

# FDA Response

## Qualitative Test with Two Outcomes

### **Cutoff for qualitative test:**

- **THRESHOLD** for the **OBSERVED** result for a sample above which the result for a sample is reported as positive and below which the result is reported as negative.

There are three slightly different scenarios.

I) Cutoff is an analytical  
cutoff

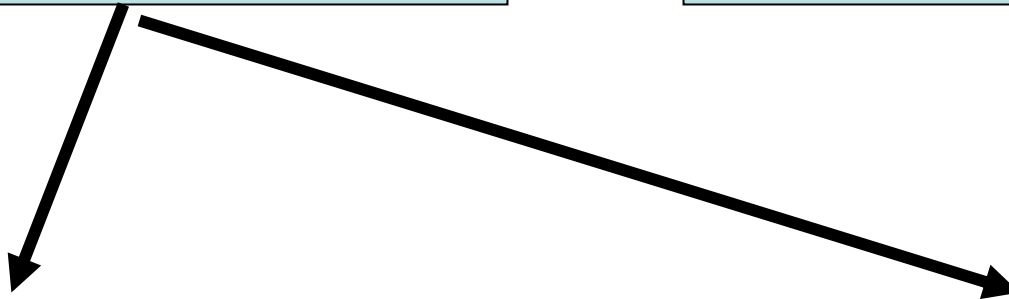
(no analyte vs  
analyte present)

Cutoff =LoB

II) Cutoff is higher  
than LoB

(Non-disease subjects  
have some amount of analyte)

Cutoff =C



I.1) LoB >0

Samples with zero  
concentration have  
noisy results

I.2) LoB=0

Ultrasensitive assay

Samples with zero  
concentration have zero  
results

Answer is provided

- Scenario II  
(cutoff is higher than LoB)
- Scenario I.1 (Cutoff=LoB,  $\text{LoB} > 0$ )
- Scenario II.2 (Cutoff=LoB,  $\text{LoB} = 0$ )

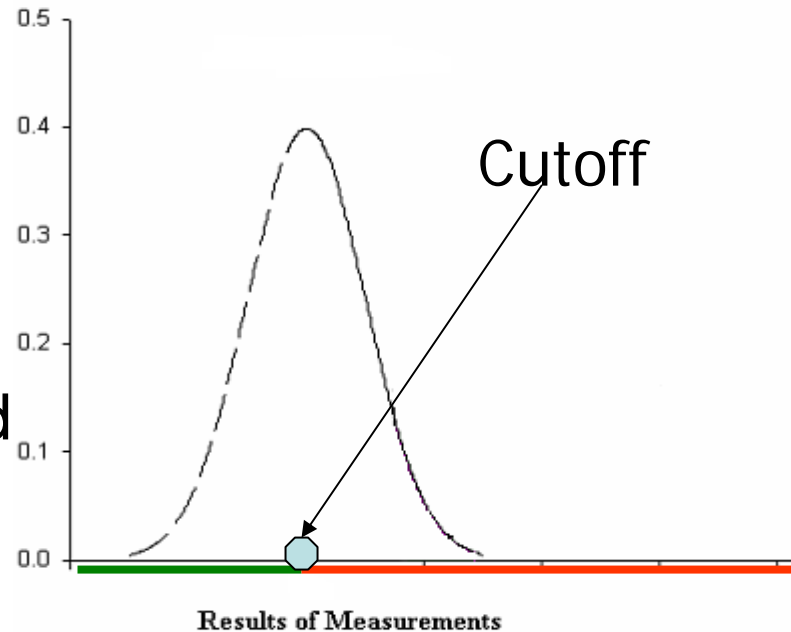
## Frequently Asked Question Submitted by the Audience:

Guidance Documents for several PCR/RT-PCR based IVD devices discuss inclusion of a High Negative sample type in Precision studies. Please explain the rationale for extensive testing of high negative samples. Please explain the clinical relevance/value in obtaining results from high negative samples that can yield highly variable results (from 0-95% rates of detection), particularly in light of the fact that these samples are, by definition, below the Limit of Detection and therefore, by definition, known to not be reproducible.

# Scenario II

Cutoff is based on clinical performance  
(Non-diseased and Diseased subjects have some  
amounts of analyte)

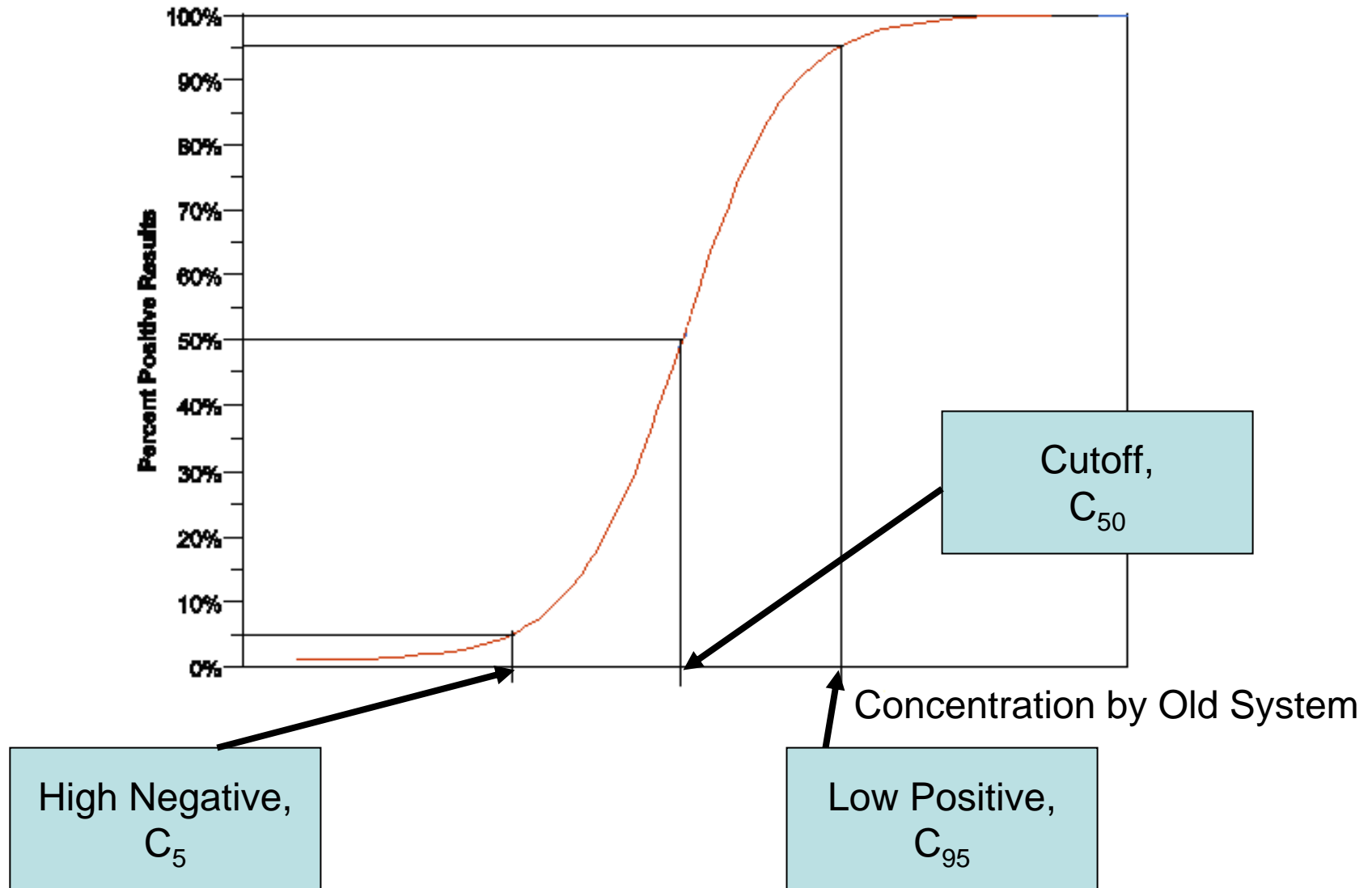
- Actual CONCENTRATION  
in a sample  
with this concentration is  
50% positive and  
50% negative ( $C_{50}$ )  
if a large series of repeated  
tests were performed



See CLSI EP12-A2

Assume that a distribution of  
measurement error is symmetrical.

# Scenario II (cont.)



$C_5$  and  $C_{95}$  are important performance characteristics for qualitative test

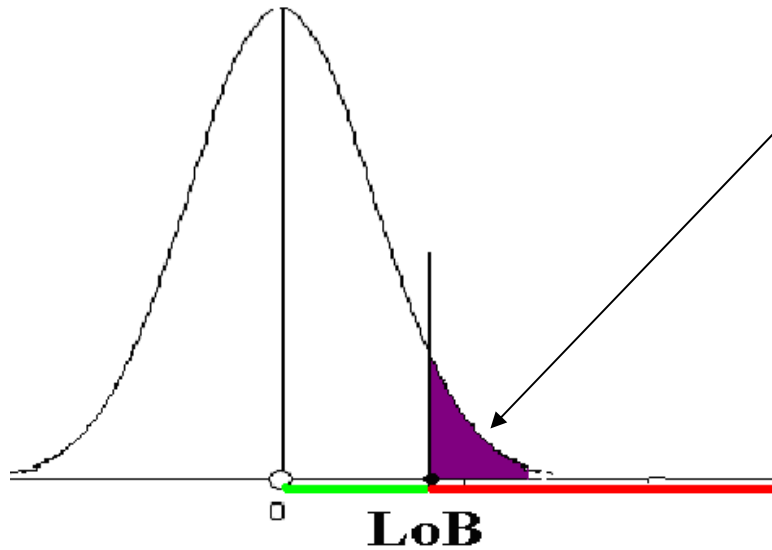
## Scenario II (cont.)

Samples in precision study for qualitative test:

- 1) Sample below the cutoff (around  $C_5$ )
- 2) Sample above the cutoff (around  $C_{95}$ )
- 3) Sample truly negative (zero analyte)
- 4) Sample moderate positive

# Scenario I.1: Cutoff = LoB

Samples with zero concentration have noisy results

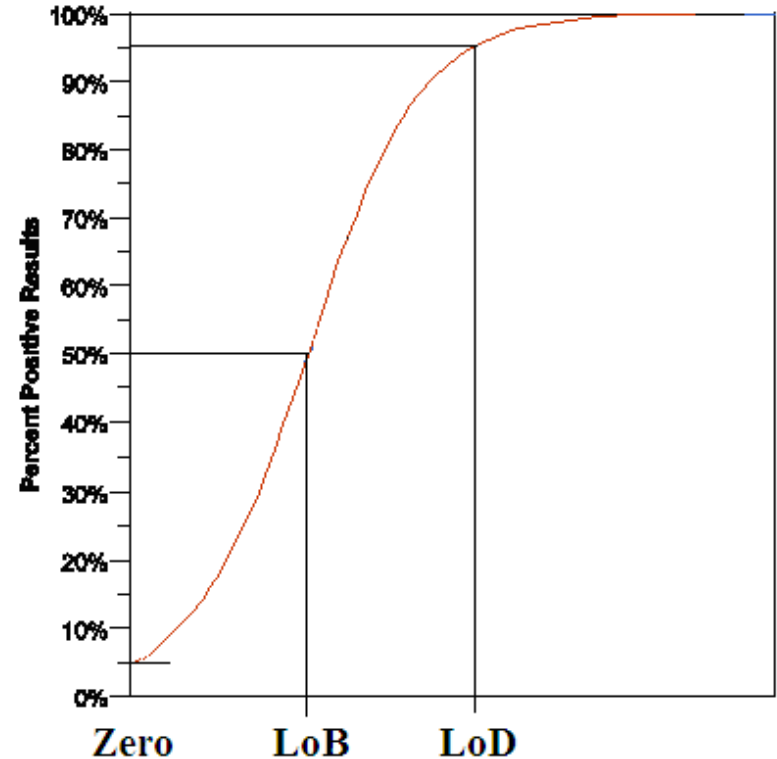


□ Cutoff is based on the performance of the samples with zero concentration, Cutoff=LoB

□ Percent of positive results for the samples with zero concentration is 5%;

□ Percent of positive results for the samples with LoB concentration is 50%;

□ Percent of positive results for the samples with LoD is 95%



$C_5 = \text{zero}$ ,  $C_{95} = \text{LoD}$



## Scenario I.1(cont.)

Samples in precision study for qualitative test:

1) Sample above the cutoff (around LoD)

( $C_{95} = \text{LoD}$ )

2) Sample truly negative (zero analyte)

( $C_5 = 0$ )

3) Sample moderate positive

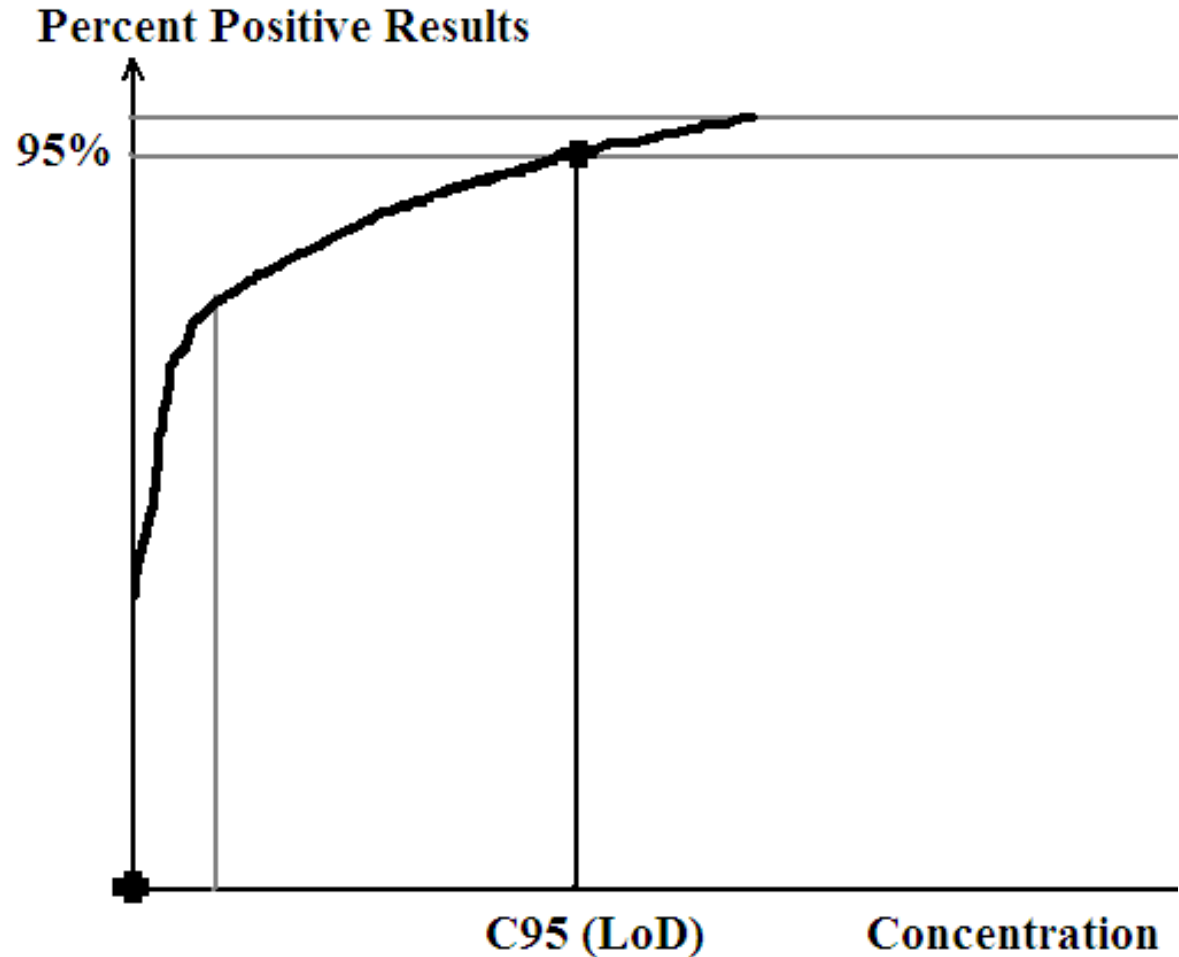
# Scenario 1.2 (cont.)

## Ultrasensitive test

❑ Zero concentration has zero percent positive results;

❑ Concentration corresponding to  $C_t=45$  is close to zero;

❑  $C_{95}$  (LoD)- concentration corresponding to  $C_t=38$ .



# Scenario I.2

LoB=0, Ultrasensitive test

## Example of Ultrasensitive Test: RT-PCR

Consider that Cutoff =45 cycles;

- ❑ If samples are truly negative, all results are “Negative” => Type I error is close to zero.
- ❑ Cutoff is not established based on the truly negative samples (samples with zero concentration);

# Scenario 1.2 (cont.)

**Problem :  $C_5$  not easy to prepare.**

**$C_5$  is very close to 0**

**where large variability.**

If only two points:

**Zero concentration**

percent of positive  
results is 0

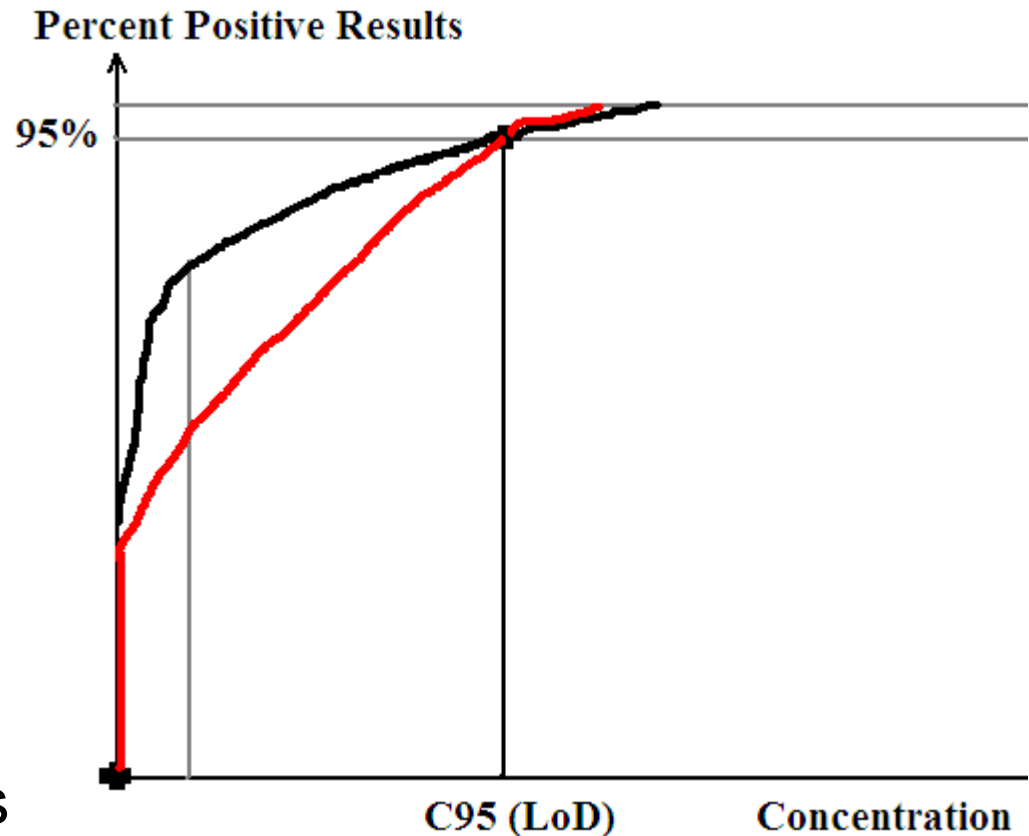
•**LoD concentration**

percent of positive  
results is 95%

then curves of %

positive results of two tests  
can be different

(much uncertainty between two curves if only two points on  
these curves are similar)



## Scenario I.2 (cont.)

### Modified Approach Case A

If the percent of Diseased subjects from the intended use population with the test results less than LoD is less than **10%** of all Diseased subjects of the intended use population , then no need for  $C_5$ .

Modified recommended concentrations for precision studies :

- ☐ truly negative sample
- ☐  $C_{95}$  (LoD) sample
- ☐ moderate positive

## Scenario I.2 (cont.)

### Modified Approach Case B

If the percent of Diseased subjects of the intended use population with test results less than LoD is greater than or equal to **10%** of all Diseased subjects of the intended use population, then a sample from the range  $C_{20}$ - $C_{80}$  is recommended for testing.

Modified recommended concentrations for precision studies :

- ☐ truly negative sample
- ☐  $C_{95}$  (LoD) sample
- ☐ Sample from range  $C_{20}$ - $C_{80}$
- ☐ Moderate positive