

# Four Easy Steps To Collect The Specimen

Please refer to package insert for complete instructions.<sup>10</sup>

- 1

Partially open the swab package and remove the swab.
- 2

Vigorously swab the base of the lesion to absorb fluid, being careful not to draw blood. Withdraw the swab without touching any other site outside the lesion. If needed, expose the base of the lesion to access fluid.
- 3

Immediately place the swab into the transport tube so the black score line is at the top of the tube. Align the score line with the top edge of the tube and carefully break the shaft.
- 4

Tightly screw the cap onto the tube.

It is the sole responsibility of the healthcare provider to read and understand the appropriate package insert and comply with applicable local, state, and federal rules and regulations.

## One Swab To Help Diagnose Them All

The Aptima® Multitest Swab Specimen Collection Kit offers versatility in sample collection. The iconic orange vial can be used for the collection of lesion samples for herpes simplex virus testing, in addition to vaginal and penile meatal samples.

The Aptima® Multitest Swab Specimen Collection Kit is indicated for use with the following assays:

- ▶ Aptima Combo 2® Assay for CT/NG

▶ Aptima® Trichomonas vaginalis Assay
- ▶ Aptima® Mycoplasma genitalium Assay

▶ Aptima® HSV 1 & 2 Assay

### The Aptima® HSV 1 & 2 Assay: Proven Performance In Sensitivity And Specificity<sup>10</sup>

	HSV-1		HSV-2	
Sample Type	Sensitivity	Specificity	Sensitivity	Specificity
Aptima Multitest Swab	94.7%	99.6%	98.4%	92.8%
Viral Transport Media	93.4%	99.8%	96.9%	97.5%

**References:** **1.** CDC. Genital Herpes—CDC Fact Sheet. <https://www.cdc.gov/std/herpes/stdfact-herpes.htm>. Published August 28, 2017. Accessed April 18, 2019. **2.** CDC. Incidence, prevalence, and cost of sexually transmitted infections in the United States. <https://www.cdc.gov/std/stats/sti-estimates-fact-sheet-feb-2013.pdf>. Published February 2013. Accessed March 26, 2019. **3.** WHO. Herpes simplex virus: key facts. <https://www.who.int/mediacentre/factsheets/fs400/en/>. Published January 31, 2017. Accessed March 26, 2019. **4.** Hook EW III. A new look at genital herpes: the critical role of the laboratory in diagnosis and management. *MLO Med Lab Obs.* 2012;44(7):8-12. <https://www.mlo-online.com/home/article/13004461/a-new-look-at-genital-herpes-the-critical-role-of-the-laboratory-in-diagnosis-and-management>. Accessed March 26, 2019. **5.** Wald A. Genital HSV-1 infections. *Sex Transm Infect.* 2006 Jun;82(3):189-190. **6.** Workowski KA, Bolan GA; CDC. Sexually transmitted diseases treatment guidelines, 2015. *MMWR.* 2015;64(RR-03):1-137. <https://www.cdc.gov/std/tg2015/tg-2015-print.pdf>. Accessed April 9, 2019. **7.** Freeman EE, et al. Herpes simplex virus 2 infection increases HIV acquisition in men and women: systematic review and meta-analysis of longitudinal studies. *AIDS.* 2006;20(1):73-83. **8.** WHO. *WHO Guidelines for the Treatment of Genital Herpes Simplex Virus.* Geneva, Switzerland: WHO; 2016. **9.** Lichtmacher A, Adams M, Berga S, et al. *Guidelines for Women's Health Care: A Resource Manual*, Fourth Edition. Washington, DC: American College of Obstetricians and Gynecologists; 2014. **10.** Aptima HSV 1 & 2 assay [package insert]. AW-15636-02. San Diego, CA: Hologic, Inc, 2017.

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**Aptima® HSV 1 & 2**  
Assay

**HOLOGIC®**

**Empower** your patients  
with a **type-specific**  
**treatment** plan.

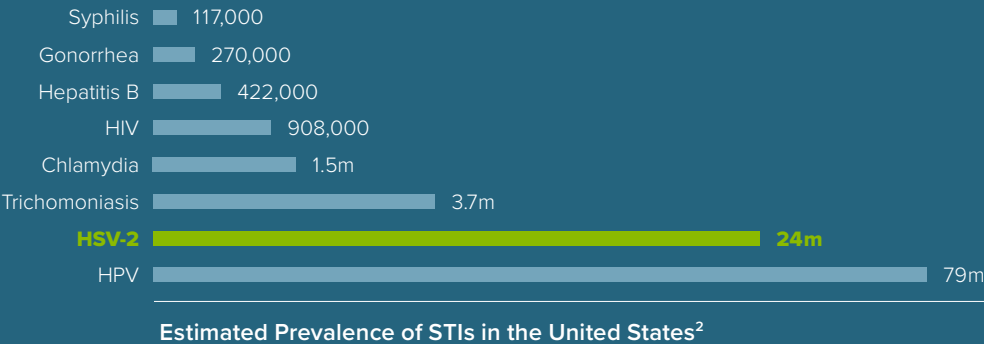
Detect and Distinguish

Use the Aptima® Multitest Swab  
For All Your HSV 1 & 2 Testing

**Aptima® HSV 1 & 2**  
Assay

1 in 6  people in the US have genital herpes for ages 19-49<sup>1</sup>

In the United States, HSV-2 is the second-most prevalent STI<sup>2</sup>



Nearly **70%** of the **global population** is impacted by HSV-1<sup>3</sup>

An Effective Treatment Plan Demands Precise, Type-Specific Testing


	HSV-1 <sup>4</sup>	HSV-2 <sup>4</sup>
Clinical features of initial infections	Indistinguishable	Indistinguishable
Duration lesion (initial)	18.8 +/- 6.5 days	21.5 +/- 6.8 days
Days to first recurrence	>6 months	83 days
Average recurrences/year	0.24	3.9
Viral shedding (initial infection)	15%	85%
Viral shedding (recurrent)	2%	98%


Approximately


30%

of genital HSV lesions are now associated with HSV-1<sup>5</sup>

Each HSV type requires unique treatment

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Determine the appropriate treatment regimen of antiviral medication<sup>6</sup>
- 

Providers can counsel patients according to infection type and prevent sexual and perinatal transmission<sup>6</sup>
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Patients can prevent transmission to neonates and among sex partners<sup>3</sup>

**HIV and HSV-2 co-infection**

► Patients with HSV-2 face a **3-5 times higher risk** of HIV acquisition<sup>4,7</sup>

► Treatment plan should include **HIV testing** and HIV risk-reduction strategies<sup>6</sup>

Limitations of Culture Testing Could Impact Patients


	NAAT HSV	Culture
Sensitivity	3-5 times <b>more sensitive</b> than culture <sup>4</sup>	Fair <sup>4</sup>
Lesion Testing	<b>Accurate</b> results throughout the life cycle of a lesion	Most effective at lesion onset, diminishing effectiveness with each stage due to reduced viral shedding
Specimen Stability	<b>14-30 days</b> at room temperature	2 hours-3 days (may be impacted by extreme temperatures)
Subtyping	Incorporated into a <b>single process</b> <sup>4</sup>	Frequently requires a second step <sup>4</sup>

Compared to culture, nucleic acid amplification tests (**NAATs**) are **more stable, more accurate, and subtyping is more rapid**<sup>8</sup>


Guidelines Recommend NAAT Tests in the Diagnosis of HSV Infection with Symptoms<sup>6,8,9</sup>

- WHO Recommendation**

“NAATs are increasingly preferred for HSV diagnosis due to higher sensitivity, ease of specimen collection and transportation, and faster results.”<sup>8</sup>


- CDC Recommendation**

“A patient’s prognosis and the type of counseling needed depend on the type of genital herpes (HSV-1 or HSV-2) causing the infection; therefore, the clinical diagnosis of genital herpes should be confirmed by type-specific laboratory testing.”<sup>6</sup>


- ACOG Recommendation**

“Definitive diagnosis should be confirmed by a laboratory test...to determine if HSV-1 or HSV-2 is the cause of the infection.”<sup>9</sup>

