

Overview

Useful For

Rapid (qualitative) detection of varicella-zoster virus DNA in clinical specimens for laboratory diagnosis of disease due to this virus

This test **should not be used** to screen asymptomatic patients.

Method Name

Real-Time Polymerase Chain Reaction (PCR)/DNA Probe Hybridization

NY State Available

No

Specimen

Specimen Type

Varies

Necessary Information

Specimen source is required.

Specimen Required

Submit only 1 of the following specimens:

Supplies: Sarstedt Aliquot Tube, 5 mL (T914)

Specimen Type: Body fluid

Sources: Spinal, pleural, peritoneal, ascites, pericardial, amniotic, or ocular

Container/Tube: Sterile container

Specimen Volume: 0.5 mL

Collection Instructions: **Do not centrifuge.**

Specimen Type: Swab

Sources: Miscellaneous; dermal, eye, nasal, or throat

Supplies:

-Culturette (BBL Culture Swab) (T092)

-M4-RT (T605)

Container/Tube: Multimicrobe media (M4-RT) and ESwabs

Collection Instructions: Place swab back into multimicrobe media (M4-RT, M4, or M5).

Specimen Type: Genital swab

Sources: Cervix, vagina, urethra, anal/rectal, or other genital sources

Supplies:

-Culturette (BBL Culture Swab) (T092)

-M4-RT (T605)

Container/Tube: Multimicrobe media (M4-RT) (T605) and ESwabs

Collection Instructions: Place swab back into multimicrobe media (M4-RT, M4, or M5).

Specimen Type: Respiratory

Sources: Bronchial washing, bronchoalveolar lavage, nasopharyngeal aspirate or washing, sputum, or tracheal aspirate

Container/Tube: Sterile container

Specimen Volume: 1.5 mL

Specimen Type: Tissue

Sources: Brain, colon, kidney, liver, lung, etc.

Supplies: M4-RT (T605)

Container/Tube:

Preferred: Multimicrobe media (M4-RT)

Acceptable: Sterile container with 1 to 2 mL of sterile saline

Specimen Volume: Entire collection

Collection Instructions: Submit only fresh tissue in a sterile container containing 1 mL to 2 mL of sterile saline or multimicrobe medium (M4-RT, M4, or M5)

Specimen Minimum Volume

Body Fluid, Ocular Fluid, or Spinal Fluid: 0.3 mL

Respiratory Specimens: 1 mL

Tissue: 2 x 2-mm biopsy

Reject Due To

Calcium alginate-tipped swab Wood swab Transport swab containing gel Formalin-fixed and/or paraffin-embedded tissues Heat-inactivated specimen	Reject
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Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated (preferred)	7 days	
	Frozen	7 days	

Clinical & Interpretive

Clinical Information

Varicella-zoster virus (VZV) causes both varicella (chickenpox) and herpes zoster (shingles). VZV produces a generalized vesicular rash on the dermis (chickenpox) in normal children, usually before 10 years of age. After primary infection with VZV, the virus persists in latent form and may emerge clinically (usually in adults 50 years of age and older) to cause a unilateral vesicular eruption, generally in a dermatomal distribution (shingles).

Reference Values

Negative

Reference values apply to all ages.

Interpretation

Detection of varicella-zoster virus (VZV) DNA in clinical specimens supports the clinical diagnosis of infection due to this virus.

VZV DNA is not detected in cerebrospinal fluid from patients without central nervous system disease caused by this virus.

This LightCycler polymerase chain reaction assay does not yield positive results with other herpesvirus gene targets (herpes simplex virus, cytomegalovirus, Epstein-Barr virus).

Cautions

A negative result does not exclude the possibility of varicella-zoster virus (VZV) infection.

The reference range is typically "negative" for this assay. This assay is only to be used for patients with a clinical history and symptoms consistent with VZV infection and must be interpreted in the context of the clinical picture.

Supportive Data

Accuracy/Diagnostic Sensitivity and Specificity:

To assess the accuracy of the varicella-zoster virus VZV analyte specific reagents (ASR), clinical specimens (n=50) were tested and the results compared to those of a laboratory-developed (LDT) reference polymerase chain reaction (PCR) method.

VZV ASR	VZV LDT	
	Positive	Negative

	Positive	20	0
	Negative	0	30
	Total	20	30

Sensitivity (95% CI): 100% (81-100)

Specificity (95% CI): 100% (86-100)

Analytical Sensitivity/Limit of Detection:

The limit of detection of the VZV assay is 10 to 20 DNA target copies per microliter in specimen matrix.

Analytical Specificity:

No PCR signal was obtained from extracts of 27 bacterial, viral, and fungal isolates that could be found as normal flora in sites normally tested for this organism or that could cause similar symptoms.

Precision:

Interassay precision was 100%, and intraassay precision was 100%.

Reportable Range:

This test is a qualitative assay, and results are reported as negative or positive for targeted VZV DNA.

Clinical Reference

1. Cinque P, Bossolasco S, Vago L, et al. Varicella-zoster virus (VZV) DNA in cerebrospinal fluid of patients infected with human immunodeficiency virus: VZV disease of the central nervous system or subclinical reactivation of VZV infection? *Clin Infect Dis.* 1997;25(3):634-639
2. Brown M, Scarborough M, Brink N, Manjii H, Miller R. Varicella zoster virus-associated neurological disease in HIV-infected patients. *Int J STD AIDS.* 2001;12(2):79-83
3. Studahl M, Hagberg L, Rekabdar E, Bergstrom T. Herpesvirus DNA detection in cerebrospinal fluid: differences in clinical presentation between alpha-, beta-, and gamma-herpesviruses. *Scand J Infect Dis.* 2000;32(3):237-248
4. Iten A, Chatelard P, Vuadens P, et al. Impact of cerebrospinal fluid PCR on the management of HIV-infected patients with varicella-zoster virus infection of the central nervous system. *J Neurovirol.* 1999;5(2):172-180
5. Sauerbrei A. Varicella-zoster virus infections - antiviral therapy and diagnosis. *GMS Infect Dis.* 2016;4:Doc01. doi: 10.3205/id000019
6. Sauerbrei A. Diagnosis, antiviral therapy, and prophylaxis of varicella-zoster virus infections. *Eur J Clin Microbiol Infect Dis.* 2016;35(5):723-734. doi: 10.1007/s10096-016-2605-0

Performance

Method Description

Viral nucleic acid is extracted by the MagNA Pure automated instrument (Roche Applied Science) from clinical specimens. Primers directed to target DNA: ss DNA binding proteins (gene 29) produce a 202-bp amplicon. The LightCycler instrument amplifies and monitors by fluorescence the development of target nucleic acid sequences after the annealing step during polymerase chain-reaction (PCR) cycling. This is an automated PCR system that can rapidly

detect (30-40 minutes) amplicon development though stringent air-controlled temperature cycling in capillary cuvettes. The detection of amplified products is based on the fluorescence resonance energy transfer hybridization probe with a donor fluorophore, fluorescein, on the 3' end is excited by an external light source and emits light that is absorbed by a second hybridization probe with an acceptor fluorophore, LC-Red 640, at the 5' end. The acceptor fluorophore then emits a light of a different wavelength that can be measured with a signal that is proportional to the amount of specific PCR product. Melting curve analysis is performed following PCR amplification. Starting at 45 degrees C, the temperature in the thermal chamber is slowly raised to 80 degrees C, and the fluorescence is measured at frequent intervals. Analysis of the PCR amplification and probe melting curves is accomplished through the use of LightCycler software.(Dhiman N, Wright PA, Espy MJ, Schneider SK, Smith TF, Pritt BS: Concurrent detection of herpes simplex and varicella-zoster viruses by polymerase chain reaction from the same anatomic location. Diagn Microbiol Infect Dis. 2011 Aug;70(4):538-540. doi: 10.1016/j.diagmicrobio.2011.03.014; Espy MJ, Teo R, Ross TK, et al: Diagnosis of varicella-zoster virus infections in the clinical laboratory by LightCycler PCR. J Clin Microbiol. 2000;38[9]:3187-3189)

PDF Report

No

Day(s) Performed

Monday through Saturday

Report Available

Same day/1 to 3 days

Specimen Retention Time

14 days

Performing Laboratory Location

Jacksonville

Fees & Codes**Fees**

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

Test Classification

This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. It has not been cleared or approved by the US Food and Drug Administration.

CPT Code Information

87798

LOINC® Information

Test Definition: LVZV

Varicella-Zoster Virus, Molecular Detection,
PCR, Varies

Test ID	Test Order Name	Order LOINC® Value
LVZV	Varicella-Zoster Virus PCR	94584-0

Result ID	Test Result Name	Result LOINC® Value
SRC70	Specimen Source	39111-0
36046	Varicella-Zoster Virus PCR	94584-0