

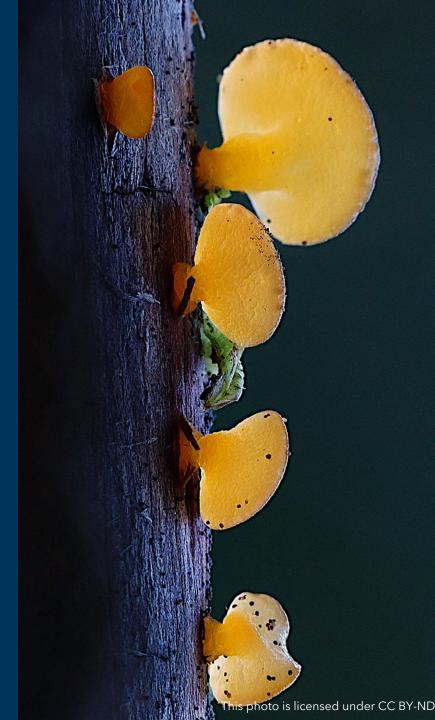
TOXIPLEX BASIC A direct mycotoxin detection assay for human serum/plasma

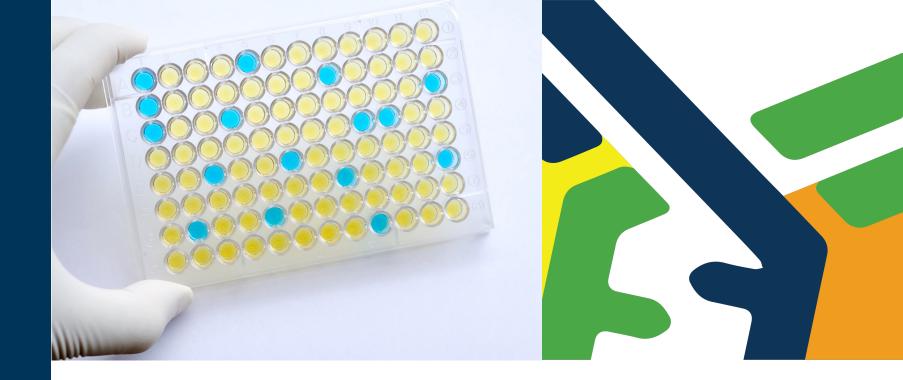
Kunal Garg

Chief Technology Officer

Tezted Ltd

kunal.garg@tezted.com





- 1. Modes of mycotoxin exposure and impact on health
- 2. Current methods to detect mycotoxins
- 3. Mycotoxin detection with TOXIPLEX BASIC
- 4. Summary

Agenda

Modes of mycotoxin exposure and impact on health



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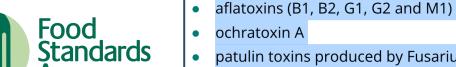
Exposure to mycotoxins through foodstuffs

Exposure to mycotoxins can happen either directly by <u>eating infected food</u> or indirectly from animals that are fed contaminated feed, in particular from milk. <u>World Health Organization</u>



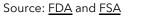
As an individual consumer, you generally cannot control the presence of mycotoxins in your food. The fungi that produce mycotoxins generally grow during crop production and storage – steps in the food supply chain that the FDA regulates and monitors to ensure the food available for you to buy is not contaminated. The mycotoxins in human food that the FDA currently focuses on are <u>aflatoxins</u>, <u>deoxynivalenol</u>, <u>fumonisins</u>, <u>patulin</u>, and <u>ochratoxin A</u>.

The mycotoxins of most concern from a food safety perspective include:



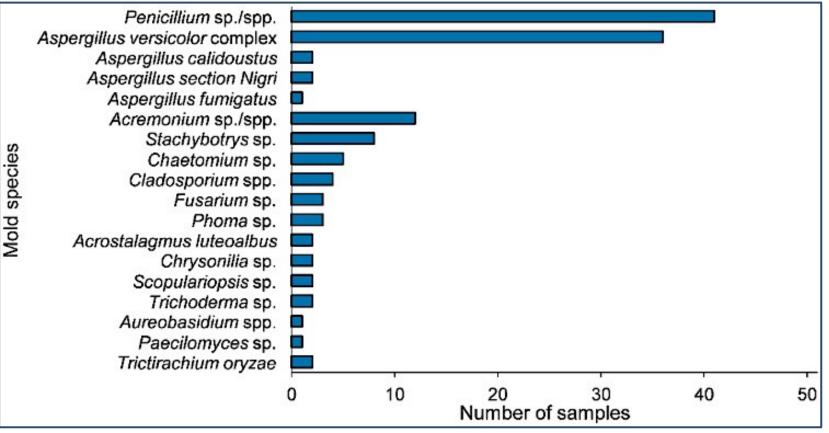
• patulin toxins produced by Fusarium moulds, including fumonisins (B1, B2 and B3)

- trichothecenes (principally nivalenol, deoxynivalenol, T-2 and HT-2 toxin)
- zearalenone
- ergot alkaloids, citrinin, sterigmatocystin and alternaria toxins



Lindemann et al. (2022) tested mold-infested samples (n=51) from 24 households in northern Germany. Building materials

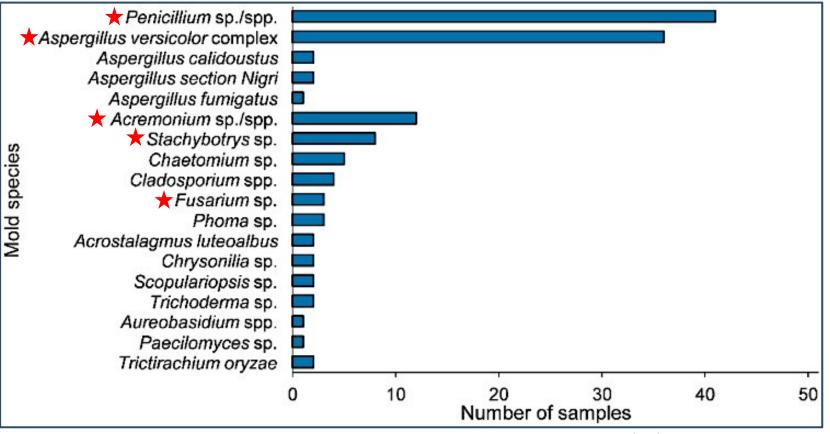
included wallpapers, plasters, wood, isolation materials like Styrofoam, and glass wool



Modified from Lindemann et al, 2022

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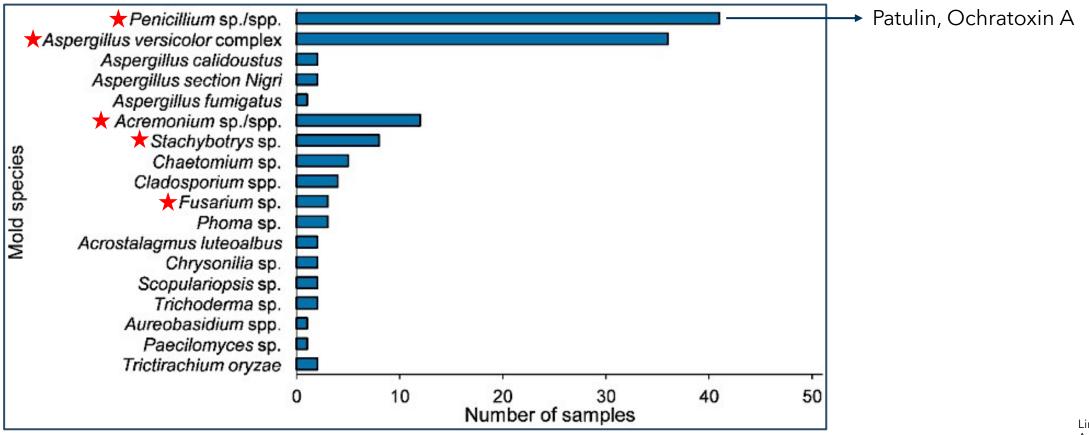
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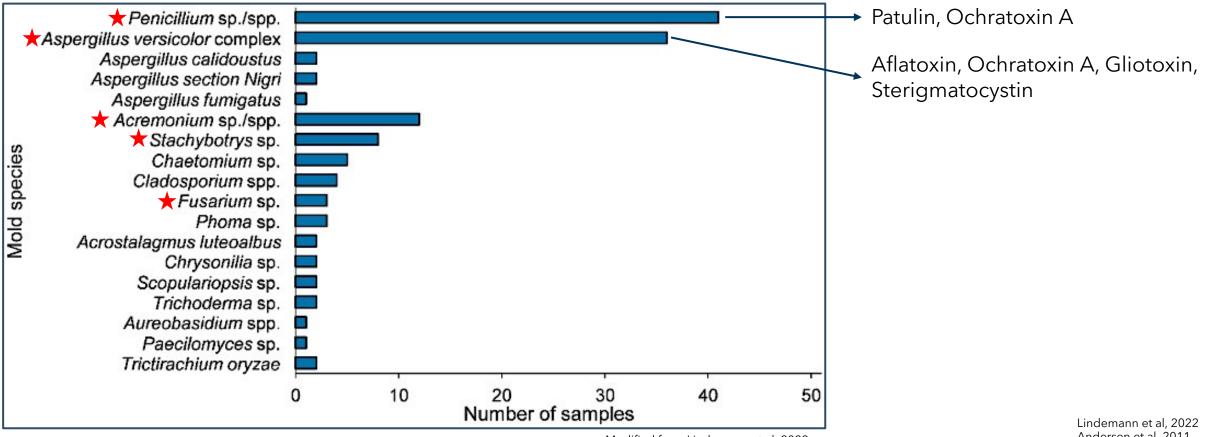
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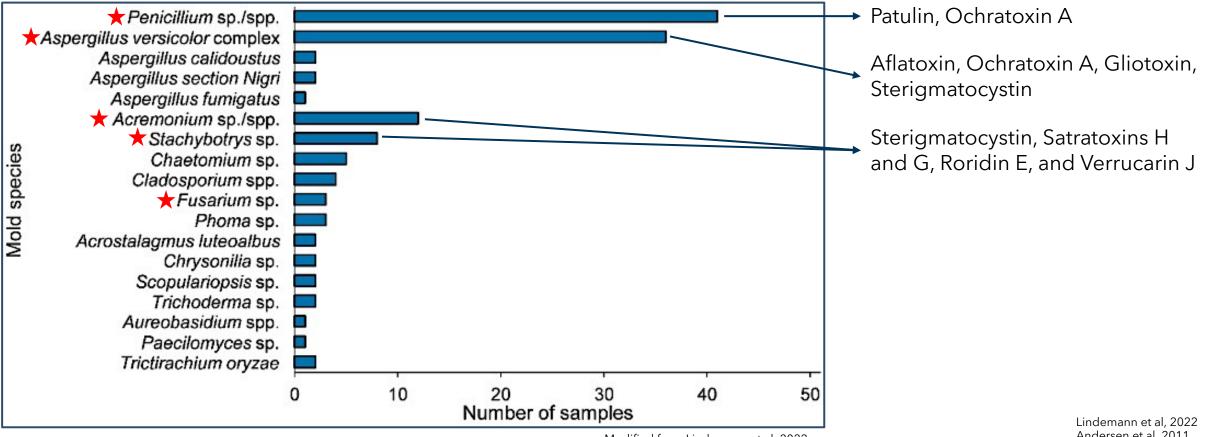
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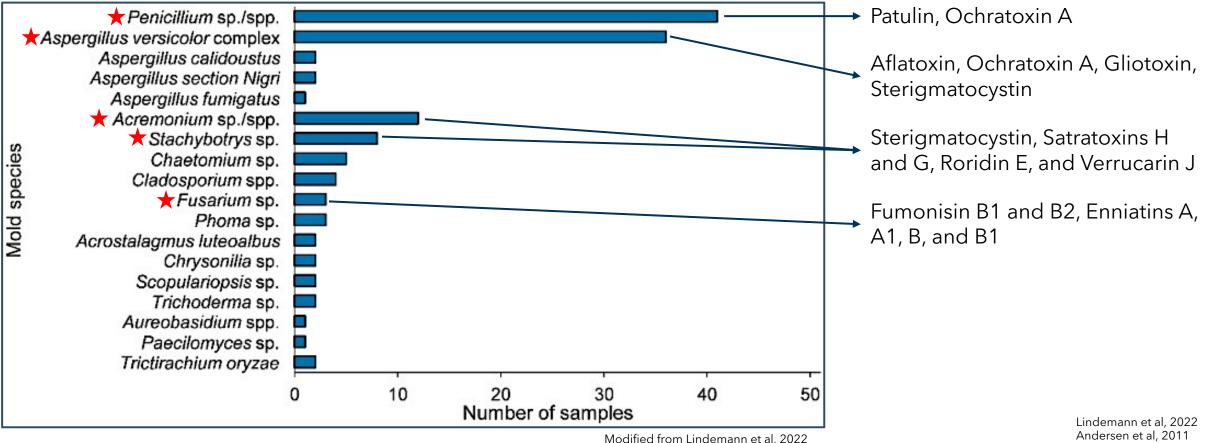
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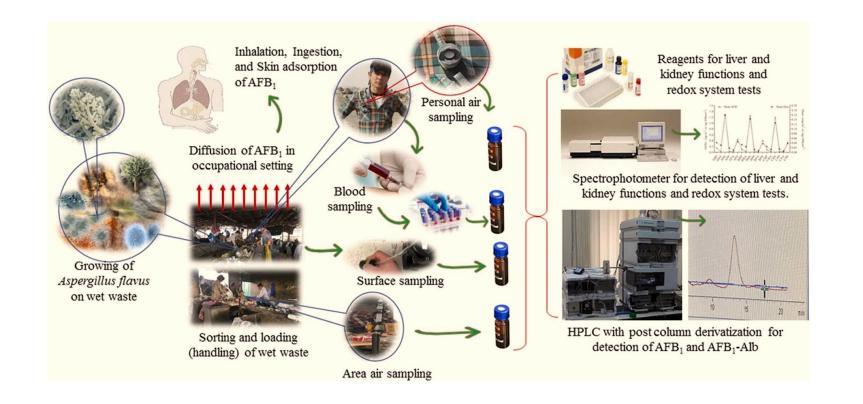
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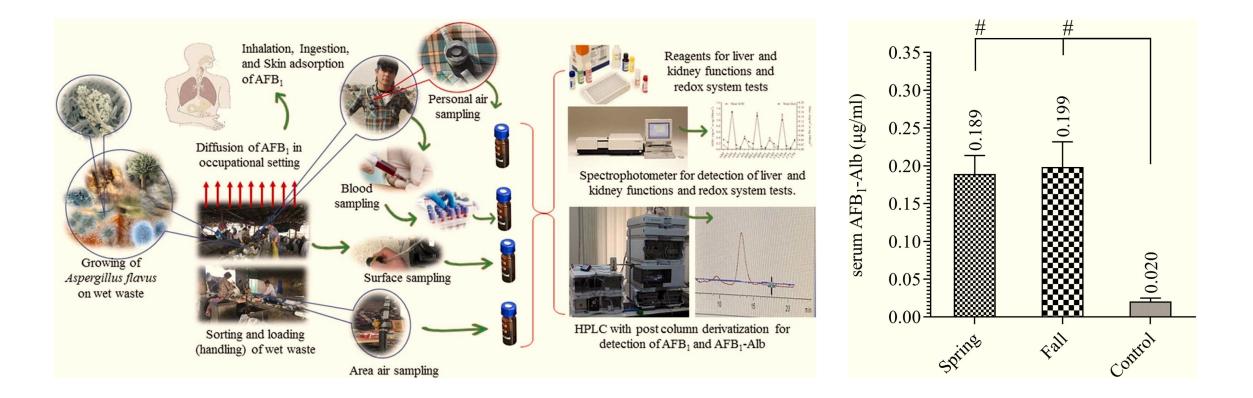


Andersen et al, 2011 Barkai-Golan, 2008 Pestka et al, 2008 Bata et al, 1995

Aflatoxin B1 (AFB1) and its albumin derivative were measured in wet waste management air, surface, and human serum (*n* = 60) in Tehran, Iran, indicating exposure to mycotoxins like AFB1 as an occupational hazard



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Mycotoxin	Reference	Summary
Aflatoxin B1 (AFB1)	Polizzi et al, 2009	Found in wallpaper, mycelium, or silicone of water-damaged buildings
Deoxynivalenol (DON)	Tuomi et al, 2000	Found in wallpaper, cardboard, wood, plywood, plasterboard, etc., from the moldy interiors of buildings with moisture issues
Fumonisin B1/B2 (FUM)	Shoemaker et al, 2021	Found in the urine of humans and animals in various indoor settings
Ochratoxin A (OTA)	Polizzi et al, 2009	Found in wallpaper, mycelium, or silicone of water-damaged buildings
Zearalenone (ZEA)	Palmgren et al, 1983	Found on corn dust in grain elevator in an industrial setting

	Exposure through		Impact on human health
TOXIPLEX BASIC	Food	Indoor	
Aflatoxin B1 (AFB1)	Yes	Yes	Targets liver which can result in hepatocellular carcinoma

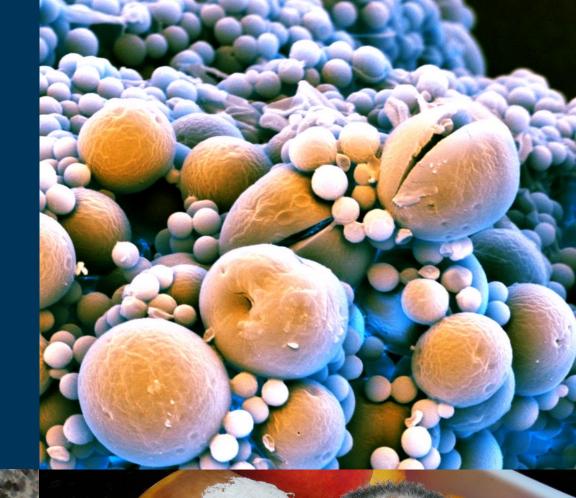
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Deoxynivalenol (DON)	Yes	Yes	Disrupts intestinal barrier, gut microbiota, and innate immunity

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Ochratoxin A (OTA)	Yes	Yes	Causes nephrotoxicity and pro-inflammatory cytokine secretion
Zearalenone (ZEA)	Yes	Yes	Induces macrophage apoptosis and inhibits protein/DNA synthesis

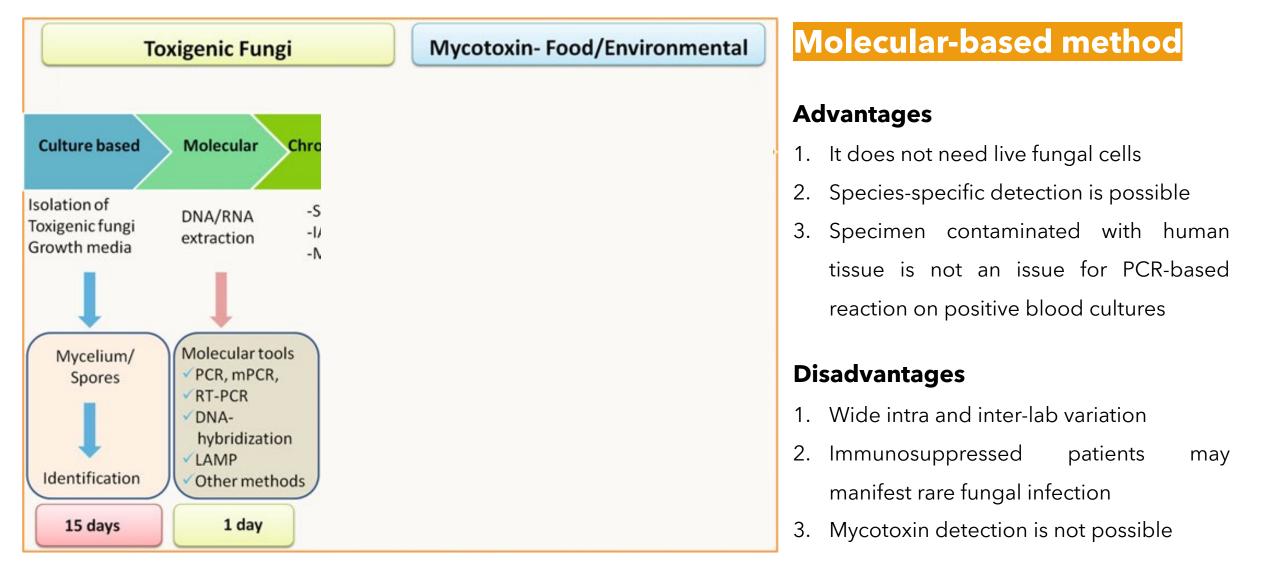
Current methods to detect mycotoxins

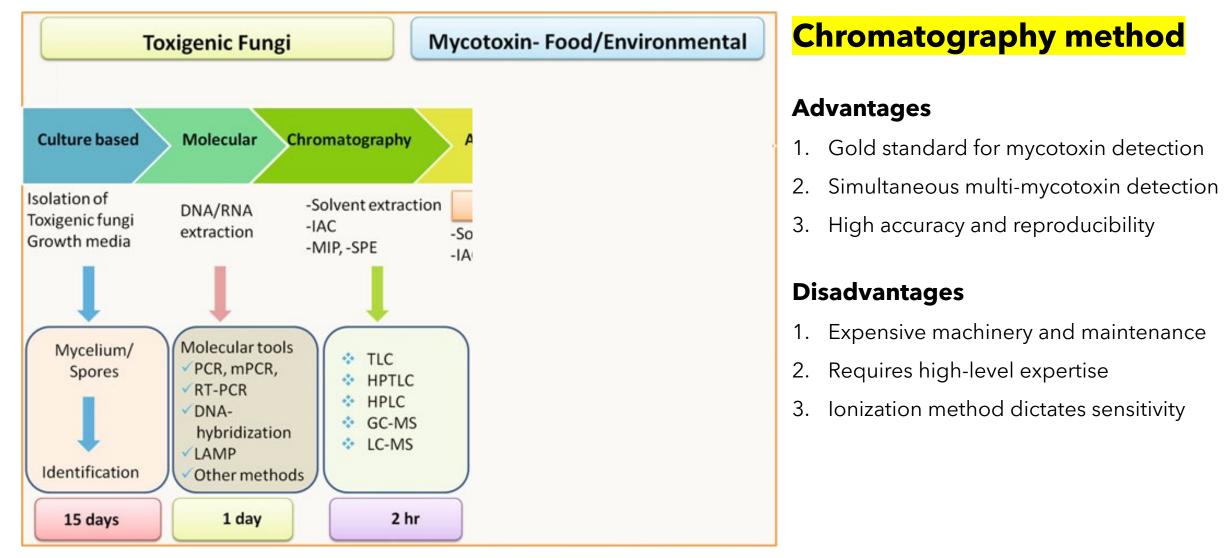


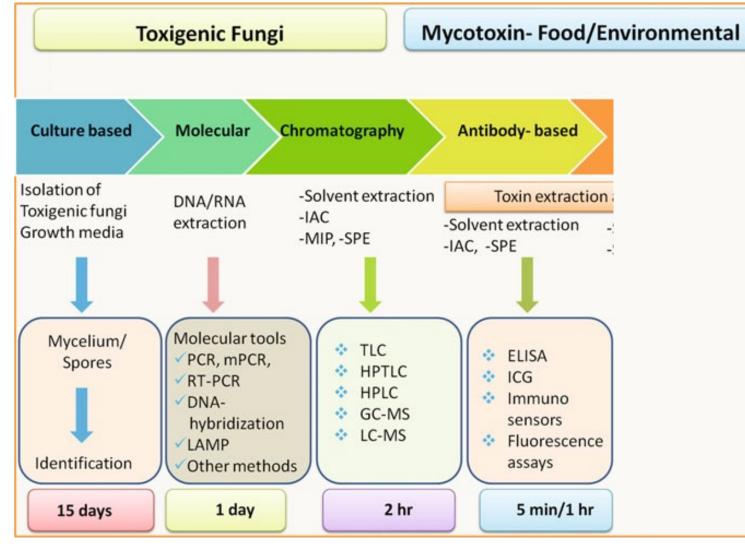


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Toxigenic Fungi Mycotoxin- Food/Environmental	Culture-based method
	Advantages
Culture based	1. The gold standard for fungal infections
Isolation of	2. Yields specific etiological agent
Toxigenic fungi Growth media	3. Allows susceptibility testing
	Disadvantages
Mycelium/	1. May miss over 50% of documented cases
Spores	2. Low positivity rate for early diagnosis
	3. Low sample recovery (10% - 60 %)
	4. 24-72 hrs required for fungi identification
Identification	5. Requires high-level expertise
15 days	6. Mycotoxin detection is not possible







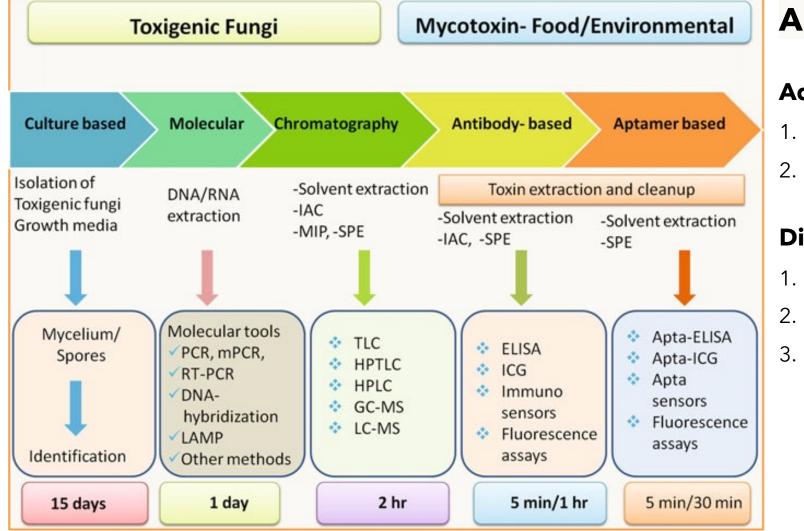
Antibody-based method

Advantages

- 1. A rapid mycotoxin screening method
- 2. High accuracy and reproducibility
- 3. Easily accessible for all sizes of labs
- 4. It does not require high-level expertise

Disadvantages

- 1. Prone to cross-reaction
- 2. Direct ELISA relies on non-linear calibration curves
- 3. The indirect immunoassay format is unreliable (i.e., measuring IgG, IgE, etc.)



Aptamer-based method

Advantages

- . A rapid mycotoxin screening method
- 2. High accuracy and sensitivity

Disadvantages

- . Prone to cross-reaction
- . Commercially unavailable and not viable
- 3. The SELEX process requires high-level expertise and expensive machinery

Mycotoxin detection with TOXIPLEX BASIC



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Direct immunochemical detection of multiple mycotoxins



TOXIPLEX BASIC **DIRECTLY** detects Aflatoxin B1 (AFB1), Deoxynivalenol (DON), Fumonisin (FUM), Ochratoxin A (OTA), and Zearalenone (ZEA).



TOXIPLEX BASIC **DOES NOT** detect human antibody responses (IgA, IgG, IgE, etc.) against AFB1, DON, FUM, OTA, and ZEA.





TOXIPLEX BASIC **DOES NOT** measure mycotoxins in human urine because,

- The use of human plasma or serum is five times more common than urine in literature (PubMed)
- 2. Variation in urine volume requires creatinine normalization
- Daily mycotoxin intake variation demands
 24hr sampling

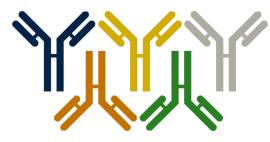
Direct immunochemical detection of multiple mycotoxins

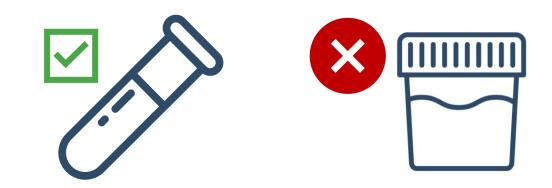


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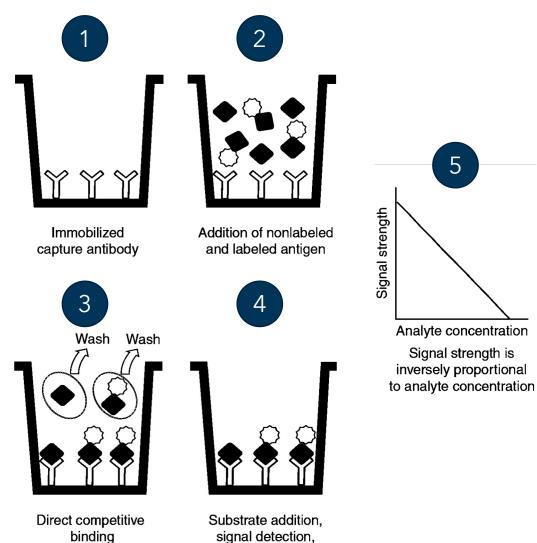




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TOXIPLEX BASIC assay principle and performance

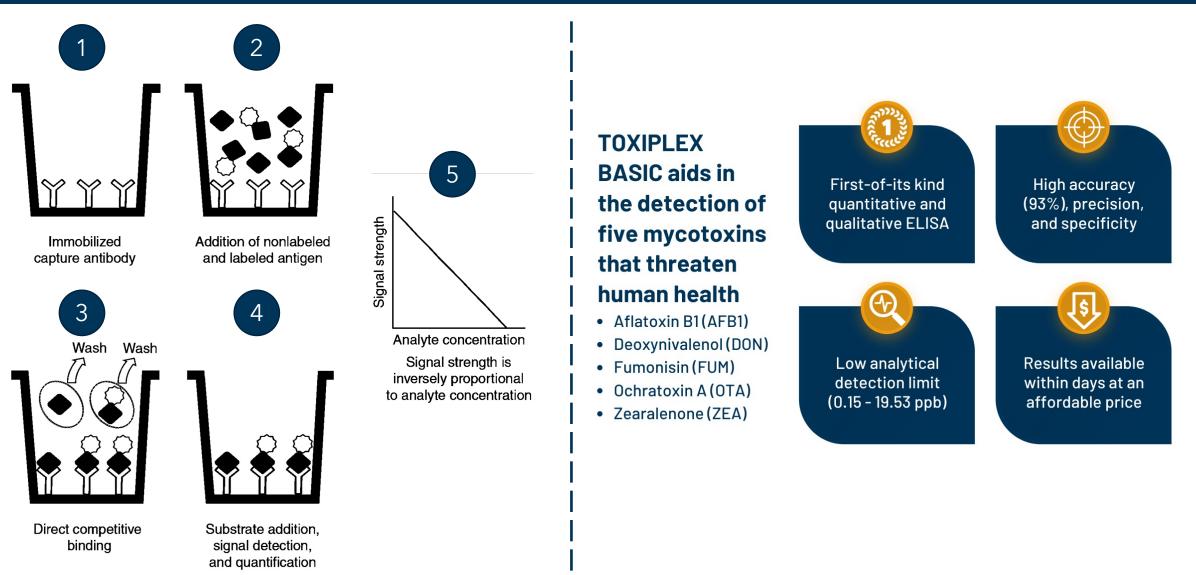


TOXIPLEX BASIC aids in the detection of five mycotoxins that threaten human health • Aflatoxin B1(AFB1) • Deoxynivalenol (DON) • Fumonisin (FUM) • Ochratoxin A (OTA) First-of-its kind quantitative and qualitative ELISA



signal detection, and quantification Adapted from Kohl and Ascoli, 2017

TOXIPLEX BASIC assay principle and performance



Adapted from Kohl and Ascoli, 2017

TOXIPLEX BASIC publication





Article

Analytical Validation of a Direct Competitive ELISA for Multiple Mycotoxin Detection in Human Serum

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- ² Sanoviv Medical Institute, KM 39 Carretera Libre Tijuana-Ensenada s/n Interior 6, Playas de Rosarito, Baja 11 California, Rosarito 22710, Mexico
- * Correspondence: kunal.garg@tezted.com (K.G.); leona.gilbert@tezted.com (L.G.)

TOXIPLEX BASIC offers a low limit of detection

Pa	rameters or Studies for Comparison	AFB1 (ppb)	DON (ppb)	FUM (ppb)	OTA (ppb)	ZEA (ppb)
	Lowest EU guidance levels for food \degree	2 ◊	500 [◊]	800 ◊	2 ◊	50 [◊]
	LLOQ from the present study *	0.61	19.53	4.88	19.53	0.15
	Cusabio (ELISA) §	1.5	100	30	1.5	30
Commercial	Elabscience (ELISA) ®	0.6	150	20	5	6
tests for	Helica TM (ELISA) ⊕	4	500	100	1	NI
food	AgraQuant [®] (ELISA) #	2	250	250	2	25
	VICAM (LFIA) ^	2	250	200	2.5	100
	Wu et al. 2020 (LFIA) Ø	0.1	NA	4	0.2	0.8
Emerging	Xing et al. 2020 (LFIA)	4	200	20	NA	40
technology	Charlermroj et al. 2021 (LFIA) ∅	5	10	0.5	NA	10
for food	Joshi et al. 2016 (SPR) Ø	3	26	10	13	16
	Wie et al. 2019 (SPR) Ø	0.9	5.3	NA	1.9	10.3

TOXIPLEX BASIC LLOQ compared with antibody tests for foodstuffs because direct ELISA for human serum/plasma did not exist in the literature

TOXIPLEX BASIC demonstrates low cross-reactivity

		Му	cotox	in sta	ndarc	ls		
		AFB1	DON	FUM	ΟΤΑ	ZEA	0	ç
	Anti-AFB1	100	2	2	2	2	20	Cross
Monoclonal	Anti-DON	10	100	8	11	11	40	rea
antibodies against	Anti-FUM	4	4	100	4	4	60	reactivity
mycotoxin	Anti-OTA	11	10	8	100	11	80	
	Anti-ZEA	4	4	3	3	100	100	%

TOXIPLEX BASIC example result report





ArminLabs I MVZ für Integrative Diagnostik und Medizin GmbH - branch practice · Zirbelstr. 58 2nd floor · 86154 Augsburg · Germany

Plex			
Analysis	Result Units	Reference Range	Chart
Final report	Date of	Order-ID : Reception/Report :	Page 1/1
D 86154 Augsburg			
MVZ für Integrative Diagnostik und Medizin GmbH Zirbelstr. 58		tient : te of Birth:	

ToxiPlex				
5 Aflatoxin B1		negative	negative	
5 Deoxynivalenol	L	62.4	negative	
5 Fumonisin (B14	-B2)	negative	negative	
5 Ochratoxin A		312.5	negative	
5 Zearalenone		negative	negative	
Mycotoxin type	Detected (YES / NO)	Calculated conce	ntration (ppb)	Plate controls
Mycotoxin type Aflatoxin B1 (AFB1) Deoxynivalenol (DON)	Detected (YES / NO) NO YES	Calculated concert < 0.61 62.4	ntration (ppb)	
Aflatoxin B1 (AFB1)	NO	< 0.61	ntration (ppb)	Plate controls Positive PASS
Aflatoxin B1 (AFB1) Deoxynivalenol (DON)	NO YES	< 0.61 62.4	ntration (ppb)	

Serologically evidence of an immune reaction against the Deoxynivalenol and Ochratoxin A by TOXIPLEX BASIC test.

»Deoxynivalenol: Belonging to the mycotoxin family of trichothecenes, this is found mainly in cereals, such as wheat and beans, as well as in spices. It can also be found in homes, basements, on the filters of air conditioners in cars or triggered through moisture or water damage.

Because it is metabolised rapidly, short-termsymptoms may include nausea, vomiting, abdominal pain, headache, dizziness, and fever. Effects atthe cellular level are due to binding to ribosomal subunits and inhibition of protein synthesis.Membrane function is thought to be altered due to lipid peroxidation, and intercellularcommunication and deregulation of calcium homeostasis may be affected.

»Ochratoxin A: A mycotoxin found primarily in cereals especially wheat and barley, as well as theirproducts such as dried fruit, spices, licorice, coffee beans, wine, grape juice and roots. It can also occur immeat from animals that have consumed contaminated grains. It is mainly produced by fungi in the genera Aspergillus and Penicillium. Ochratoxin A has also been detected in dust samples of airborne particulates in relevant environments. Ochratoxin A is associated with endemicnephropathology in humans, as well as urinary tract tumours. There are numerous records ofnephrotoxic, hepatotoxic, teratogenic, and immunotoxic damage from this mycotoxin in livestock, butonly a few reports of human health effects, which is why IARC classifies it as a Group 2B possible humancarcinogen.

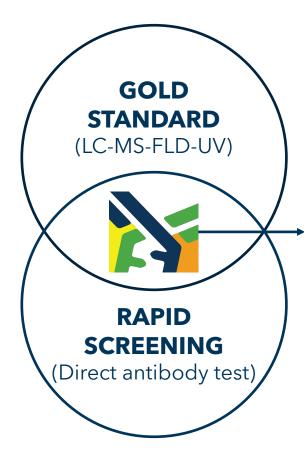
validated by

Dr.Armin Schwarzbach, AL Dr. Mihail Pruteanu

Summary

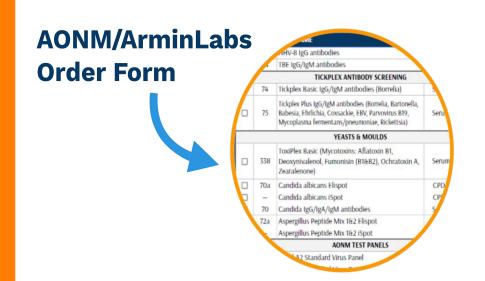
We are exposed to mycotoxins through contaminated





TOXIPLEX BASIC

- 1. Test multiple mycotoxins
- 2. High accuracy
- 3. High sensitivity
- 4. Easily accessible for patient



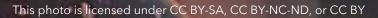


ACADEMY OF NUTRITIONAL MEDICINE

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- 1. **VISIT** www.aonm.org/mycotoxin-testing/
- 2. CALL AONM UK Helpline: 03331 210 305
- 3. EMAIL info@aonm.org

HOW TO ORDER



Thank you

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