shanx medtech

KAIROS: Setting a new standard of care in bacterial infection management



¹ World Health Organization, Antimicrobial Resistance ² Center for Disease Control and Prevention, Antibiotic Prescribing and Use

³ Kabbani S. et al Clinical Infectious Diseases, 2018 ⁴Simmering JE et al., Open Forum Infect Dis., 2017

FLORA[™]: Real-Time **Bacterial Metabolism Monitoring Technology**

All living bacteria constantly interact and communicate with their environment through the exchange of molecules between the bacterial cell and their surroundings. This ongoing molecular exchange alters the chemical composition of the extracellular environment over time.

is а proprietary chemical distinct featuring two component groups: our innovative Enriched Nutrient Formulation, which activates specific metabolic pathways to accelerate pathogen metabolism and our novel fluorescent chemical sensors, which track extracellular chemical changes resulting from these metabolic activities.

With FLORA[™], we can monitor over twenty environmental parameters both in the absence and presence of a wide range of antimicrobial agents, addressing two critical

1. Are there metabolizing pathogens present? And

2. What is their antimicrobial resistance and susceptibility?



Clinical study results for Dx/AST of Urinary Tract Infections from hospital patient urine samples

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	Bacterial Species Tested • E. coli • K. pneumonia	Diagnosis (Dx)	>99%	Results from comparative analysis of KAIROS against Gold-Standard culture and AST method (VITEK2). All KAIROS tests were conducted directly on patient urine samples, with no prior culture or incubation. Data indicates number of instances wherein KAIROS AST results matched with Gold-Standard Diagnostic Result for <i>E. coli</i> and <i>K.</i> <i>pneumoniae</i> infections.	Species (n)	E. coli (63)		K. pneumoniae (21)		Sub-total		Tatal
Hospital Urine Samples = 144					VITEK [®] 2 Result:	S	R	S	R	S	R	lotal
					amoxicillin	26/30 86.7 %	33/33 100 %	0/0	21/21 100 %	26/30 86.7 %	54/54 100 %	80/84 95.2 %
					cotrimoxazole	19/22 86.4 %	14/14 100 %	3/3 100 %	2/2 100 %	22/25 88.0 %	16/16 100 %	38/41 92.7 %
UTI Positive = 105	P. mirabilisE. faecalis	Antibiotic	88.8%		ciprofloxacin	27/39 69.2 %	19/20 95.0 %	6/10 60.0 %	11/11 100 %	33/49 67.3 %	30/31 96.8 %	63/80 78.8 %
UTI Negative= 39	• Strep.	Susceptibility (AST)			Amoxicillin/ clavulanic acid	32/39 82.1 %	23/24 95.8 %	9/13 69.2 %	8/8 100 %	41/52 78.8 %	31/32 96.9 %	72/84 85.7 %
	• S. aureus				fosfomycin	61/63 96.8 %	0/0	7/11 63.6 %	8/10 80.0 %	68/74 91.9 %	8/10 80.0 %	76/84 90.5 %
Urine: No pre-culture or	• K. oxytoca	AST (n=17) Polymicrobial samples	91.0%		nitrofurantoin	60/61 98.4 %	2/2 100 %	0/0	0/0	60/61 98.4 %	2/2 100 %	62/63 98.4 %
sample preparation, no patient data provided or collected.	 K. derogenes C. koseri E. faecium S. marcescens 				trimethoprim	34/39 87.2 %	24/24 100 %	7/7 100 %	13/14 92.9 %	41/46 89.1 %	37/38 97.4 %	78/84 92.9 %
					Sub-total	259/293 88.4 %	115/117 98.3 %	32/44 72.7 %	63/66 95.5 %	291/337 86.4 %	178/183 97.3 %	
METC: MEC-2023-0379	J. marcescens	AST COMPARISON TO VI	ITEK2 (bioMérieux)		Total	374/4 91.2	410 . %	95/1 86.4	110 4 %		Overall:	469/520 90.2 %

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