Unlocking the Complete Blood Count: Derivation of a Single-Panel Laboratory Test that includes Monocyte Distribution Width to Create a Universal Sepsis Screening Tool

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Early Signs Group

or < 36°C at triage]

indicator:

triagel

result.

The presence of any early vital sign

Abnormal temperature [> 38°C

Hypotension [< 90 mmHg at

Elevated lactate (> 2 mmol/L)

No Early Signs ("Occult")

known prior to the CBC result.

No early vital sign at triage and no

elevated lactate prior to the CBC



Background | Sepsis & CBC

Sepsis

3 million cases annually; 15-30% mortality



AT LEAST 250,000 AMERICANS

DIE FROM SEPSIS EACH YEAR.

WESEPSIS

Timely initiation of simple measures is life-saving

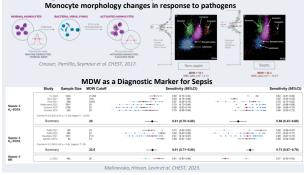
Septic patients presenting without obvious signs have reported delays to treatment and increased risk of mortality.

Complete Blood Count (CBC) Unlocking the CBC for early detection of sepsis in the Emergency Department (ED) may have enormous impact, due to it's routine (and early) availability.

Monocyte Distribution Width (MDW) is a

morphometric parameter that reflects variability in monocyte cell volume. It has emerged as a useful biomarker for early sepsis detection.

Background | Monocyte Distribution Width



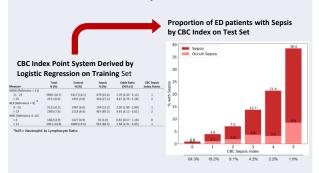
Methods | Study Flow Diagram

Study Cohort

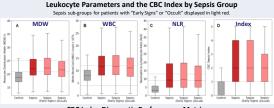
Adult (> 18yrs) ED visits with a CBC differential collected within 6-hours of FD arrival

| | | Stud 51,04 | ty Cohort 7 ED Visits | | |
|------------------------|-------------|--|--|---------------------------------------|--|
| 1.068 Hyperthermia | Early | Signs | | ty Signs | |
| 368 Hypothermia | 5,685 (11.1 | %) ED Visits | | 9%) ED Visits | |
| 711 Hypothermion | Training | Test | | Test | |
| 4.068 Elevated Lastate | 3,799 | 1,886 | | 14,960 | |
| | ontrol | Sepsis | Control | Occult Sepsis | |
| | ED Visits | 1,339 ED Visits | 44,965 ED Visits | 397 ED Visits | |
| | | Control 5%) ED Visits Test 16,273 | Total 1,736 (3.4 Training 1,163 | Sepsis %) ED Visits Test 573 | |

Results | CBC Index



Results | CBC Index Performance



CBC Index Diagnostic Performance Metrics Cohor

| t sub-grou | ps foi | r patients | prese | nting | with | "Ea | rly Sigr | ns" o | ¢. | "No E | arly | Signs | (Occult)' | ۰. |
|------------|--------|------------|-------|-------|------|-----|----------|-------|----|-------|------|-------|-----------|----|

| | | | Total Cohort | | | |
|-------------|------------------|------------------|------------------|------------------|-------|------|
| Index Score | Sensitivity | Specificity | PPV | NPV | LR+ | LR- |
| ≥1 | 82.9 (79.8-86.0) | 65.9 (65.2-66.7) | 7.9 (7.2-8.6) | 99.1 (98.9-99.3) | 2.43 | 0.26 |
| 22 | 61.1 (57.1-65.1) | 85.0 (84.5-85.5) | 12.5 (11.3-13.8) | 98.4 (98.2-98.6) | 4.07 | 0.46 |
| 23 | 42.2 (38.2-46.3) | 93.8 (93.4-94.1) | 19.2 (17.1-21.4) | 97.9 (97.7-98.1) | 6.76 | 0.62 |
| ≥ 4 | 25.1 (21.6-28.7) | 97.5 (97.3-97.8) | 26.5 (22.8-30.2) | 97.4 (97.1-97.6) | 10.25 | 0.77 |
| 5 | 11.0 (8.4-13.6) | 99.4 (99.3-99.5) | 38.4 (31.0-45.9) | 96.9 (96.7-97.2) | 17.71 | 0.9 |
| | | | Early Signs | | | |
| Index Score | Sensitivity | Specificity | PPV | NPV | LR+ | LR- |
| 21 | 81.9 (78.3-85.5) | 41.9 [39.3-44.4] | 30.1 (27.5-32.7) | 88.3 (85.9-90.7) | 1.41 | 0.43 |
| ≥2 | 61.2 (56.7-65.8) | 66.2 (63.7-68.6) | 35.6 (32.2-39.0) | 84.8 (82.7-86.9) | 1.81 | 0.59 |
| 23 | 43.1 (38.5-47.7) | 83.6 (81.7-85.5) | 44.5 (39.8-49.2) | 82.8 (80.9-84.7) | 2.63 | 0.68 |
| ≥ 4 | 26.8 (22.6-30.9) | 93.4 (92.1-94.6) | 55.1 (48.5-61.8) | 80.7 (78.8-82.6) | 4.03 | 0.78 |
| 5 | 11.1 (8.2-14.0) | 98.2 (97.5-98.9) | 65.3 (54.6-76.1) | 78.4 (76.5-80.3) | 6.18 | 0.91 |
| | | | | | | |
| Index Score | Sensitivity | Specificity | PPV | NPV | LR+ | LR- |
| ≥1 | 86.4 (80.5-92.2) | 68.3 (67.5-69.0) | 2.4 (1.9-2.8) | 99.8 (99.7-99.9) | 2.72 | 0.2 |
| > 2 | 60.6 (52.3-68.9) | 86.8 (86.3-87.4) | 3.9 (3.1-4.8) | 99.6 (99.5-99.7) | 4.6 | 0.45 |
| 23 | 39.4 (31.1-47.7) | 94.7 (94.4-95.1) | 6.3 (4.6-7.9) | 99.4 (99.3-99.6) | 7.5 | 0.64 |
| 24 | 19.7 (12.9-26.5) | 98.0 (97.7-98.2) | 7.9 (5.0-10.8) | 99.3 (99.1-99.4) | 9.64 | 0.82 |
| 5 | 10.6 (5.4-15.9) | 99.5 (99.4-99.6) | 15.7 (8.2-23.3) | 99.2 (99.1-99.3) | 20.97 | 0.9 |

Conclusions

A CBC-based index that includes MDW was effective in early sepsis detection. Previous research found that MDW, WBC, and NLR in combination showed superior diagnostic performance than single parameters. In this study, a composite CBC Index was derived and tested. Diagnostic performance was strongest in the "occult" sepsis subgroup. representing the patients that are most often missed and suffer delays in care and are at increased risk of mortality.

Malinovska, Hinson, Levin et al, J Am Coll Emerg Physicians Open, 2022. Wayne et al. JAMA Netw Open, 2021. Filbin et al. Crit Care Med. 2018. Campanelli et al. BMJ Infect Dis. 2022

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