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## Feedback on XVII ASF Inter-laboratory Comparison Test (ILCT) 2020

## Dear Dr. Woźniakowski:

This is to confirm the participation of the **National Veterinary Research Institute [NVRI], Poland, (laboratory designation code 23)** in the XVII ILCT 2019-2020 for African Swine fever disease (ASF), organised by the European Union Reference Laboratory (EURL) for ASF with the support of DG SANTÉ. The panel of samples included 16 serum samples, coded as S1 to S16, and 4 tissue samples, coded as T1 to T4, which were distributed for testing the presence of ASF.

A detailed report about the analyses of your results is attached in the annexed 23-ASF<sub>ILCT20</sub> report. Comments and recommendations for each test that your laboratory performed for the ASF ILCT 2020 are showed below:

- 1. ASF antibody detection results: your laboratory used the commercial ELISA ®INGENASA PPA COMPAC 1.1 PPA k3 and the IDVET- indirect ELISA kit (ID Screen® African Swine Fever Indirect) for ASF antibody detection in serum samples. The indirect immunoperoxidase (IPT) and the Immunoblotting (IB) were used as confirmatory tests. Your results were correct and 'as expected' in positive and negative serum samples indicating that the assay systems that you are using are 'fit for purpose' for the detection of antibodies against ASFV. Different results obtained in weak positive serum samples have not been considered since a correct ASF final diagnostic conclusion has been provided combining both ASF virus and antibody detection tests.
- 2. ASF virus detection results: your laboratory used three real time PCR methods, i) the UPL-real time PCR, ii) the commercial real time PCR "Virotype® ASFV PCR Kit Qiagen", and iii) the ID Gene<sup>™</sup> African Swine Fever Duplex, IDVET GENETISC. Different extraction methods were assayed comprising the QIAmp DNA Mini Kit and QIAcube HT extraction method. Your results were correct and 'as expected' in serum and tissue samples indicating that the

## **EURL for ASF**





assay systems that you are using are 'fit for purpose' for the detection of the ASF virus. Different results obtained in weak positive serum samples have not been considered since a correct ASF final diagnostic conclusion has been provided combining both ASF virus and antibody detection tests.

The ASF final diagnostic conclusion provided in each of the samples included in the XVII ASF ILCT 2020has been correct and in line with our expectations. From these results the EU Reference Laboratory for ASF informs that the diagnostic procedures that you are using are 'fit for purpose' to give a correct diagnosis of ASF.

Please contact us if you feel the results for your laboratory have been incorrectly interpreted. Furthermore, also contact us if you require any further information or assistance regarding recommended follow-up and corrective actions arising from the ILCT.

In Valdeolmos, Madrid, Spain, at 14<sup>th</sup> April 2020

Yours sincerely,

Cav.

Dr. Carmina Gallardo, Researcher, Laboratory Coordinator EU reference laboratory for ASF INIA-CISA

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