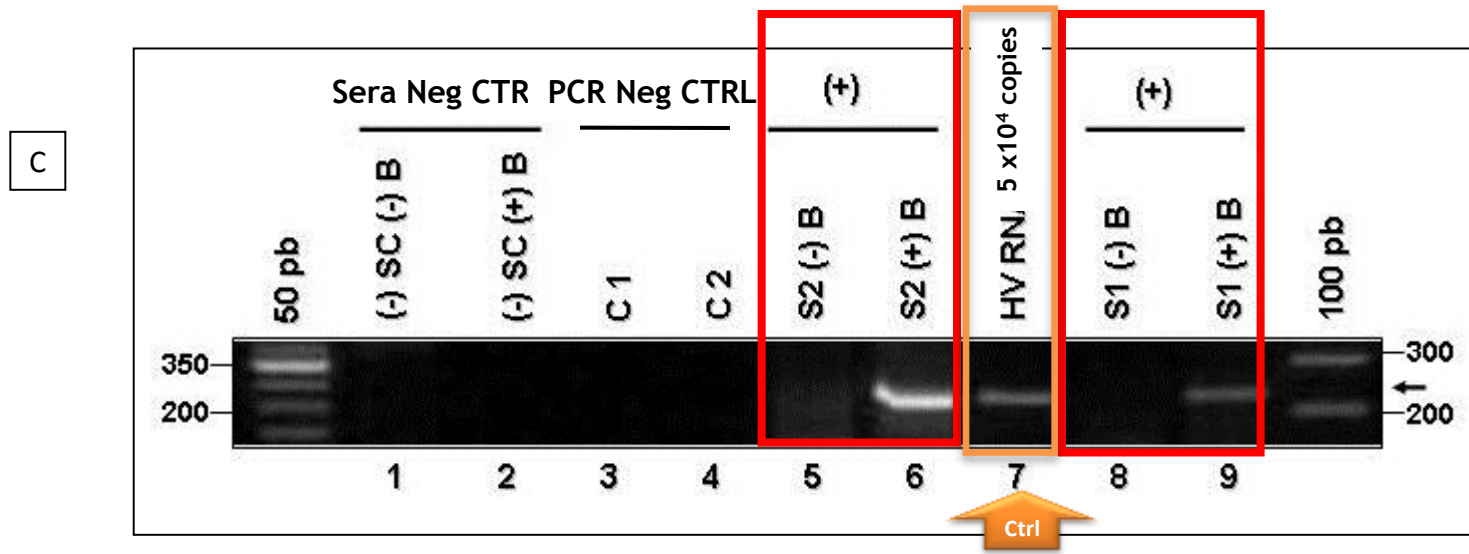
# ApoHa & occult Hantavirus cardiopulmonary infections

## The USDEP European Project

## Hantavirus



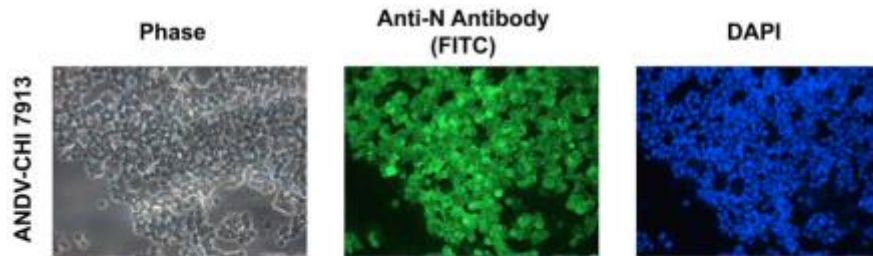
Andes virus PCR after ApoH capture from the suspected samples S1 & S2 : (+)B]= ApoH+ VS (-)B=ApoH-



ApoH-pretreatment solved 10% of Hantavirus false negative diagnostics in Chile

# ApoH & isolation of hemorrhagic Hantaviruses

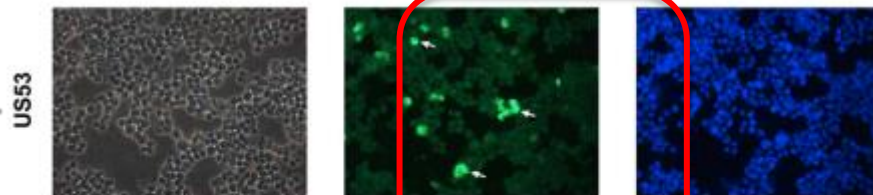
**Lab strain**



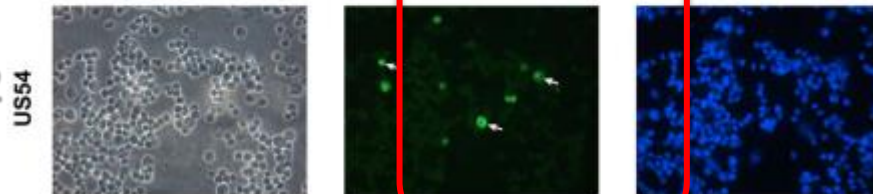
**No virus**



**Isolated strain 1**



**Isolated strain 2**



JOURNAL OF VIROLOGY, May 2009, p. 5046-5055  
0022-538X/09/\$08.00+0 doi:10.1128/JVI.02409-08  
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Vol. 83, No. 10

## Andes Virus Antigens Are Shed in Urine of Patients with Acute Hantavirus Cardiopulmonary Syndrome<sup>7‡</sup>

Paula Godoy,<sup>1‡</sup> Delphine Marsac,<sup>1‡</sup> Elias Stefas,<sup>2</sup> Pablo Ferrer,<sup>1</sup> Nicole D. Tischler,<sup>3</sup>  
Karla Pino,<sup>1</sup> Pablo Ramdohr,<sup>1</sup> Pablo Vial,<sup>4</sup> Pablo D. T. Valenzuela,<sup>3,5</sup>  
Marcela Ferrés,<sup>1</sup> Francisco Veas,<sup>6</sup> and Marcelo López-Lastra<sup>1‡</sup>

Infection of Vero E6 cells with ApoH-captured Hantaviruses



## Other examples

Biological psychiatry 2008, 64:1019-23

### PRIORITY COMMUNICATION

## Endogenous Retrovirus Type W GAG and Envelope Protein Antigenemia in Serum of Schizophrenic Patients

Hervé Perron, Lila Mekaoui, Corinne Bernard, Francisco Veas, Ilias Stefas, and Marion Leboyer

### Human endogenous retrovirus type W envelope expression in blood and brain cells provides new insights into multiple sclerosis disease

Hervé Perron, Raphaëlle Germi, Corinne Bernard, Marta Garcia-Montojo, Cécile Deluen, Laurent Farinelli, Raphaël Faucard, Francisco Veas, Ilias Stefas, Babs O Fabrick, Jack Van-Horssen, Paul Van-der-Valk, Claire Gerdil, Roberta Mancuso, Marina Saresella, Mario Clerici, Sébastien Marcel, Alain Creange, Rosella Cavaretta, Domenico Caputo, Giannina Arru, Patrice Morand, Alois B Lang, Stefano Sotgiu, Klemens Ruprecht, Peter Rieckmann, Pablo Villoslada, Michel Chofflon, Jose Boucraut, Jean Pelletier and Hans-Peter Hartung  
*Mult Scler* published online 28 March 2012

Adlhoc et al. *Virology Journal* 2011, 8:63  
<http://www.virologyj.com/content/8/1/63>



VIROLOGY JOURNAL

### RESEARCH

### Open Access

## Highly sensitive detection of the group A Rotavirus using Apolipoprotein H-coated ELISA plates compared to quantitative real-time PCR

Cornelia Adlhoc<sup>1\*</sup>, Marco Kaiser<sup>1,2†</sup>, Marina Hoehne<sup>3</sup>, Andreas Mas Marques<sup>3</sup>, Ilias Stefas<sup>4</sup>, Francisco Veas<sup>5</sup>, Heinz Ellerbrok<sup>1</sup>



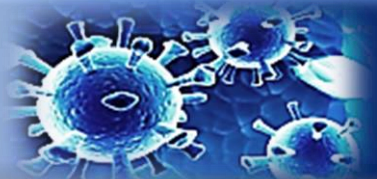
# ApoHa as a pre-analytical solution for ultrasensitive diagnostic of bacterial infections from clinical and food samples

Increasing sensitivity  
Improving diagnostics



[www.apohtech.com](http://www.apohtech.com)

technologies  
**ApoHa**



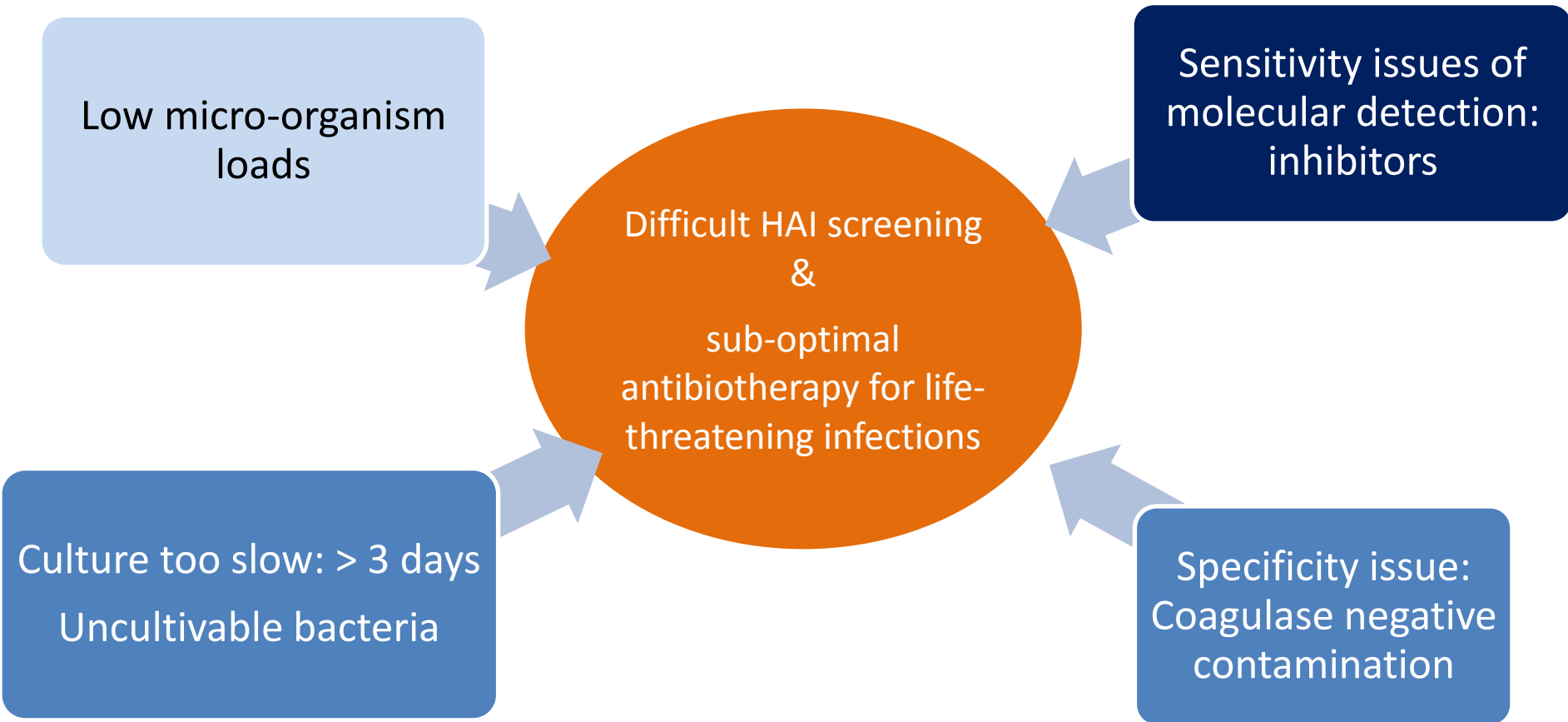
## Critical unmet needs

- Current bacterial detection & identification methods are:  
**too slow and/or not sensitive enough** to drive anti-biotherapy for life-threatening infections (septicaemia...) or for HAI screening.

### Main concerns:

- ✧ **Blood culture** based diagnosis
  - ✧ could **take 2 days or more**,
  - ✧ **lack of sensitivity** (ex.: **false negatives** due to presence of antibiotics...),
  - ✧ **an issue for non-cultivable bacteria**
  - ✧ **specificity** (ex.: Coagulase-Negative *Staphylococcus* contamination)
- ✧ **Molecular methods still do face a sensitivity issue** due to:
  - ✧ the challenge to concentrate a few pathogens within several ml of blood,
  - ✧ the presence of inhibitors

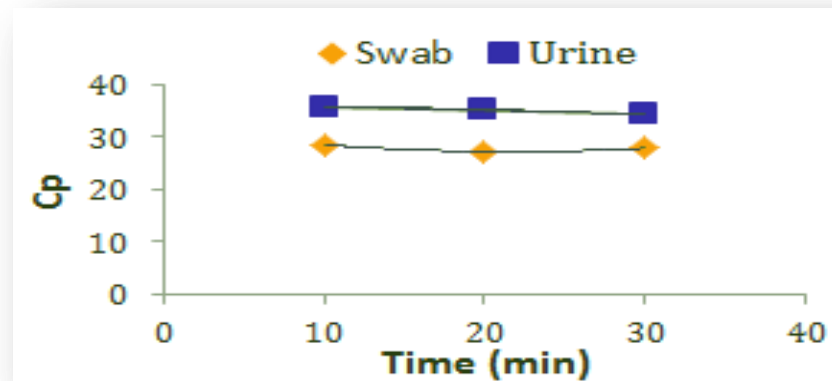
## Critical unmet needs



# ApoH use for clinical or food bacterial infection

ApoH work with different complex target matrices

- ✓ **Whole blood** : sensitivity as high as 1-2 bacteria/mL (spiked)
- ✓ **Feces** : *Mycobacterium avium* spp *paratuberculosis*
- ✓ **Food**: Reducing the detection timing of *Salmonella* from raw milk meat from 20-24 hr up to 8-10 hr (we presently run work to get diagnostic within 2 hr).
- ✓ **Urine**: *Chlamydia* detection with qPCR after ApoH beads step



→ ApoH exhibit a high affinity for infectious bacteria, but a low affinity for commensal bacteria from the gut or from collections (ATCC).

# ApoH use in clinical bacterial infection

Very large capabilities of capture of pathogenic bacteria

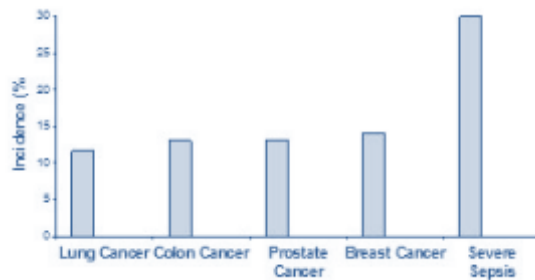
<i>Acinetobacter baumannii</i>	<i>Corynebacterium sp.</i>	<i>Mycobacterium abscessus</i>	<i>Salmonella typhimurium</i>
<i>Acinetobacter Iwoffii</i>	<i>Corynebacterium xerosis</i>	<i>Mycobacterium chelonae</i>	<i>Serratia marcescens</i>
<i>Acinetobacter sp.</i>	<i>Enterobacter aerogenes</i>	<i>Neisseria cinerea</i>	<i>Sphingomonas paucimobilis</i>
<i>Bacillus cereus</i>	<i>Enterobacter cloacae</i>	<i>Nocardia farcinica</i>	<i>Staphylococcus aureus</i>
<i>Bacillus sp.</i>	<i>Enterococcus faecalis</i>	<i>Ocrobactrum anthropi</i>	<i>Staphylococcus epidermidis</i>
<i>Bacillus subtilis</i>	<i>Enterococcus faecium</i>	<i>Parabacteroides distasonis</i>	<i>Staphylococcus haemolyticus</i>
<i>Bacteroides fragilis</i>	<i>Enterococcus gallinarum</i>	<i>Porphyromonas endodontalis</i>	<i>Staphylococcus hominis</i>
<i>Bacteroides ureolyticus</i>	<i>Escherichia coli</i>	<i>Propionibacterium acnes</i>	<i>Stenotrophomonas maltophilia</i>
<i>Campylobacter fetus</i>	<i>Fusobacterium nucleatum</i>	<i>Proteus mirabilis</i>	<i>Streptococcus agalactiae</i>
<i>Candida albicans</i>	<i>Fusobacterium sp.</i>	<i>Proteus vulgaris</i>	<i>Streptococcus bovis</i>
<i>Capnocytophaga canimorus</i>	<i>Klebsiella oxytoca</i>	<i>Providencia stuartii</i>	<i>Streptococcus D group</i>
<i>Chlamydia trachomatis</i>	<i>Klebsiella pneumoniae</i>	<i>Pseudomonas aeruginosa</i>	<i>Streptococcus mitis</i>
<i>Citrobacter freundii</i>	<i>Legionella pneumophila</i>	<i>Pseudomonas sp.</i>	<i>Streptococcus parasanguinis</i>
<i>Citrobacter koseri</i>	<i>Listeria sp.</i>	<i>Pseudomonas stutzeri</i>	<i>Streptococcus pneumoniae</i>
<i>Clostridium difficile</i>	<i>Micrococcus luteus</i>	<i>Salmonella arizonae</i>	<i>Streptococcus pyogenes</i>
<i>Clostridium perfringens</i>	<i>Micrococcus sp.</i>	<i>Salmonella enteritidis</i>	<i>Tropheryma whipplei</i>
<i>Corynebacterium ammoniagenes</i>	<i>Mycobacter sp.</i>	<i>Salmonella sp.</i>	Other ongoing ...

## Sepsis

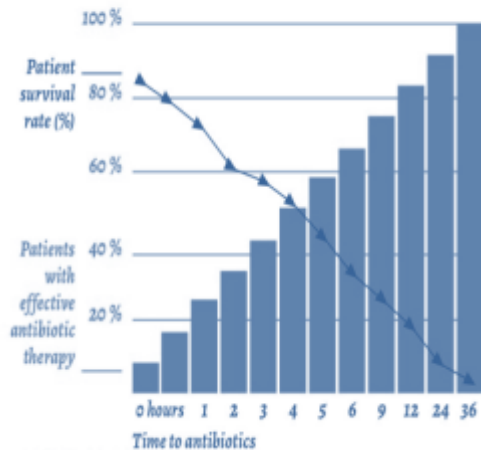


**Sepsis:** Severe widespread infection syndrome of the human body caused by pathogenic germs.

**Sepsis affects more than 20 millions people throughout the world per year**



Sepsis is one of the major cause of death for hospitalized patients : with a mortality rate of 28.3% to 41.1% in North America and Europe.



### Current procedures:

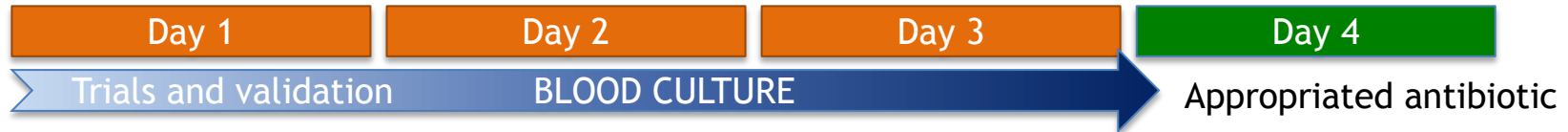
1. **Culture:** visualization through bacterial growth (colonies forming).  
Limitation : duration, only 30% of bacteria are positive in culture...
2. **Sensitive methods** (i.e. : PCR, RPA)  
Limitations: complex sample sensitivity issues due to presence of inhibitors and low pathogen load



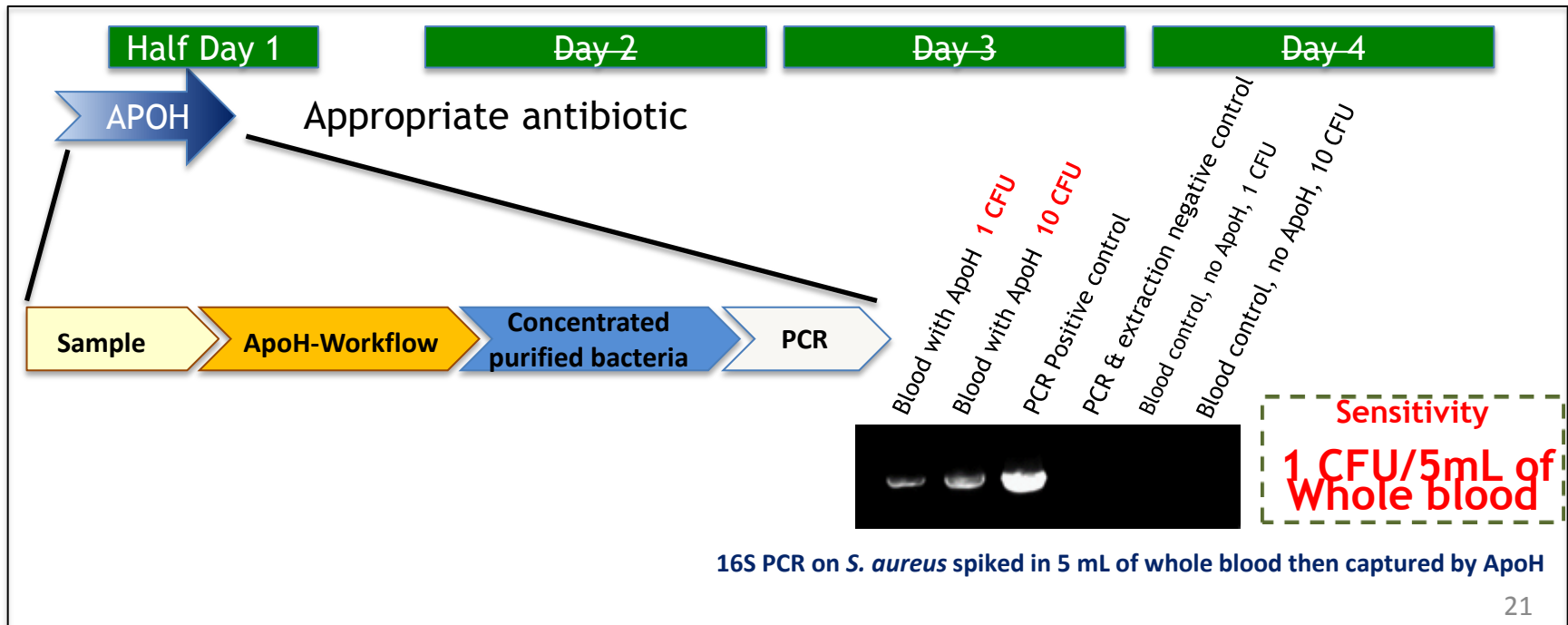
# ApoH use for clinical or food bacterial infection

## ApoH & sepsis high sensitive detection in whole blood

For a current bacterial load of 0 to 10 bacteria/mL of whole blood, there is a huge need to increase sensitivity through concentration.



ApoH-T is the only marketed solution able to highly concentrate bacterial load for optimal detection (1 CFU/ 5mL of whole Blood from clinical samples)



# ApoH for clinical bacterial infection

## Nosocomial infections from different hospital services

### Clinical data

147 CO<sub>2</sub>-producing blood culture samples

64 blood culture-positive

56 Blood culture -negative

27 blood culture-false positive  
(CO<sub>2</sub> positive but negative sub cultivation)

64 positives/ApoH<sup>-</sup>  
Subcultivation & PCR

64 positives / ApoH<sup>+</sup>  
Subcultivation & PCR

0 positive / ApoH<sup>-</sup>  
Subcultivation & PCR

11 positives / ApoH<sup>+</sup>  
Subcultivation & PCR

0 positive / ApoH<sup>-</sup>  
Subcultivation & PCR

9 positives ApoH<sup>+</sup>  
Subcultivation & PCR

**Confirmation**  
of all 64 positive cases

**Detection of**  
**11 occult infections**

*Micrococcus* sp. (n=1)  
*Pseudomonas* sp. (n=1)  
*S. aureus* + *S. epidermidis* (n=1)  
*S. capitis* + *Dermabacter* (n=1)  
*Staphylococcus* sp. (n=3)  
*Tropheryma whipplei*  
Unidentified yeast (n=1)  
Positive PCR detection of 16S  
undetermined (n=2)

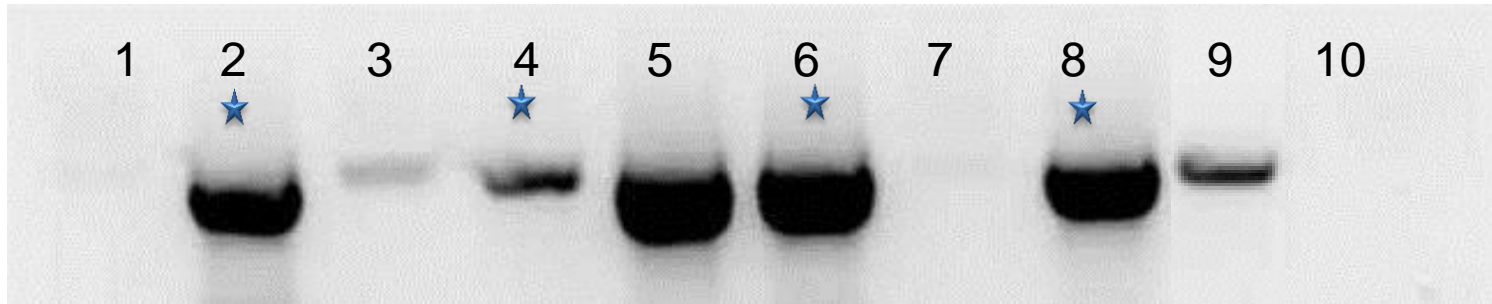
**Detection of**  
**9 occult infections**

*Bacteroides ureolyticus* (n=1)  
*Bilophila wadsorthia* (n=1)  
*Capnocytophaga canimorsus* (n=1)  
Cocci Gram positif (n=1)  
*P. oris* + *P. endodontalis* (n=1)  
*S. epidermidis* + *Bacillus cereus* (n=1)  
*Str. mitis* + *Str. pyogenes* (n=1)  
Positif PCR 16S non déterminé (n=1)  
Positif PCR 18S non déterminé (n=1)

→ ApoH beads **strongly increases** the detection sensitivity of nosocomial infections  
consequently **avoiding 20/147 ( 13.6%) of false negative diagnostics**

# ApoH use for clinical detection bacterial infection

ApoH avoid false negatives due to PCR inhibitors



- 1: *K. pneumoniae* without ApoH beads
- ★ 2: *K. pneumoniae* **with** ApoH beads
- 3: *S. aureus* without ApoH beads
- ★ 4: *S. aureus* **with** ApoH beads
- 5: *Coagulase-négative* Staphylococcus without ApoH beads
- ★ 6: *Coagulase-négative* Staphylococcus **with** ApoH beads
- 7: *P. acnes* without ApoH beads
- ★ 8: *P. acnes* **with** ApoH beads
- 9: Positif control (Bacterial DNA)
- 10: H<sub>2</sub>O

→ ApoH beads concentrate bacteria from hemocultures increasing the PCR signal

→ ApoH eliminate inhibitor inducing false negative

## P2-138 Concentration of Bacterial Pathogens Using Apolipoprotein H

Tuesday, August 5, 2014

Exhibit Hall D (Indiana Convention Center)

Erin Almand, North Carolina State University, Raleigh, NC  
Rebecca Goulter, North Carolina State University, Raleigh, NC  
Lee-Ann Jaykus, North Carolina State University, Raleigh, NC



**Introduction:** Concentration of bacteria from food or environmental samples prior to detection could reduce or even eliminate the need for cultural enrichment. A broadly reactive ligand with the ability to concentrate a variety of microbes from relevant sample matrices could facilitate this type of sample preparation. The human plasma protein Apolipoprotein H (ApoH) has been shown to have a high affinity for a number of Gram- and Gram+ bacteria.

**Purpose:** To investigate the utility of ApoH conjugated to magnetic beads for the capture and concentration of select foodborne bacterial pathogens.

**Methods:** Overnight cultures of *Escherichia coli* O157:H7, *Listeria monocytogenes*, *Salmonella enterica* serovar Enteritidis, and *Staphylococcus aureus* were serially diluted in proprietary binding buffer to concentrations of  $10^3$ ,  $10^5$  and  $10^7$  CFU/100  $\mu$ l. Suspensions were supplemented with 10  $\mu$ l of ApoH conjugated magnetic beads (ApoH Technologies, Villeneuve St Georges, France) and incubated for 60 min at 4°C with rotation. The beads were captured by magnet and washed twice. Both bead and supernatants suspensions were retained for cultural enumeration of bacteria. An aliquot of the beads was also subjected to DNA extraction followed by detection of each pathogen using a SYBR green qPCR method targeting the 16S rDNA gene.

**Results:** Based on loss to supernatant, the ApoH beads showed high capture efficiency (73.4-100%) for all four pathogens tested and at all three concentrations ( $10^3$ ,  $10^5$  and  $10^7$  CFU/100  $\mu$ l.) In most cases, there were no statistically significant differences in capture efficiencies when comparing pathogens or initial cell concentration ( $P > 0.05$ ,  $n = 3$ ). The SYBR green qPCR results were more variable but in general, assay detection limits after ApoH capture and qPCR were approximately one log CFU higher compared to input cell numbers.

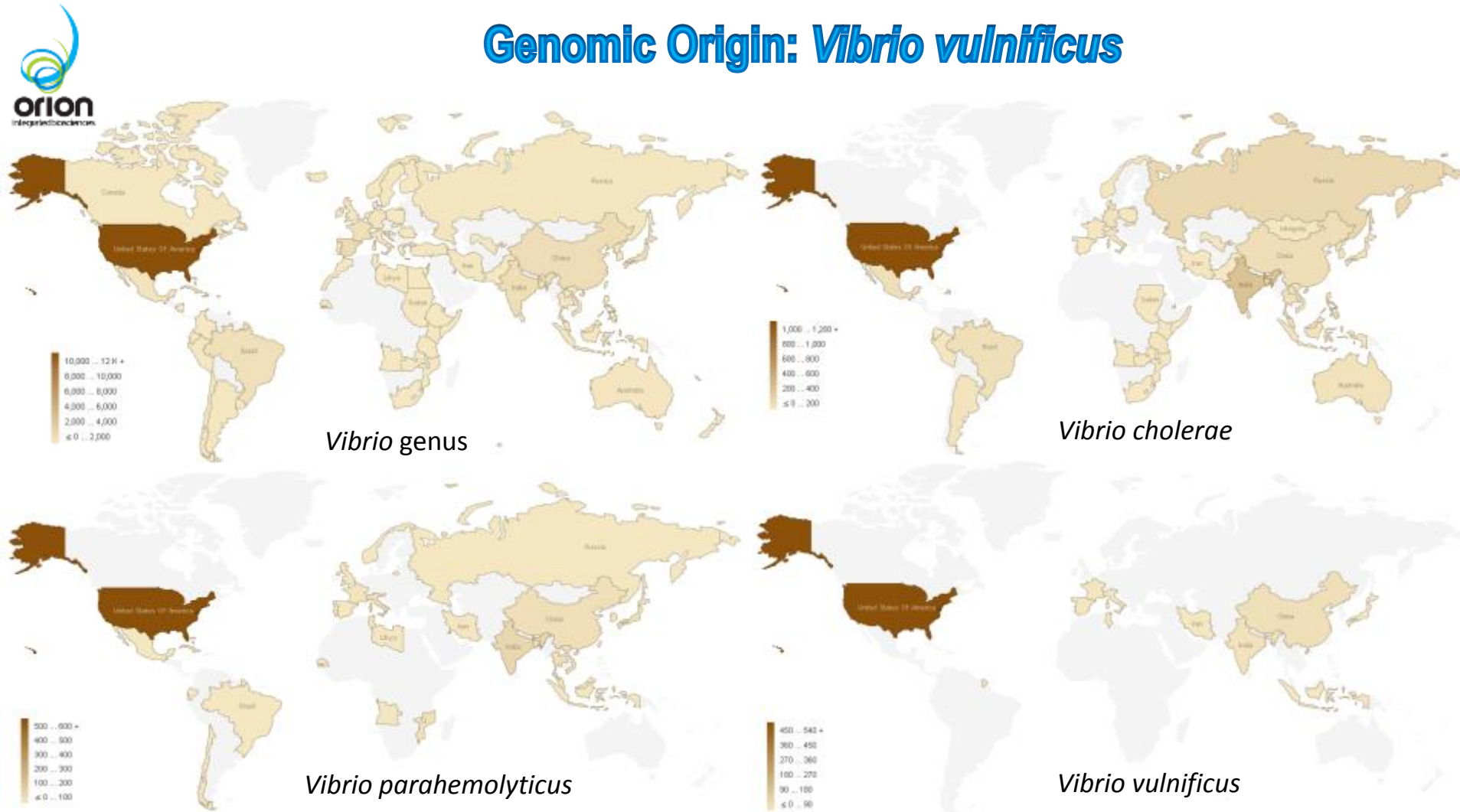
**Significance:** ApoH conjugated magnetic beads show promise for concentration of bacterial pathogens in preparation for detection using cultural methods or qPCR.

Back to: [Poster Session - Pathogens, Epidemiology, Novel Laboratory Methods, Food Defense, Communication Outreach and Education, General Microbiology, Dairy and Other Food Commodities, Food Toxicology](#)

# ApoH sample preparation – environmental FLU

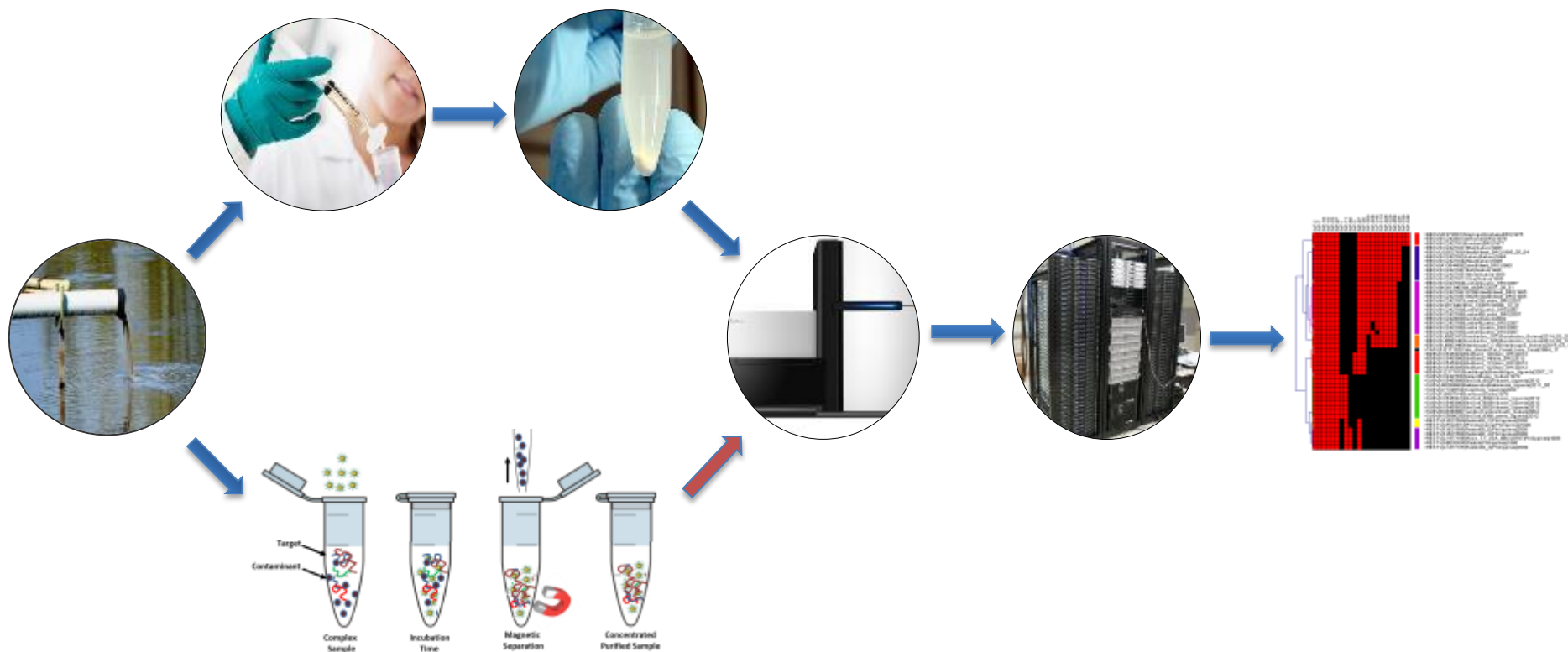
## NGS-metagenomic analysis

### Genomic Origin: *Vibrio vulnificus*



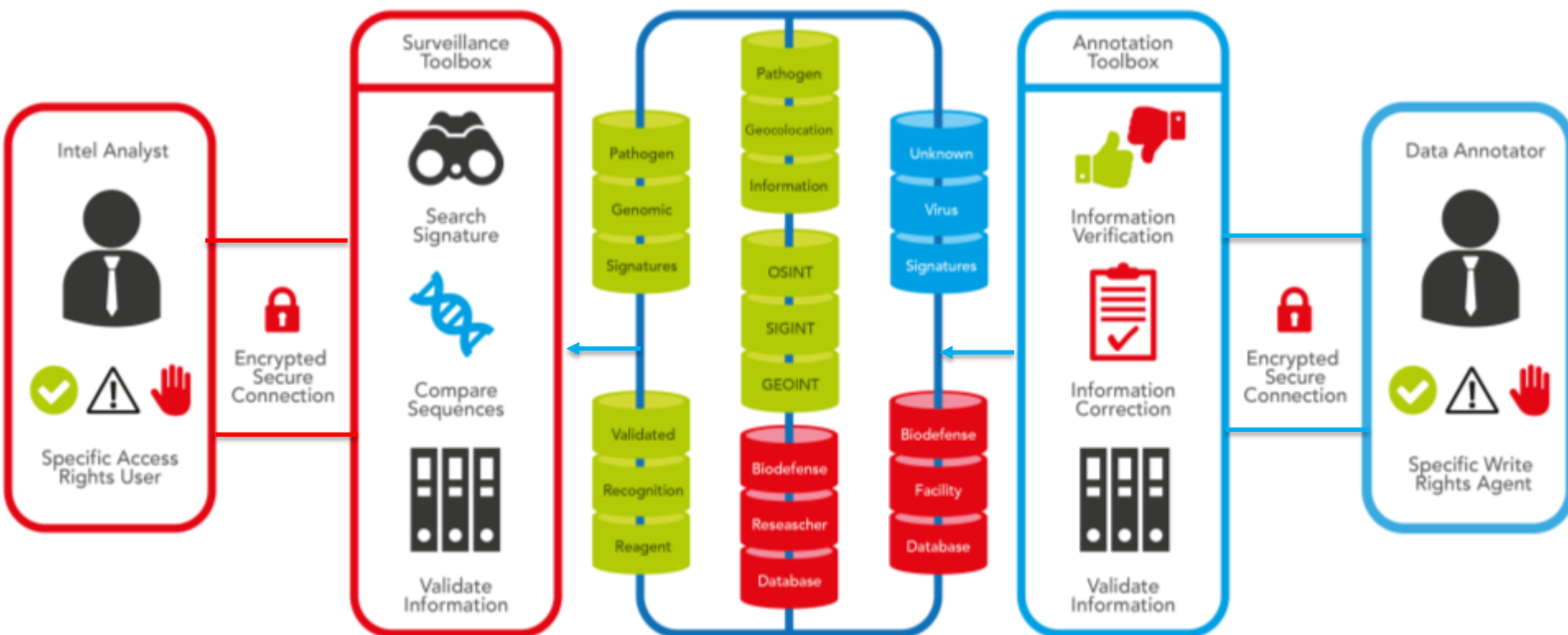


# ApoH deployment



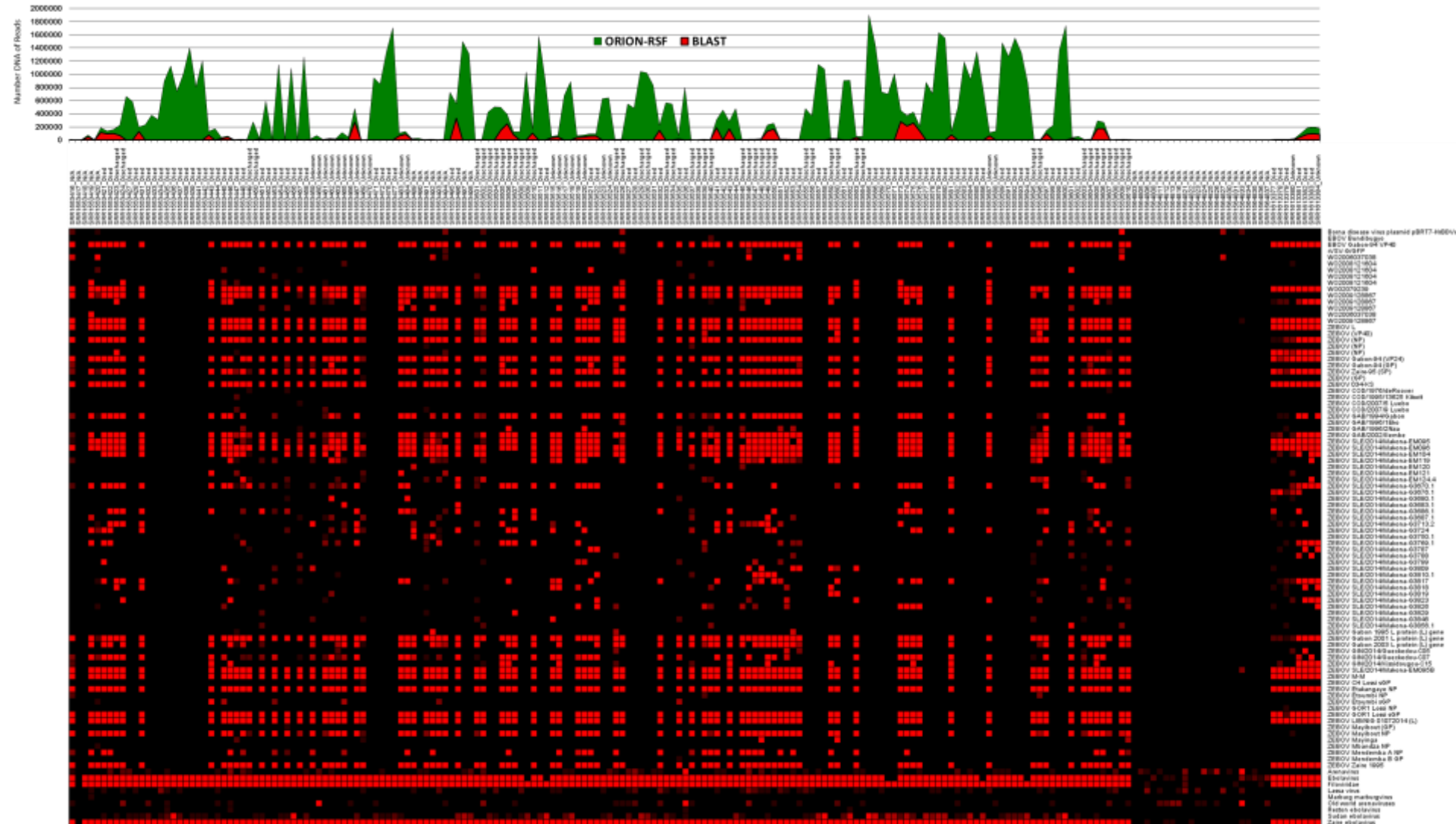


# Integrated Biodefense Analysis System



**Large Scale Metagenomic Analysis:**

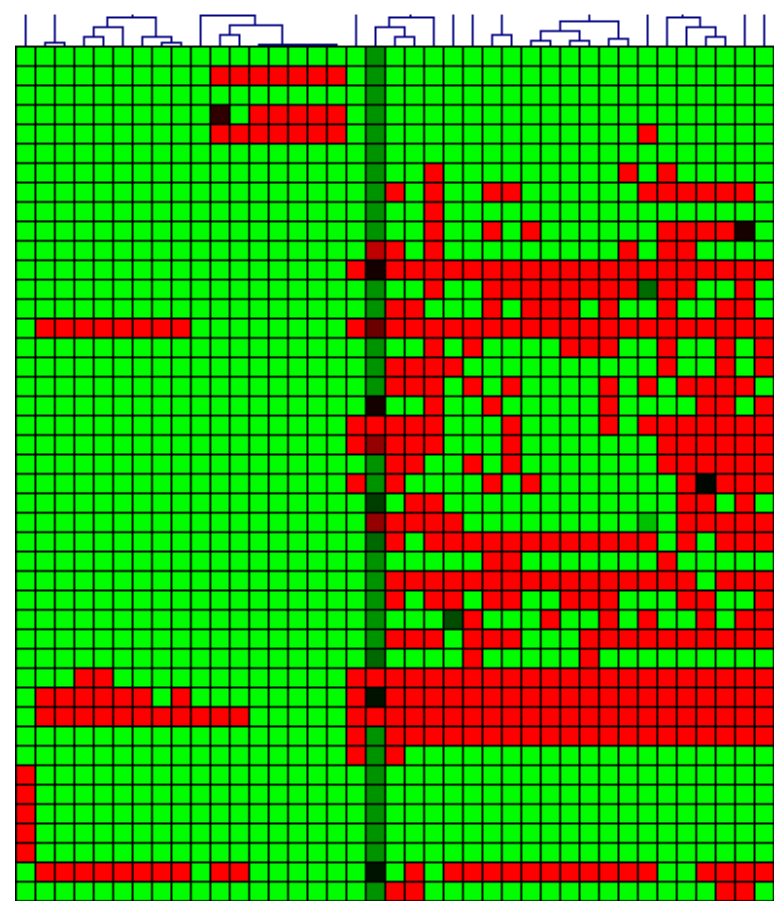
- Quasispecies
- Co-Infection and Biomarker
- Pathogen discovery and threat assessment



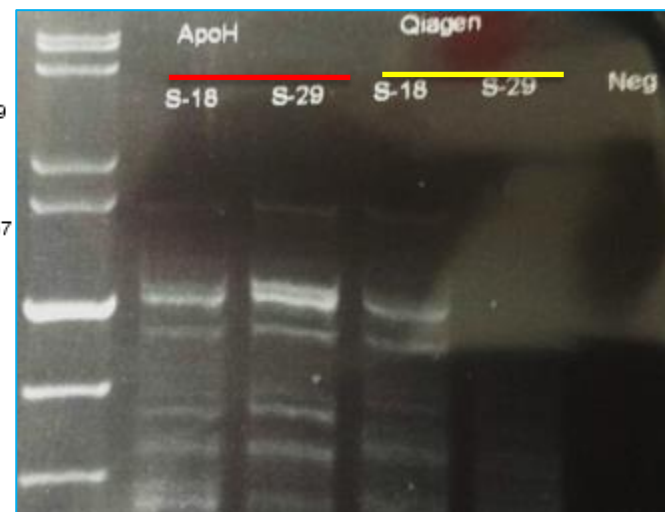
# NGS-Metagenomic analyses of Water Samples

Prepared with and without ApoH

Undetermined\_S0  
30B-72213\_S1  
30S-72213\_S4  
120B-72213\_S3  
70B-72213\_S2  
70S-72213\_S6  
120S-raw\_S6  
120S-72213\_S6  
70S-raw\_S6  
DAC1\_S24  
Bat6\_S10  
Bat6\_S11  
Pos-ctrl\_S23  
Vv1-Q5\_S19  
Vv2-Plus\_S20  
Vv3-Q5\_S21  
Vv4-Q5\_S22  
Vv7\_S9  
Neg\_S24  
Vv12\_S14  
Vv15\_S16  
Vv8\_S10  
Vv23\_S23  
Vv18\_S19  
Vv16\_S17  
Vv22\_S22  
Vv1\_S1  
Vv2\_S2  
Vv13\_S15  
Vv21\_S21  
Vv20\_S20  
Vv3\_S3  
Vv4\_S4  
Vv11\_S13  
Vv17\_S18  
Vv10\_S12  
Vv5\_S7  
Vv6\_S8  
Vv9\_S11

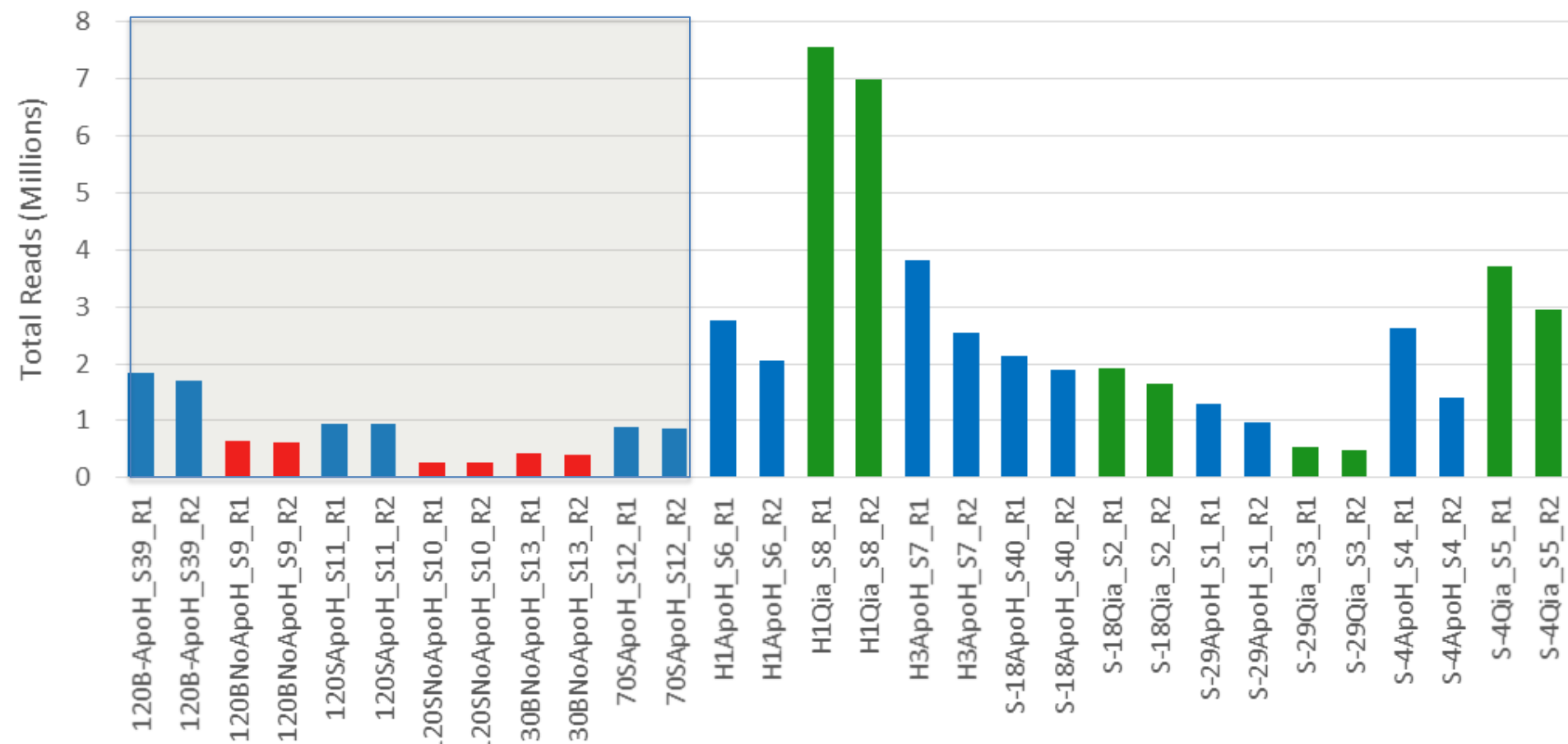


uncultured *Desulfobacterium* sp.  
*Trichuris trichiura*  
*Staphylococcus aureus* subsp. *aureus* 85-1322  
*Legionella pneumophila* subsp. *pneumophila*  
*Escherichia* sp. 3\_2\_53FAA  
*Streptococcus suis* 98HAH33  
*Vibrio cholerae* O395  
*Vibrio cholerae* AM-19226  
*Aliivibrio wodanis*  
*Vibrio anguillarum* 775  
*Listonella anguillarum* M3  
*Vibrio cholerae* MS6  
*Vibrio parahaemolyticus* RIMD 2210633  
*Listonella anguillarum* serovar O1  
Bacteria  
*Vibrio tubiashii* ATCC 19109  
*Vibrio cholerae*  
*Vibrio mimicus* SX-4  
*Vibrio furnissii* NCTC 11218  
*Vibrio vulnificus* NBRC 15645 = ATCC 27562  
*Vibrio parahaemolyticus* O1:Kuk str. FDA\_R31  
*Vibrio harveyi* group  
*Vibrio alginolyticus* NBRC 15630 = ATCC 17749  
*Vibrio* sp. 16  
*Vibrio tasmaniensis* LGP32  
*Vibrio* sp. Ex25  
*Shewanella baltica* OS185  
*Vibrio parahaemolyticus* UCM-V493  
*Vibrio parahaemolyticus* O1:K33 str. CDC\_K4557  
*Vibrio parahaemolyticus*  
*Vibrio harveyi*  
*Vibrio coralliilyticus*  
Gammaproteobacteria  
Proteobacteria  
Unclassified  
*Vibrio campbellii* ATCC BAA-1116  
*Marinomonas posidonica* IVIA-Po-181  
*Amycolatopsis lurida* NRRL 2430  
*Acinetobacter baumannii* AC12  
*Desulfitobacterium hafniense*  
*Pyronema omphalodes* CBS 100304  
uncultured organism  
cellular organisms  
*Chlorobium chlorochromatii* CaD3



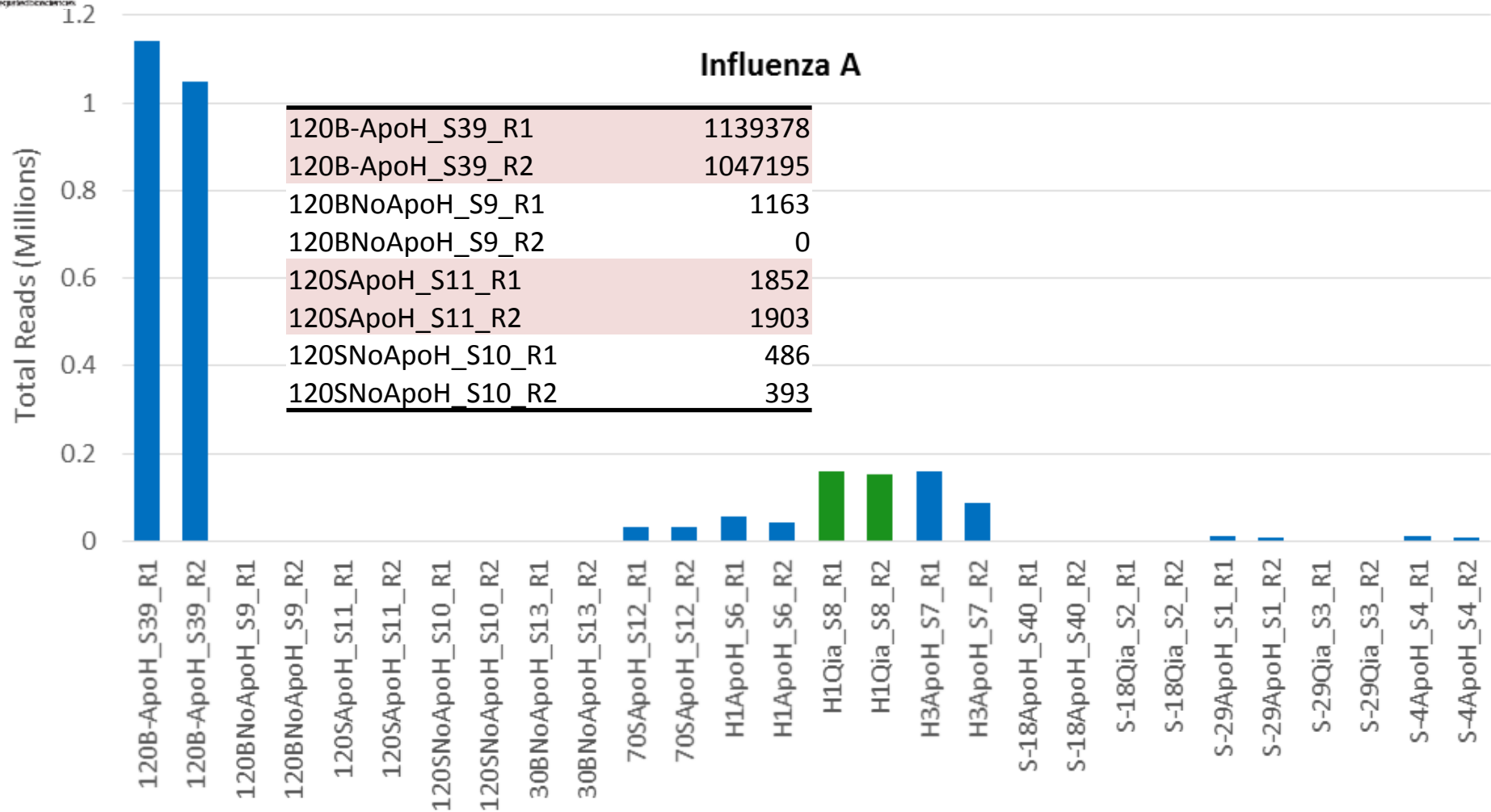
# ApoH sample preparation – environmental FLU

## NGS-metagenomic analysis



# ApoH sample preparation – environmental FLU

## NGS-metagenomic analysis

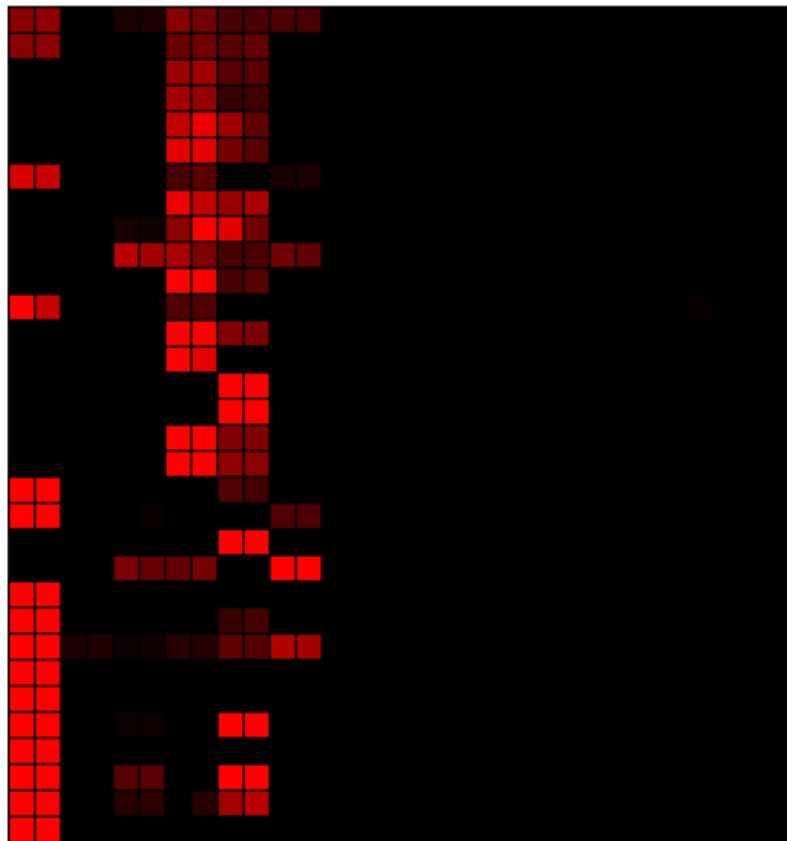


# ApoH sample preparation – environmental FLU

## NGS-metagenomic analysis



30BNoApoH\_S13  
 30BNoApoH\_S13\_R2  
 120B-ApoH\_S39\_R2  
 120B-ApoH\_S39  
 120SNoApoH\_S10\_R2  
 120SNoApoH\_S10  
 120SApoH\_S11  
 120SApoH\_S11\_R2  
 70SApoH\_S12\_R2  
 70SApoH\_S12  
 120BNoApoH\_S9  
 120BNoApoH\_S9\_R2  
 H1ApoH\_S6  
 H1ApoH\_S6\_R2  
 H1Qia\_S8  
 H1Qia\_S8\_R2  
 H3ApoH\_S7  
 H3ApoH\_S7\_R2  
 S-29ApoH\_S1  
 S-29Qia\_S3\_R2  
 S-29Qia\_S3  
 S-18ApoH\_S40  
 S-29ApoH\_S1\_R2  
 S-18ApoH\_S40\_R2  
 S-18Qia\_S2\_R2  
 S-18Qia\_S2  
 S-4ApoH\_S4\_R2  
 S-4Qia\_S5\_R2  
 S-4Qia\_S5  
 S-4ApoH\_S4

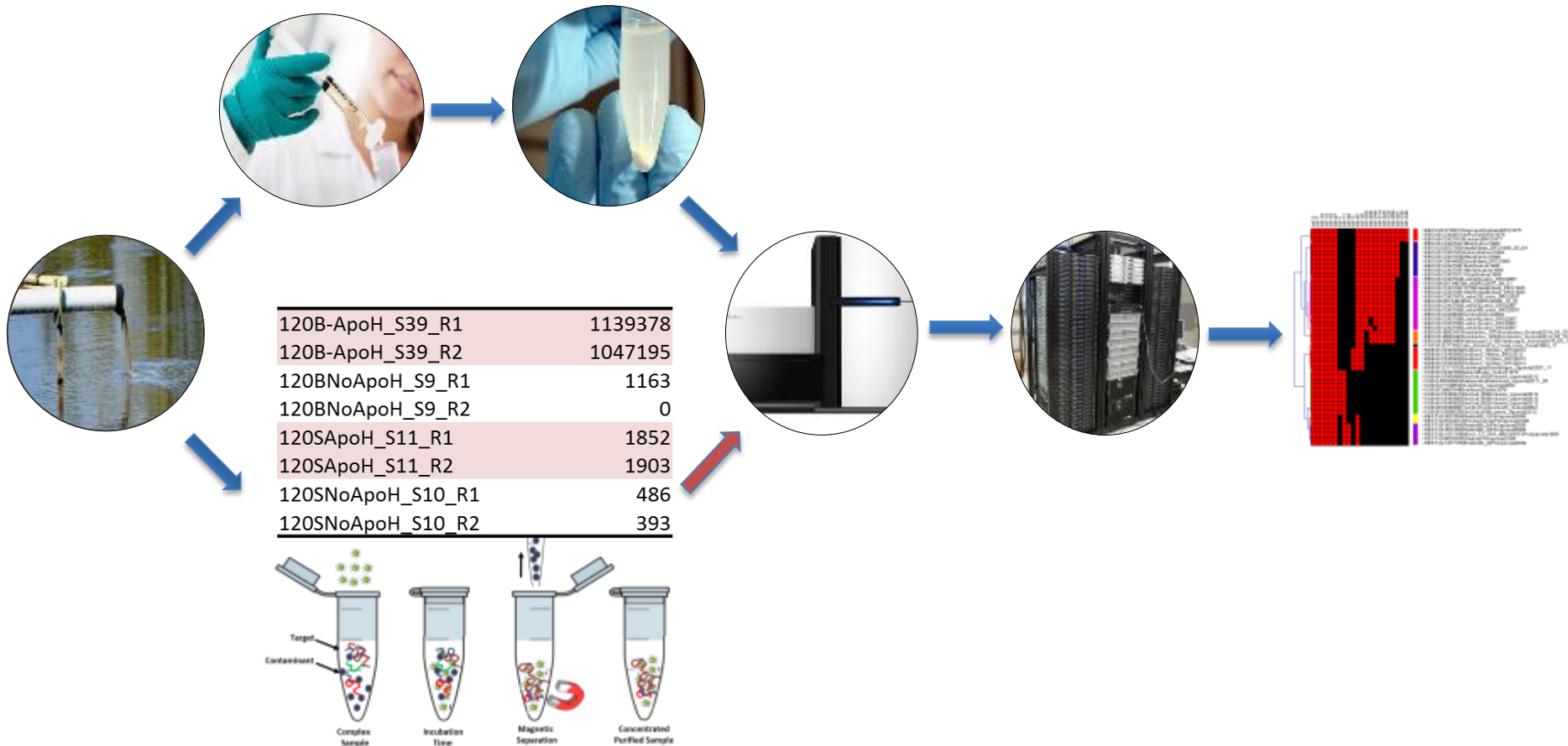


*Ilumatobacter coccineus* YM16-304  
*Variovorax paradoxus*  
*Rhodomicrobium vannielii* ATCC 17100  
*Actinoplanes missouriensis* 431  
*Magnetospirillum magneticum* AMB-1  
 [Cellvibrio] gilvus ATCC 13127  
 Alphaproteobacteria  
*Janthinobacterium agaricidamnosum* NBRC 102515 = DSM 9628  
*Streptomyces clavuligerus* ATCC 27064  
*Synechococcus* sp. KORDI-100  
*Arthrobacter arilaitensis* Re117  
 Burkholderia  
*Rhodopseudomonas palustris* HaA2  
*Guillardia theta* CCMP2712  
*Planktothrix agardhii* NIVA-CYA 126/8  
*Thermodesulfatator indicus* DSM 15286  
*Streptomyces bingchenggensis* BCW-1  
*Tsukamurella paurometabola* DSM 20162  
 Betaproteobacteria  
 Gammaproteobacteria  
*Suillus luteus* UH-Slu-Lm8-n1  
*Synechococcus* sp. WH 8102  
 uncultured bacterium A1Q1\_fos\_4  
 Comamonadaceae  
 Proteobacteria  
*Fusobacterium nucleatum* subsp. polymorphum ATCC 10953  
*Morus notabilis*  
*Rhodospirillum photometricum* DSM 122  
*Taylorella asinigenitalis* 14/45  
*Helicobacter felis* ATCC 49179  
*Streptomyces*  
*Thiomonas* sp. CB2



# ApoH sample preparation & NGS-metagenomic analysis

## CONCLUSION



# ApoH use for pathogen detection & metagenomics

- Ultra-sensitive ApoH-capture step significantly **reducing the time to result and sensitivity issues of the existing culture and PCR techniques** thanks to:
  - (i) bacterial concentration,
  - (ii) antibiotic or inhibitors elimination (from blood or tissues).
- In cases of life-threatening infections (septicemia..) or, of HAI screening, ApoH leads to major benefits:
  - (i) **early diagnosis of disease** and consequently better individual prompt treatment strategy,
  - (ii) **early patient isolation.**
- **ApoH increases the number of metagenomics** reads leading to a more accurate known and unknown pathogen detection (coverage/diversity)

# General conclusion 1

## ApoHa increases performances and value of diagnostic products

The ApoHa pre-analytical step is **simple, fast, of broad usage, and compatible with multiplexing detection of viruses & bacteria**:

- by **enhancing the sensitivity** of existing viruses detection **ApoHa provides major competitive advantages** for:
  - ✓ **early diagnosis of infection and diseases** leading to better individual prompt treatment strategy,
  - ✓ **Fine tuning of therapeutic monitoring** consequently with an improved adaptation of **therapeutic** protocols
  - ✓ **earlier patient isolation** as needed
- by **improving**:
  - ✓ **epidemiological surveillance**,
  - ✓ **reduction of infectious disease risks** during **transfusions & transplantations**.

**These factors are particularly useful in case of life-threatening infections (septicemia..) or, of HAI screening**

- For **bacterial contamination**, ApoH allows their capture for ultra-sensitive detection significantly **reducing the time to the results** of the existing culture and PCR techniques

## General conclusion 2

### ApoHa increases performances and value of diagnostic products

- The ApoH-coated beads can be used to **capture, cultivate, detect & identify pathogens (virus & bacteria) from different origins**:
  - ✓ Environment (Water, soil, plants)
  - ✓ Human (any kind of sample)
  - ✓ Animals (including insects, any kind of sample)
  - ✓ Food (security)
  - ✓ Industry (biological productions: vaccines, proteins etc)
- **Different issues** can be considered :
  - ✓ Public health (Epidemiology, Biosecurity , Bioterrorism)
  - ✓ Clinical (Translational research ex Nosocomial infections, diseases evolution & treatment efficacy)
  - ✓ Veterinary issues (bio-security, Food)
  - ✓ Biodiversity
  - ✓ Food security
- In addition, technology of the ApoH-coated nano-magnetic beads with metagenomics **allows** rapid **isolation** and **identification** of **unknown pathogens**!

# Special thanks & contacts

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- ✓ European USDEP project
- ✓ University Montpellier 1, France
- ✓ The French Research Institute for Development
- ✓ The French Bank for Innovation (BPI, formerly OSEO)
- ✓ The Region Languedoc–Roussillon – France
- ✓ Lab d'Immuno-Physiopathologie Moléculaire Comparée (LIPMC)
- ✓ The ApoH-Technologies engineer-team & Ilias Stefas (CEO)
- ✓ **Biotechnologies-Développement-Conseil** (France, USA, Israel & Japan),  
**Christian Policard CEO** (former CEO of Pasteur Institute Business Development  
 & former CEO of Sanofi-Pasteur Diagnostics) [cpolicard@biotechdevconseil.com](mailto:cpolicard@biotechdevconseil.com)







**THANKS FOR YOUR ATTENTION !**  
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**Increasing sensitivity**  
**Improving diagnostics**



technologies  
**ApoH**



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# ApoH capture a proprietary technology

## ApoH-Technologies products:

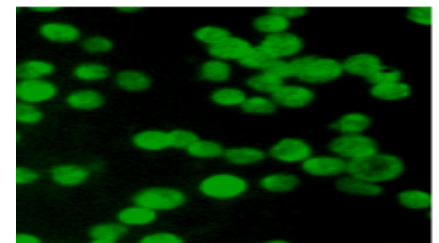
Solutions for samples pre-treatment & microorganisms capture for their ultra-sensitive detection & characterization

- ApoHa-coated nano-magnetic beads:**

**Human ApoHa:** ApoH-CaptoBAC kit ( bacteria )  
(ApoH) ApoH-CaptoVIR kit ( virus )  
ApoH-CaptoFUN kit ( fungi )

**Synthetic Peptides:** Peps6-CaptoBAC kit ( bacteria )  
(Peps6) Peps6-CaptoVIR kit ( virus )  
Peps6-CaptoFUN kit ( fungi )

→ Nano-magnetic beads for molecular and culture assays



- ApoH-coated micro-plates:**

→ ApoH-coated micro-plates for ELISA immunoassays

- ApoH protein:**

→ For customized use

[www.apohtech.com](http://www.apohtech.com)



Increasing sensitivity  
Improving diagnostics

