



PRE-TEST INFORMATION SHEET

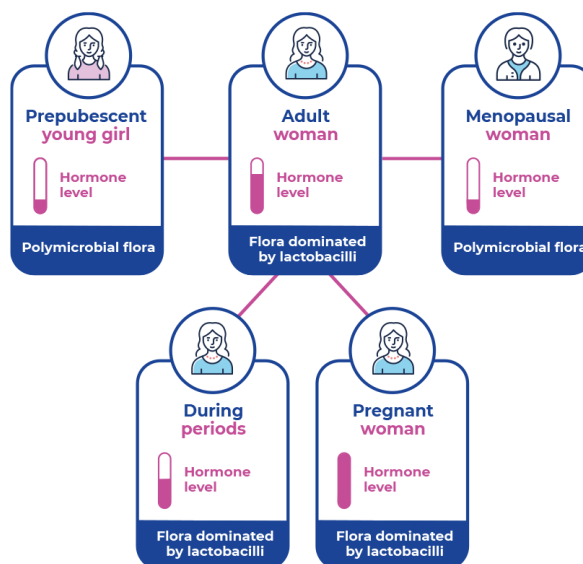
Vaginal microbiome:

The term *vaginal microbiome* refers to the genomes of microorganisms that under **physiological conditions** **colonise the genital district without damaging it** (*vaginal microbiota*).

The composition of the microbiota may change throughout a woman's life cycle as a result of hormonal changes, as well as being influenced by lifestyle, and external factors such as drug therapies or frequent vaginal douches as well. In balanced conditions, the vaginal microbiota is mainly composed of **lactobacilli**, whose function is both to produce **lactic acid** in order to maintain the **acidic vaginal pH**, and to act as a **defence system of the mucosa against infectious agents**.

Vaginal microbiota is influenced by:

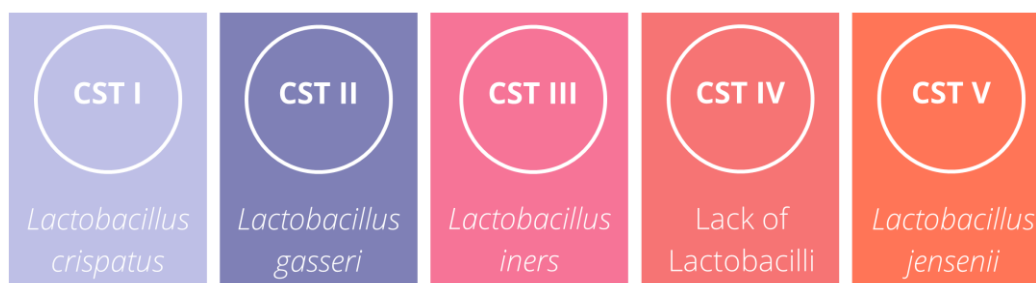
- Estrogens levels
- Frequent vaginal douches
- Diet and eating habits
- Drug therapies
- Number of partners



What is the CST?

The term CST (Community State Type) is used in microbiology to describe a microbial community with similar composition and abundance.

Five vaginal CSTs have been defined, characterised respectively by the prevalence of specific lactobacilli:



Purpose of the analysis:

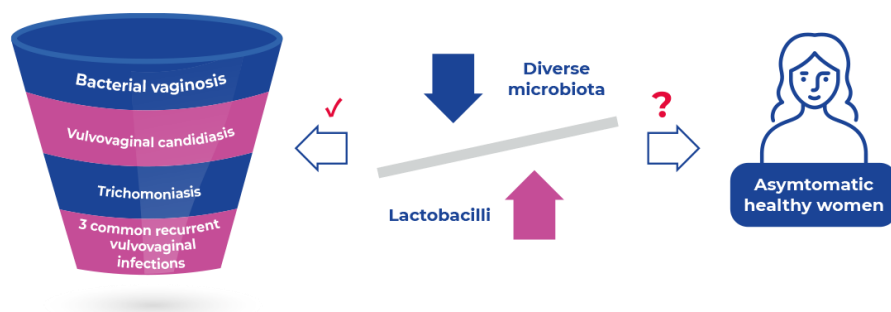
Two different analysis can be performed: **Eubiome** or **Eubiome Active**.

Both analyses evaluates the health status of the cervical-vaginal district by classifying it into five “**scores**”, each of which is representative of a characteristic microbial community or “**Community State Type**” (CST) (AMCLI 01_Vaginiti_MAL_20100308).

Each score correlates with an increasing risk of dysbiosis (alteration of the bacterial flora) on a scale of **1 to 5**, resulting in an increased risk of infection with opportunistic germ. Together with the microbial community classification, which consists mainly of lactobacillary flora, **Eubiome** and **Eubiome Active** identify the presence of **fungi** and **opportunistic bacteria** associated with **vaginitis and/or bacterial vaginosis**.

Eubiome also identifies the presence of **sexually transmitted pathogens** as well as **High Risk (HR) Human Papilloma Virus (HPV) virotypes**.

The innovation of this analytical approach is represented by the following picture, where it is shown that the **three main classes of recurrent vulvo-vaginal infections (Bacterial Vaginosis, Vulvovaginal candidiasis and Trichomoniasis)**, must still be considered in relation to the lactobacillary flora and to its ability to defend the genital mucosa, even in asymptomatic patients.



Kalia et al. Ann Clin Microbiol Antimicrob (2020) 19:5

Opportunistic germs and commensal lactobacilli may be in balance; in this case they may not activate a syndromic pathogenic pathway.

In case of dysbiosis, the referring physician will define **possible therapies to repopulate or strengthen the lactobacillary flora** and possibly **treat infections** caused by the presence of opportunistic germs.











Results of the analysis:

Eubiome and **Eubiome Active** result will indicate:

- Whether a condition of **eubiosis** (correct microbial balance) or **dysbiosis** has been identified;
- The primary Community State Type and, if present, the secondary Community State Type, by analyzing 4 lactobacillary species (*L. crispatus*, *L. gasseri*, *L. iners* and *L. jensenii*);
- The "Bacterial Balance" score, i.e. the relative quantification between the lactobacillary flora and any bacterial vaginosis and/or vaginitis-associated germs (*Gardnerella vaginalis*, *Atopobium vaginae* and *Candida* spp.). This score is representative of the balance between protective flora (lactobacilli) and opportunistic germs present.
- The outcome of the analysis of microorganisms associated to vaginitis and/or bacterial vaginosis.

Eubiome result will also indicate:

- The outcome of the analysis of microorganisms associated to vaginitis and/or bacterial vaginosis.
- The outcome of the analysis of High Risk Human Papilloma Virus virotypes (Table 1).

	Eubiome	Eubiome Active
CST		
Bacterial Balance		
Lattobacilli ¹		
Pathogens associated to vaginitis and/or bacterial vaginosis ²		
Pathogens associated to sexually transmitted diseases ³		
High Risk HPV virotypes		

1. *L. crispatus*, *L. iners*, *L.jensenii*, *L. gasseri*
2. *Atopobium vaginae*, *Candida albicans*, *Candida glabrata*, *Candida krusei*, *Candida parapsilosis*, *Gardnerella vaginalis*, *Trichomonas vaginalis*
3. *Chlamydia trachomatis*, *Mycoplasma genitalium*, *Mycoplasma hominis*, *Neisseria gonorrhoeae*, *Streptococcus agalactiae*, *Ureaplasma parvum*, *Ureaplasma urealyticum*

Table 1: High Risk (HR) virotypes analysed

Six individual HR HPV virotypes						Three HR HPV virotype groups		
16	18	45	31	51	52	P1(33, 58)	P2 (35, 39, 68)	P3 (56, 59, 66)

Pre-test information service

According to Genetic Guidelines, Eurofins Genoma is able to provide a free pre-test brief consultation, to drive patients within the test purposes, benefits, limitations and possible results.

Genetic counselling

Our centre offers **specialized counselling** to manage test result in relation with clinical patients features.

Reporting time

The **turnaround time** (TAT) is approximately **7-10 working days**. TAT could be delayed in case of repeated examinations, suboptimal results, second level investigations.

Privacy

All personal data will be treated with extreme confidentiality and according to current privacy legislation (Legislative Decree No. 196 of June 30, 2003). Test results will be released only to the health professionals involved in the execution of the test or to the geneticist (where necessary). In addition, test results may be released to those who, by law, may have access to them.

Sample storage

Biological specimens are identified by a barcode and a numeric ID, so no identifying information is associated with the tube. Therefore, it is impossible to trace personal data. In any case, 30 days after reporting, biological samples will be cleared according to current regulations.

Eubiome and Eubiome Active: Kit composition and analyses

Eubiome and Eubiome Active share the same kit and Test Requisition Form (TRF).

Both vaginal and endo-cervical swabs are required for **Eubiome**, whereas only the vaginal swab is required for **Eubiome Active**. Please fill in the TRF accordingly, specifying the analysis required, and use only the necessary sampling device/s.

Feel free to discard unnecessary sampling devices if they are not needed.

Eubiome:

Sampling devices:

a)



b)



1 x Vaginal swab (a)

2 x Endo-cervical swabs (b)

Analysis:

- CST
- Bacterial Balance
- 4 Lactobacilli: *L. crispatus*, *L. gasseri*, *L. iners* e *L. jensenii*
- 14 microorganisms: *Atopobium vaginae*, *Candida albicans*, *Candida glabrata*, *Candida krusei*, *Candida parapsilosis*, *Chlamydia trachomatis*, *Gardnerella vaginalis*, *Mycoplasma genitalium*, *Mycoplasma hominis*, *Neisseria gonorrhoeae*, *Streptococcus agalactiae*, *Trichomonas vaginalis*, *Ureaplasma parvum*, *Ureaplasma urealyticum*
- High Risk (HR) HPV Virotypes

Eubiome – Active:

Sampling device:



1 x Vaginal swab

Analysis:

- CST
- Bacterial Balance
- 4 Lactobacilli: *L. crispatus*, *L. gasseri*, *L. iners* e *L. jensenii*
- 7 microorganisms: *Atopobium vaginae*, *Candida albicans*, *Candida glabrata*, *Candida krusei*, *Candida parapsilosis*, *Gardnerella vaginalis*, *Trichomonas vaginalis*

EUBIOME TEST INFORMED CONSENT

Adults

The undersigned _____

Date of birth _____ Place of birth _____

Resident in _____ Address _____

Telephone: _____

e-mail: _____

Minors and person with legal guardians

(mandatory compilation and subscription of consent by both parents)

a) The undersigned _____

Date of birth _____ Place of birth _____

Resident in _____ Address _____

Telephone: _____

e-mail: _____

AND

b) The undersigned _____

Date of birth _____ Place of birth _____

Resident in _____ Address _____

Telephone: _____

e-mail: _____

Parent/s or Guardian/s of _____

Date of birth _____

Place of birth _____

I/WE DECLARE:

of having received, during the meeting with Doctor _____ on the date _____, detailed information about the genetic analysis I am about to perform, of having understood and considered all the aspects of the exam and of having understood the benefit and the purpose of the genetic test and its possible limits. I had the chance to ask all the questions I considered worthwhile and I received answers I consider complete. In particular:

- It has been explained to me the test purpose;
- It has been explained to me the test limits;
- I have discussed the possible risks, benefits and limits connected to the test;
- I have understood that the result of the genetic test may have medical and psychological consequences for my family and I;
- I have understood the meaning of possible test results (even unexpected);
- I've been informed about the people who will have access to the biological sample;
- I've been informed about the people who will have access to the test result;
- To have the possibility to revoke the consent at any time, by signing the relevant revocation act.

Therefore,

I/WE AUTHORIZE:

the execution of/and/the following analysis: ☐ Eubiome ☐ Eubiome Active
on biological material taken from: ☐ vaginal swab ☐ endocervical swab

INDICATION TO THE ANALYSIS (*in case of minor prescription required*): _____

FURTHERMORE, I/WE DECLARE:

<input type="checkbox"/> I agree	<input type="checkbox"/> I DO NOT agree	To be informed about analysis results;
<input type="checkbox"/> I agree	<input type="checkbox"/> I DO NOT agree	to share the results with Dr. _____
<input type="checkbox"/> I agree	<input type="checkbox"/> I DO NOT agree	that biological material can be used in the future, in compliance with the current legislation on the protection of personal data, for further investigations for diagnostic purposes for the examined pathology at the centre that performs the analysis;
<input type="checkbox"/> I agree	<input type="checkbox"/> I DO NOT agree	that biological material can be used in the future, in compliance with the current legislation on the protection of personal data, for further investigations for diagnostic purposes for the examined pathology in other centres, even outside European Union;
<input type="checkbox"/> I agree	<input type="checkbox"/> I DO NOT agree	to be informed about results of further investigations for diagnostic purposes for the examined pathology;
<input type="checkbox"/> I agree	<input type="checkbox"/> I DO NOT agree	to be informed about analysis results even in relation to unexpected news, which may have a benefit in terms of therapy, prevention or awareness about reproductive choices;
<input type="checkbox"/> I agree	<input type="checkbox"/> I DO NOT agree	that biological material may be used in the future, in compliance with the current legislation on the protection of personal data, for research purposes and/or for studies aimed to the collectivity in medical, biomedical and the epidemiological field and for quality verification programs for the laboratory performance
<input type="checkbox"/> I agree	<input type="checkbox"/> I DO NOT agree	to be informed about the results of the research.

The undersigned declares that the above is true and undertakes to promptly communicate any change of opinion on the matter.

Date ____/____/____

Patient signature:

Parent/s or Guardian/s signatures:

a) _____

b) _____

The Specialist who collected the consent (name and surname): _____

Phone _____ E-Mail _____

Signature and stamp of the Specialist: _____