Self-sampling may be a viable sample collection method for SARS-CoV-2 testing

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Video Byte

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Abstract

The recent outbreak of SARS-CoV-2 infections has strained healthcare systems worldwide and diagnostic testing is a critical part of any pandemic management plan. PCR tests on clinical samples collected by health care professionals (HCPs) is currently the gold standard, but patient self-sampling may facilitate increased testing without adding strain or risk of exposure for HCPs. A recent study tested the sensitivity, feasibility, and acceptance of self-collected oropharyngeal samples. Hospitalized SARS-CoV-2-infected patients collected two self-administered samples and filled out a questionnaire. Researchers also collected HCP-administered samples for comparison. While the HCP-collected samples had the highest estimated sensitivity compared to each of the self-collected samples, at 88%, 78%, and 77% respectively, using both self-collected sample results together increased their estimated sensitivity to 88%, which is comparable to the HCP-collected samples. Most patients indicated willingness to self-sample at home. Negative test results on previously confirmed cases increased with disease duration and the presence of antibodies against the virus, suggesting that self-sampling will be most useful early in the course of infection. These results were limited by sample size and to one healthcare center but suggest that self-sampling is a viable screening method for SARS-CoV-2 infection.