

## VIROLOGY

5-7 September 2011 Baltimore, USA

## Main problems in serological diagnosis of EBV infection

Massimo De Paschale Hospital of Legnano, Italy In serological diagnosis of mononucleosis EBV infection it is usually easy to distinguish between acute or past infections: the presence of VCA IgG and IgM without EBNA-1 IgG indicates acute infection, while the presence of VCA IgG and EBNA-1 IgG without VCA IgM is typical of past infection. However, there can be serological patterns difficult to interpret. For example a pattern of VCA IgG isolated (without VCA IgM and EBNA-1 IgG) that can be present both in case of acute or past infection, requires other laboratory tests, such as VCA IgG avidity, Immunoblotting for EBV IgG, the research of heterophile antibodies, anti-EA antibodies or viral genomes with genic amplification techniques. These tests can define the status of the infection without having a second sample at a distance of time, which may be requested in the hope of an antibody change. Also a profile of simultaneous presence of VCA IgG, VCA IgM and EBNA-1 IgG gives rise to some interpretative doubts because occurring both in the case of recent infection and in case of reactivation and requires other laboratory tests. The choice of these additional tests depends on various factors beyond the scientific and technical appropriateness. Surely organizational and economic reasons influence the choice, but also the number of samples with inconclusive serological results in routine and the type

## **Biography**

additional tests.

Graduated with honors in Biology at State University of Milan (Italy), Postgraduate Diploma with honors in Hygiene at State University of Milan (Italy), Postgraduate Diploma with honors in Clinical Pathology at State University of Pavia (Italy), Certificat d'Université d'Enseignement Européen de Transfusion Sanguine at Université Louis Pasteur de Strasbourg (France), Postgratuate Diploma with honors in Microbiology and Virology at State University of Milan (Italy). Currently Head of Serology Laboratory of Microbiology Unit at Legnano Hospital (Italy). Author and/or co-author of 36 papers in National and International Journals and of more than 90 communications to national and international conferences.

of patients (immunocompetent or immunocompromised patients) can direct the choice of