

## VALIDATION OF A NON-INVASIVE DIAGNOSTIC TEST FOR PRION DISEASES USING TEAR FLUID



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## NEW APPROACH: DETECTION OF PRIONS IN TEARS VIA RT-QUIC AGGREGATION ASSAY

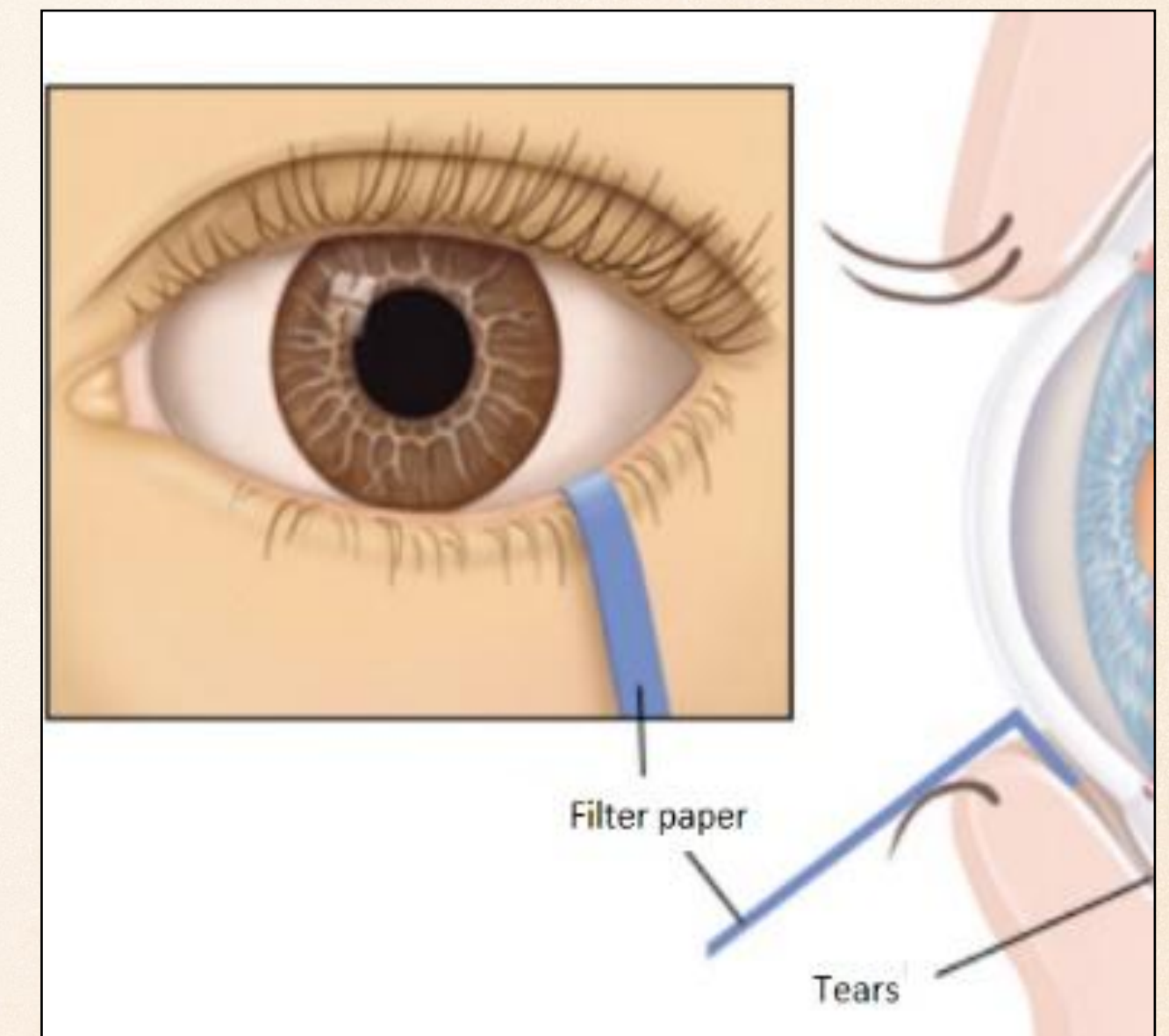
Lumbar punctures are **invasive showing side-effects:**

- ❖ Frequent: Headache, nausea, and local pain.
- ❖ Very rare: Meningitis, potential spinal mass hemorrhage, brain stem entrapment.

❖ **Detection of PrP<sup>Sc</sup> in less invasive body fluids such as Tear fluid (TF):**

❖ Advantages: easy to perform:

- 1) Place a 5 mm wide strip of filter paper into the outer canthus of the eyelid.
- 2) Remove the filter paper after 5-10 minutes
- 3) Extraction of proteins and detection of prions by RT-QuIC (protein aggregation assay)

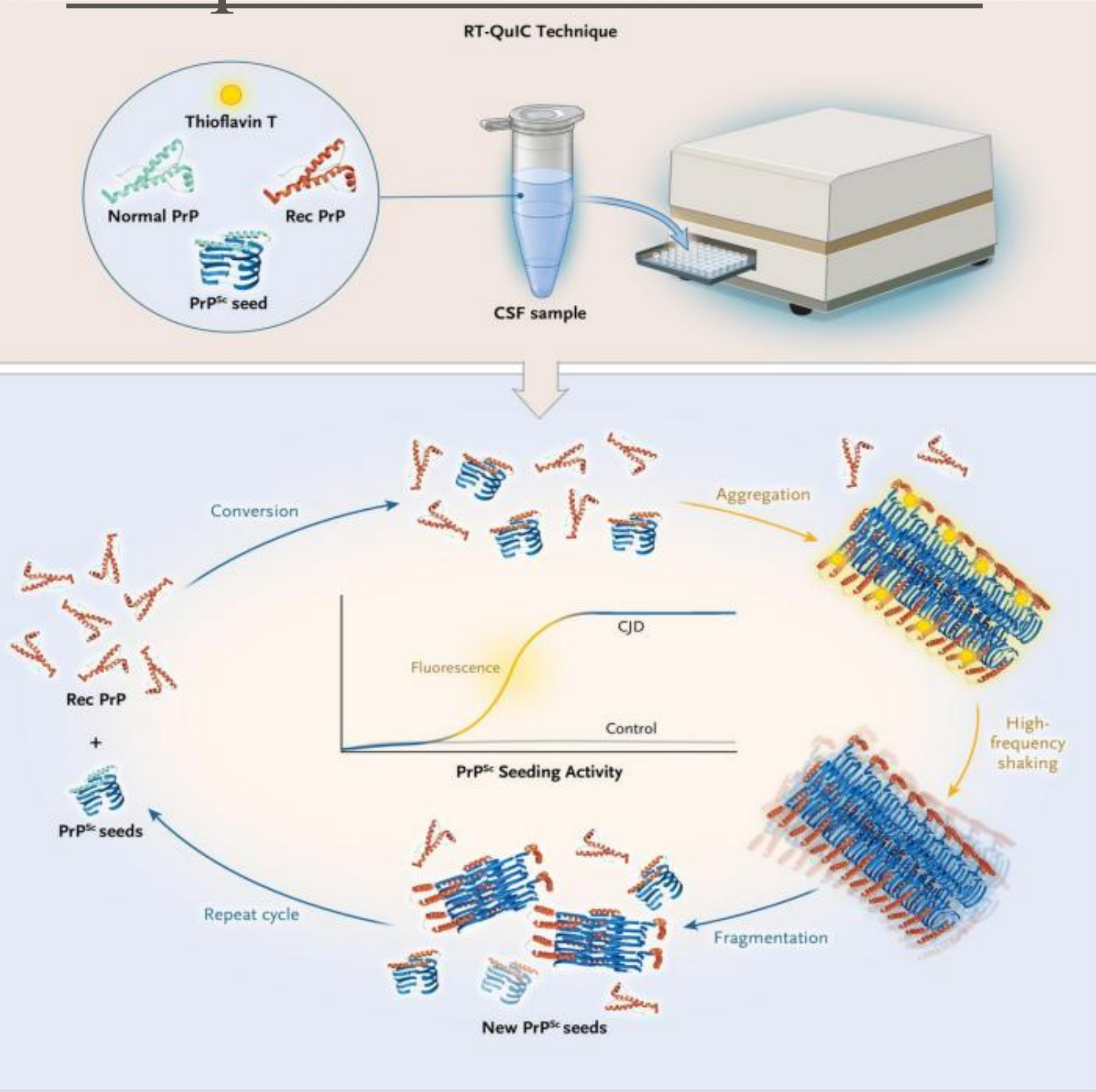


Schirmer-Test



# REAL-TIME QUAKING-INDUCE CONVERSION (RT-QUIC)

## Amplification of Prions



Zerr I, 2022 NEJM

## Established for CSF-Diagnostic

RT-QuIC	Sensitivity	Specificity
sCJD	85-91%	99-100%
FFI	28%	100%

Schmitz M. *et al.*, Brain 2022

The NEW ENGLAND JOURNAL of MEDICINE

### CORRESPONDENCE



Detection of Prion Protein Seeding Activity in Tear Fluids

Schmitz et al., 2023 NEJM



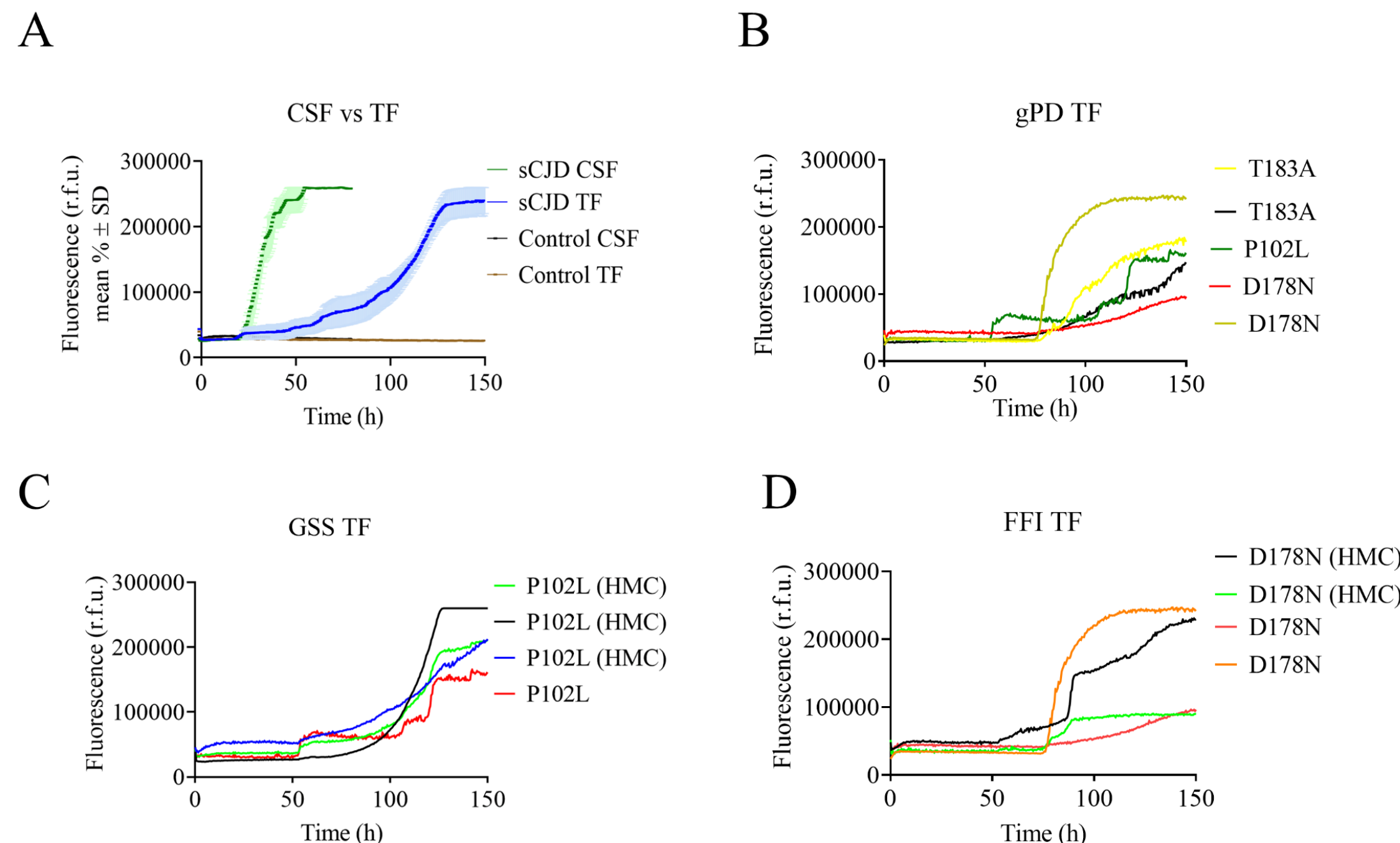
# FINDINGS IN THE PROJECT

- 1) Pre-analytic studies confirmed the **stability& reproducibility** of TF-RT-QuIC
- 2) Definition of the **minimal amounts of TF** (>10µL) for a reliable detection
- 3) Validation of the **diagnostic accuracy** of TF RT-QuIC in a second cohort
- 4) Longitudinal evaluation of TF RT-QuIC as a dynamic marker during the course of disease in prion disease patients
- 5) Longitudinal evaluation of TF RT-QuIC in healthy PRNP mutation carriers, regarding its potential ability to **predict disease onset**

Parameter	Recommendation
Amount of TF on the Strip per reaction	15-20 mm (>10 µL)
Duration of the TF RT-QuIC	150h
Software settings of the TF-QuIC	1 min double orbital shaking at 700 rpm and 1 min incubation
Definition of a positive reaction	> 50% positive reactions
Storage of the samples	Stable for at least one week at RT and against 12 cycles of freezing and thawing
Kind of recombinant substrate	Highly sensitive FL Hu E200K
Collection of TF	Schirma method



# DIAGNOSTIC ACCURACY IN TF RT-QUIC



	1 <sup>st</sup> cohort	2 <sup>nd</sup> cohort	Total Sensitivity
sCJD	13/15 (87%)	14/17 (82%)	27/32 (84%)
Genetic prion diseases	4/5 (80%)	3/5 (60%)	7/10 (70%)
FFI	2/2 (100%)	1/2 (50%)	3/4 (75%)
GSS	1/1 (100%)	2/3 (67%)	3/4 (75%)
T183A	1/2 (50%)	-	1/2 (50%)
Non-prion diseases <sup>3*</sup>	0/68 (0%)	1/116 (99.1%)	1/184 (99.5%)

Correia\*, Schmitz\* et al., 2025

- Lower signal intensity in TF compared to CSF
- Signal detection in healthy mutation carriers (HMC) possible
- Diagnostic sensitivity lower in TF



# IMPLICATIONS AND FUTURE WORK

→ **TF-QuIC is particularly useful when a lumbar puncture is not possible or during longitudinal follow-up studies conducted at multiple time points**

## **Outlook:**

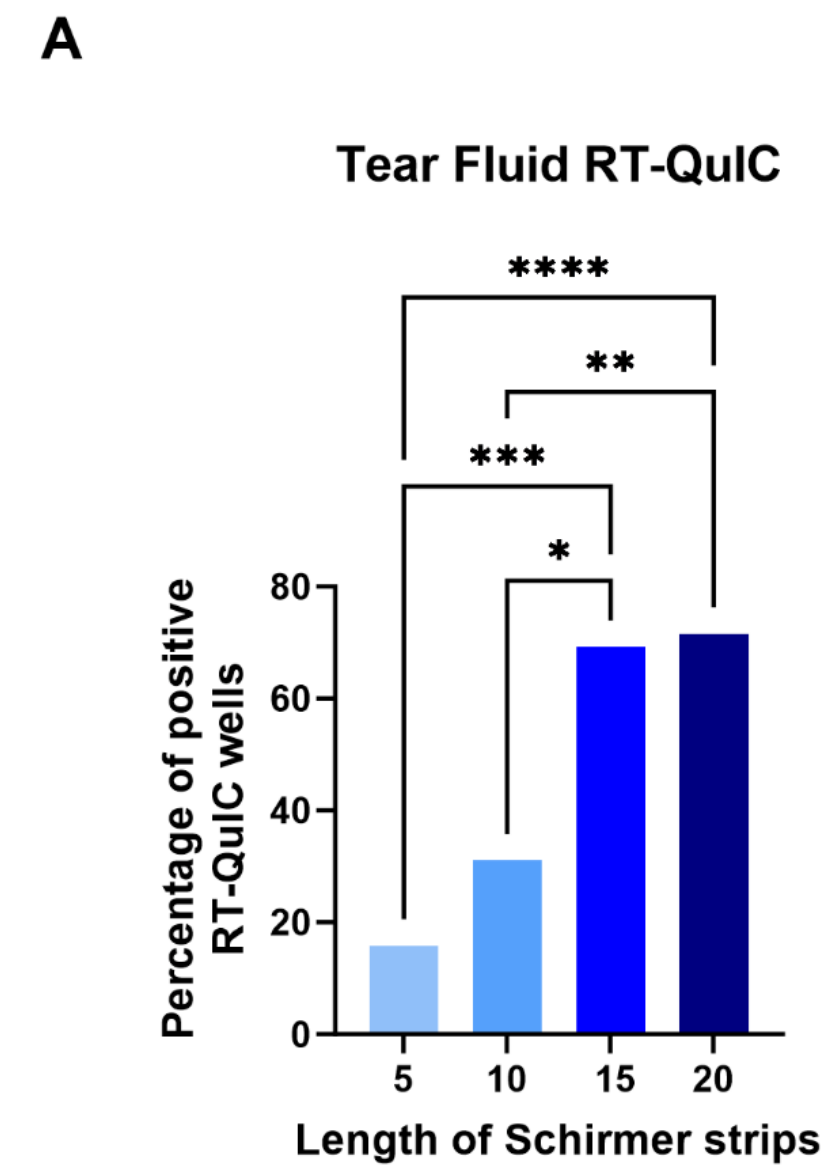
- 1) Increasing the numbers and further optimization of the TF QUIC
- 2) Analysis of pre-symptomatic mutation carriers: Can the TF RT-QuIC predict the disease onset?
- 3) Proteomic Studies: Detection of further disease relevant proteins in TF



# ACKNOWLEDGEMENT

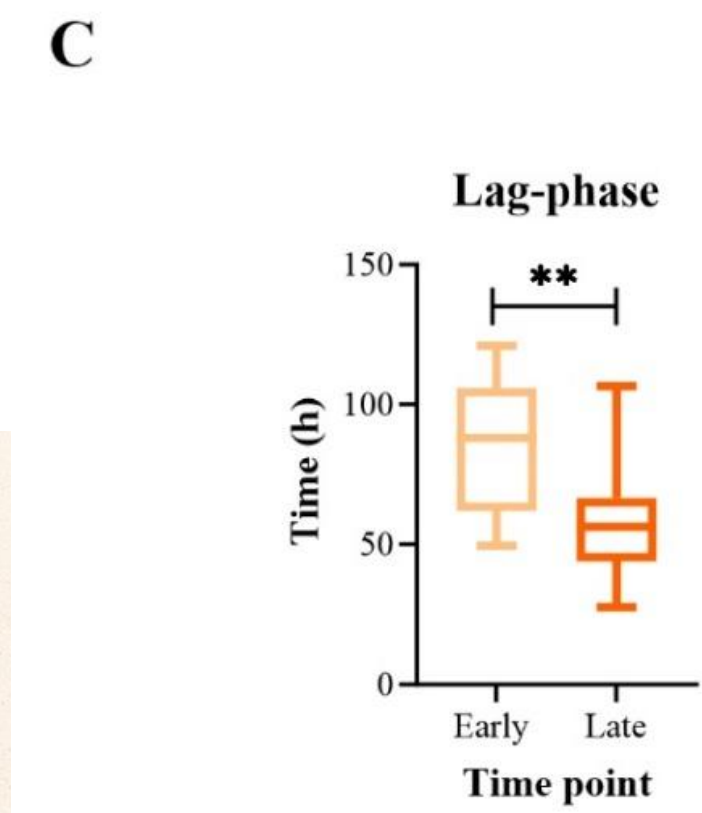
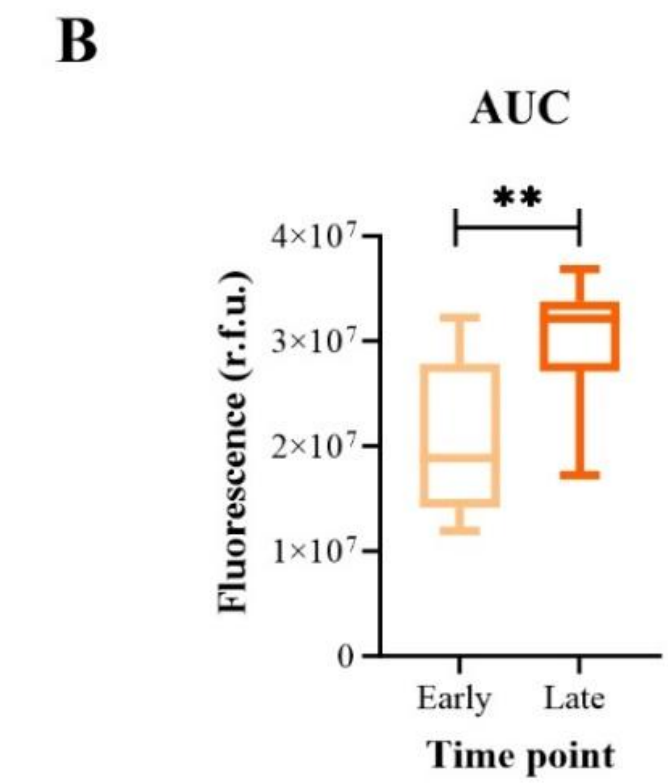
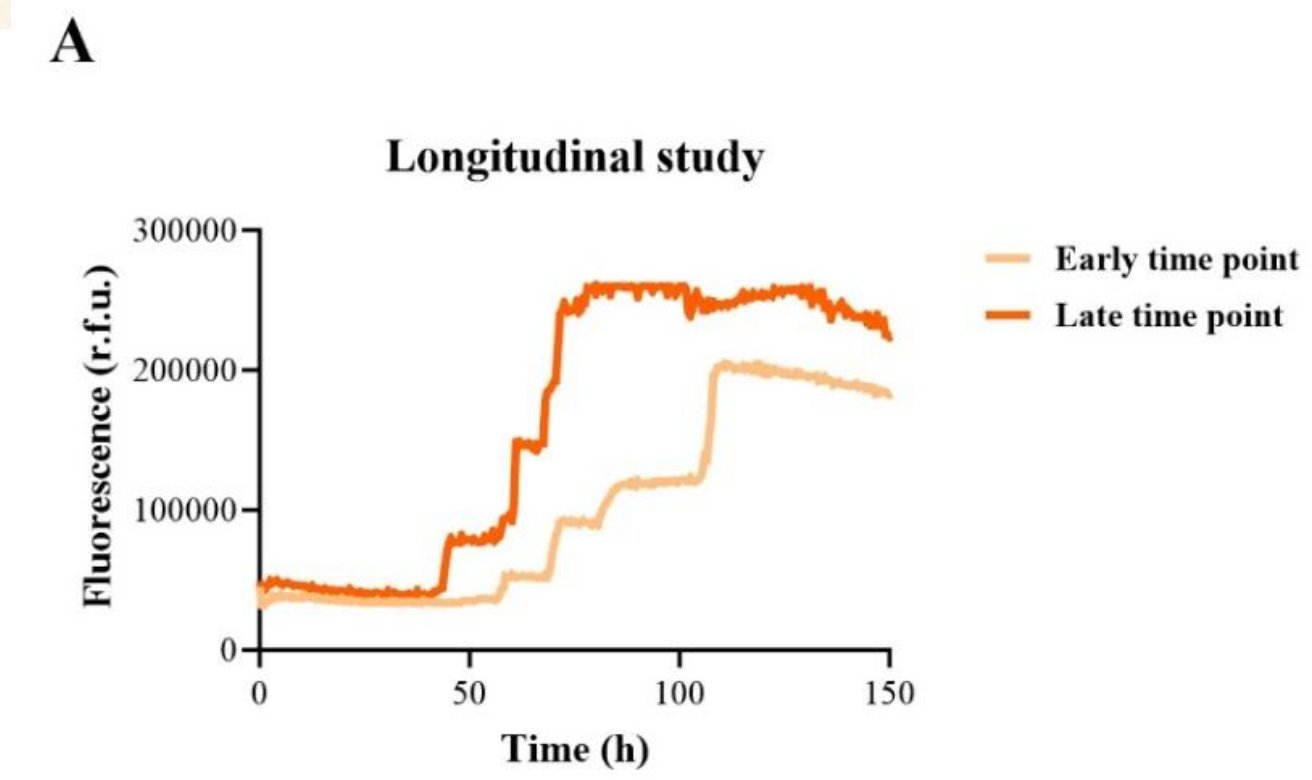
- ❖ **Michale H. Cole Memorial Research Grant** (contributed by Jeanne Cole)
- ❖ **Lynda Morris Memorial Grant** (contributed by David Morris and Family)
- ❖ **Tom Stivison Memorial Research Grant** (contributed by Sandra Stivison)
- ❖ **Families** of the CJD Foundation and **Strides** for CJD





**B**

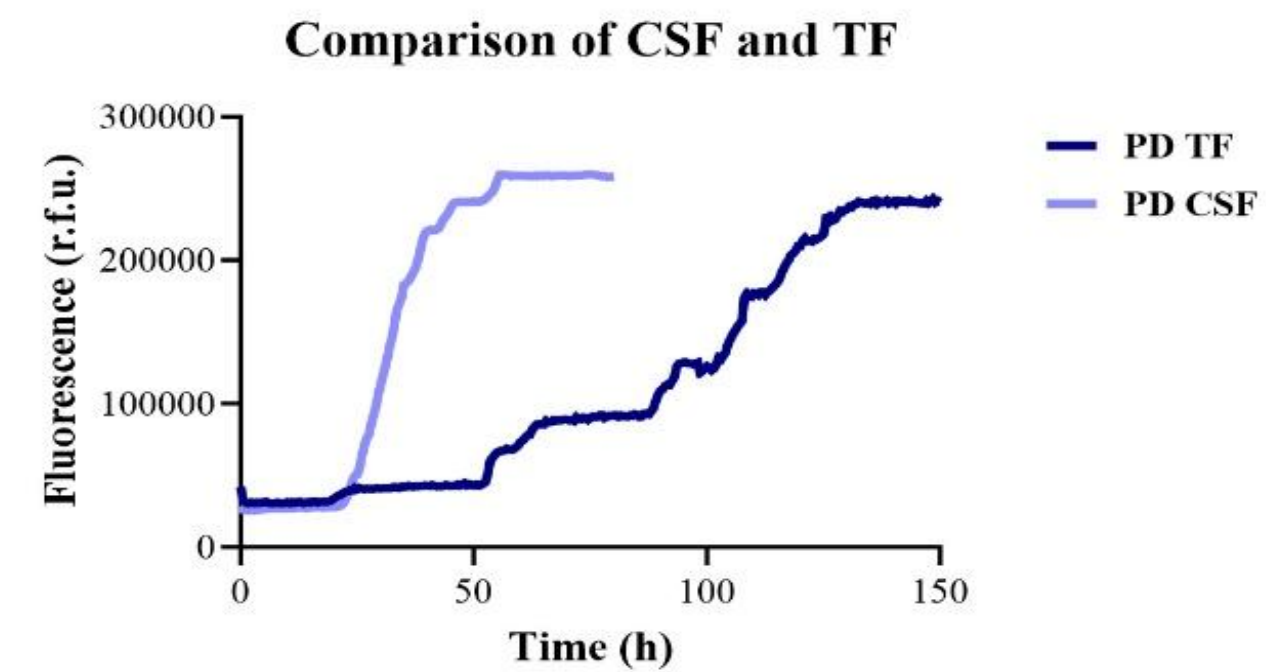
$\mu$ l	TF strips (mm)
1	< 1mm
1,25	1mm
2,5	4mm
5	9mm
10	19mm
20	32mm



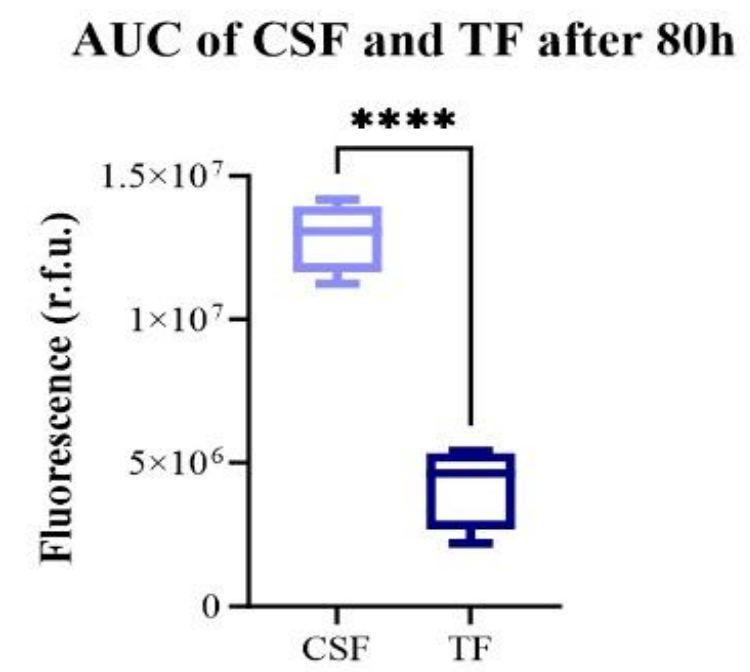


# Comparison between CSF and TF

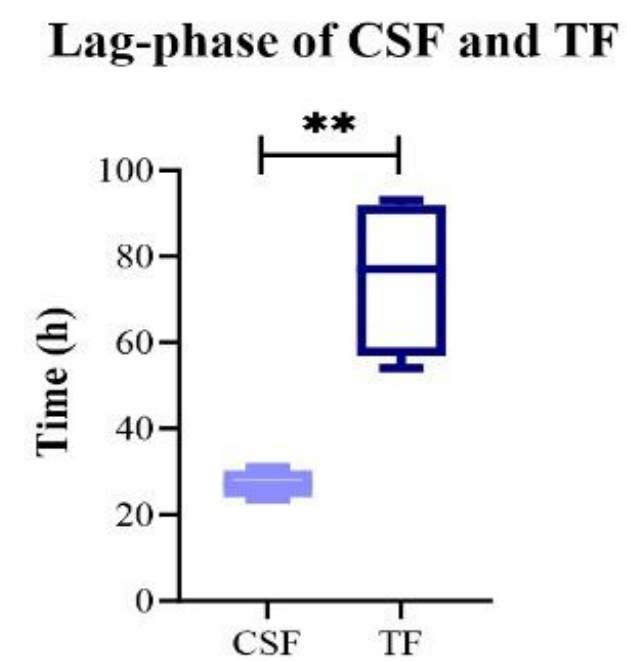
**A**



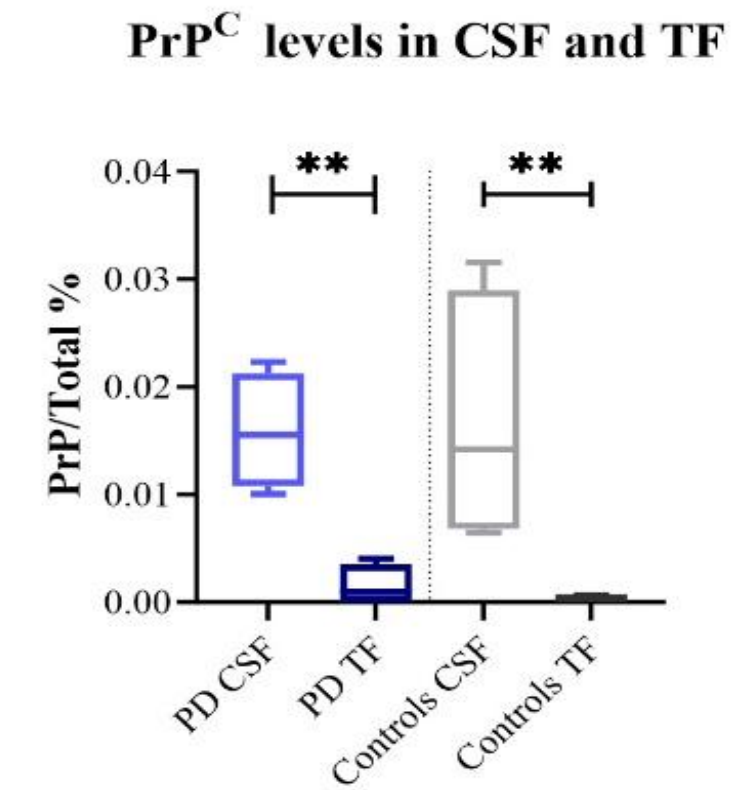
**B**



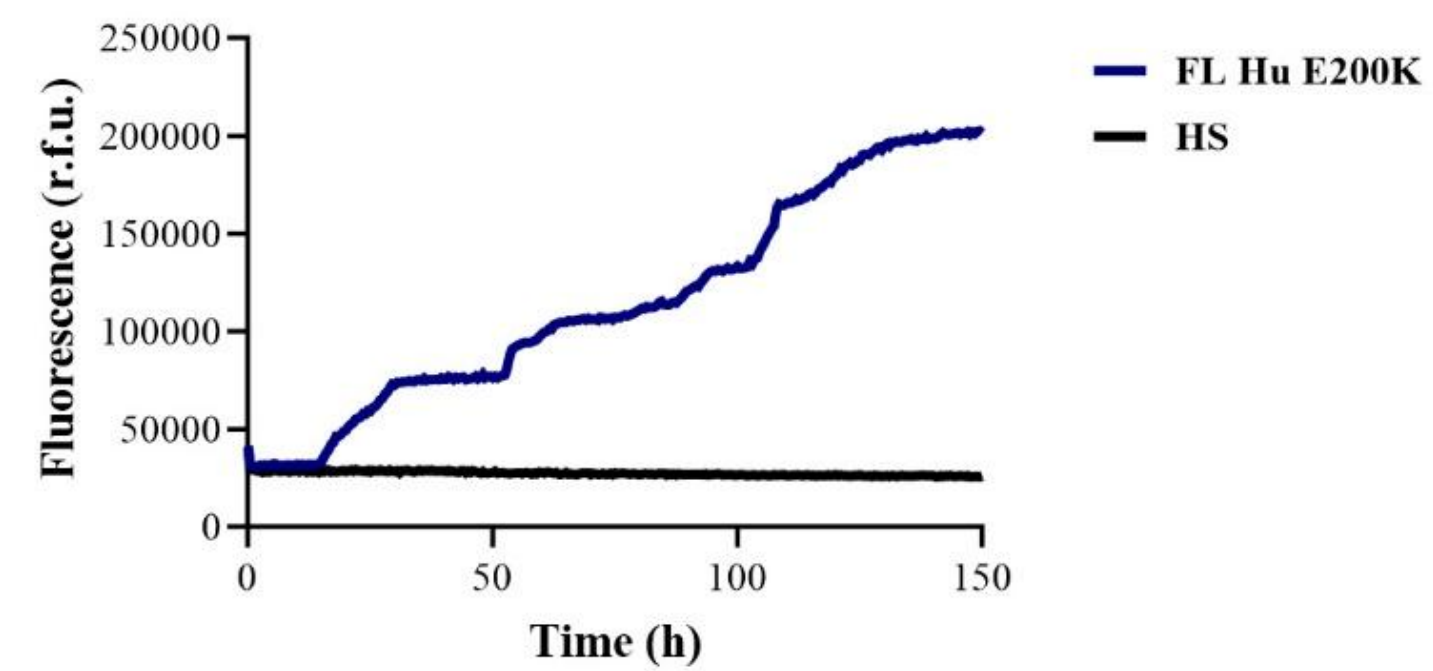
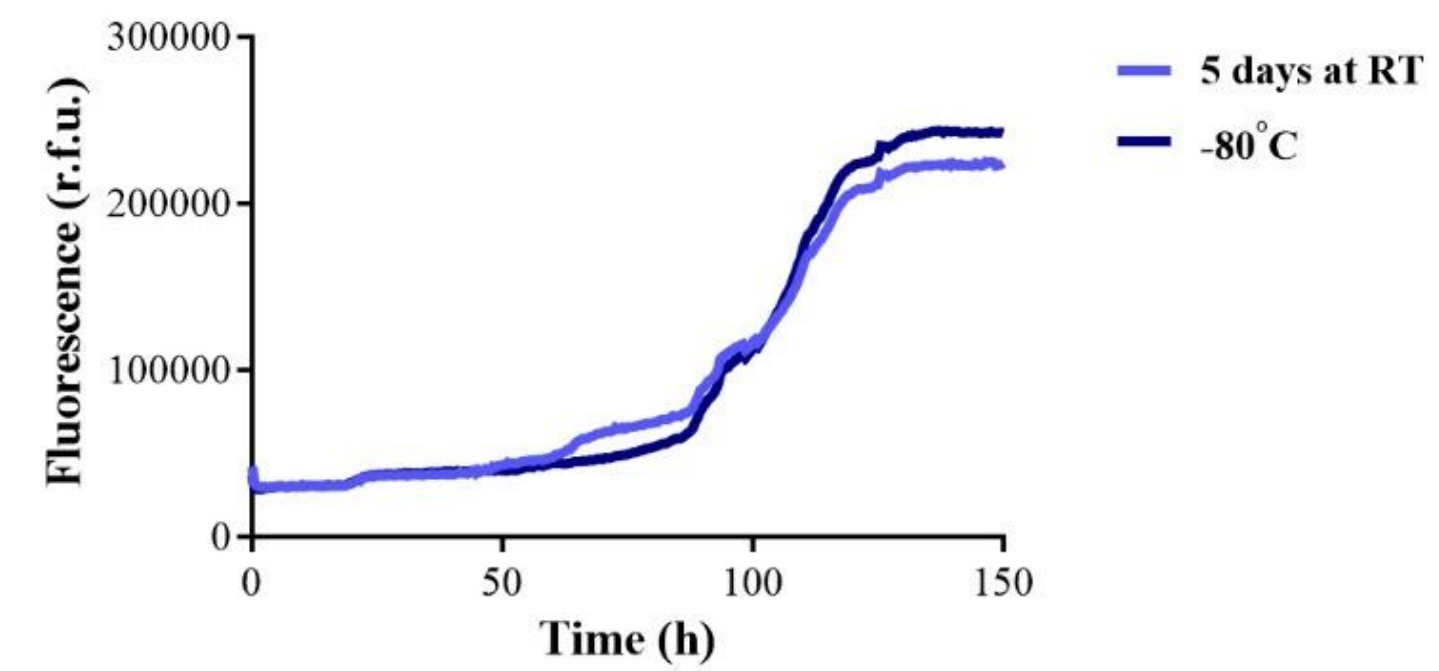
**C**



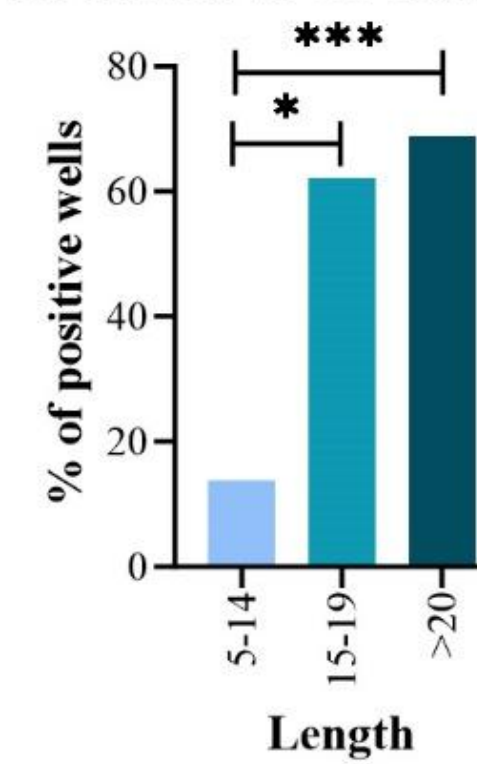
**D**





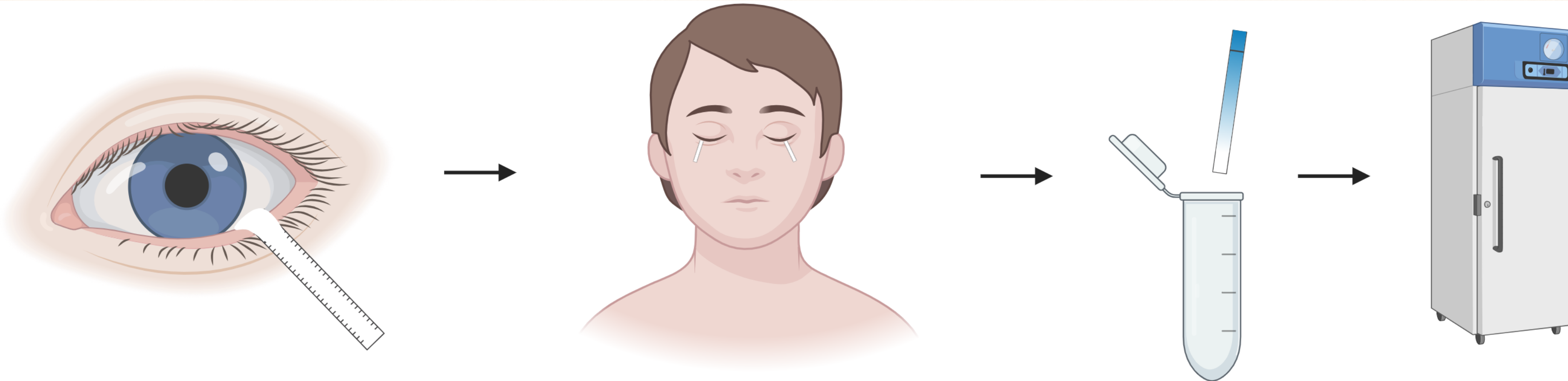
**A****Comparison of FL Hu E200K and HS****B****TF samples stored at -80° and RT****C**

Volume TF in (μL)	Wetting length in (mm)
1.25	1
2.5	4
5	9
10	19
20	32

**D****Correlation of TF and RT-QuIC**



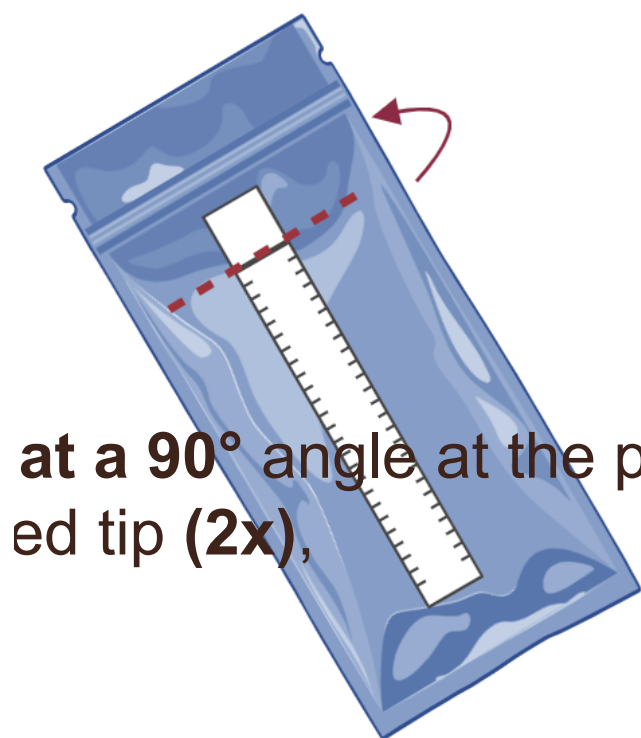
# Tear fluid collection workflow



± 10 min  
2x

4x

-80°C



at a 90° angle at the pre-cut tip (2x),

2. Insert the folded end of the strip into the **lateral and middle third of the lower eyelid margin (2x),**

3. Instruct the patient to Keep the **eyes closed for at least 10 min,**

4. **Remove the strip** carefully without touching wetted portion,

5. **Repeat the steps 1 to 4** one more time.

6. Store the tear fluid strips at -8°C.



# Summary and Conclusion

## Enhanced Prion Diagnostics

### Low RT-QuIC Diagnostic Sensitivity in gPD

genetic prion diseases  
(e.g. FFI (19% sensitivity))

### Purification of different recPrP

FL Hu E200K  
novel substrate

### Enhanced CSF Sensitivity

Improving detection  
accuracy

### Tear Fluid Detection

Enabling non-  
invasive sampling

### High Diagnostic Sensitivity

CSF:  
gPD 75% to 100%  
sensitivity  
TF:  
gPD 70% sensitivity

