



Is Dithiothreitol useful for disrupting biofilm in synovial fluid?”

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Why is this topic important

- **Biofilm-associated PJI is challenging because complicate both diagnosis and treatment**
- **Otherwise:**
 - **The formation of biofilm aggregates has been found also in synovial fluid**
 - **Diagnostic issues: DTT useful method?**

1. **Drago L.** 2023. DOI: [10.1007/s00264-023-05714-z](https://doi.org/10.1007/s00264-023-05714-z)
2. **Tsikopoulos K.** 2022. DOI: [10.1007/s00264-022-05350-z](https://doi.org/10.1007/s00264-022-05350-z)
3. **Sambri A.** 2018. DOI: 10.1007/s11999.000000000000000060
4. **Drago L.** 2013. DOI: 10.1002/jor.22423.
5. **Karbysheva S.**, 2022 Jun;103(2):115679. doi: 10.1016/j.diagmicrobio.2022.115679. Epub 2022 Mar 12. PMID: 35395437.
6. **Bakalakovs M.** 2021 Aug;159(4):447-453. English. doi: 10.1055/a-1150-8396. Published May 11, 2020. PMID: 32392595.
7. **Henríquez L.** Microbiol Spectr. 2024 Aug 6;12(8):e0002024. doi: 10.1128/spectrum.00020-24. Epub 2024 Jun 25. PMID: 38916322; PMCID: PMC11302281.
8. **Randau TM.I.** 2021 Aug;159(4):447-453. English. doi: 10.1055/a-1150-8396. Published May 11, 2020. PMID: 32392595



Literature Review/Process

- ❖ **Number of articles retrieved: 43**
- ❖ **Screening: 32**
- ❖ **Reviewed: 16**
- ❖ **Final number of publications: 4**











Search Results: 43

((biofilm* OR "Biofilms"[Mesh]) AND (Dithiothreitol OR "Dithiothreitol"[Mesh] OR Cleland Reagent OR Cleland's Reagent OR Clelands Reagent OR Sputolysin OR DTT)) AND (((1990:3000/12/12[pdat]) AND (english[LA]))) OR (randomized controlled trial [pt] OR controlled clinical trial [pt] OR randomized [tiab] OR placebo [tiab] OR drug therapy [sh] OR randomly [tiab] OR trial [tiab] OR groups [tiab])) NOT (animals [mh] NOT humans [mh]))







Is sonication superior to dithiothreitol in diagnosis of periprosthetic joint infections? A meta-analysis

Tsikopoulos K. Et al. International Orthopaedics (2022)

Sonication

Study	TP	FP	FN	TN	Sensitivity (95% CI)	Specificity (95% CI)	Sensitivity (95% CI)	Specificity (95% CI)
Fang 2021	14	2	1	17	0.93 [0.68, 1.00]	0.89 [0.67, 0.99]		
Karbysheva 2019	45	0	33	33	0.58 [0.46, 0.69]	1.00 [0.89, 1.00]		
Randau 2020	13	0	10	14	0.57 [0.34, 0.77]	1.00 [0.77, 1.00]		
Sambri 2018	39	4	5	69	0.89 [0.75, 0.96]	0.95 [0.87, 0.98]		
Sujeesh 2021	29	0	5	39	0.85 [0.69, 0.95]	1.00 [0.91, 1.00]		

DTT

Study	TP	FP	FN	TN	Sensitivity (95% CI)	Specificity (95% CI)	Sensitivity (95% CI)	Specificity (95% CI)
Fang 2021	11	0	4	18	0.73 [0.45, 0.92]	1.00 [0.81, 1.00]		
Karbysheva 2019	14	0	21	58	0.40 [0.24, 0.58]	1.00 [0.94, 1.00]		
Randau 2020	13	0	10	17	0.57 [0.34, 0.77]	1.00 [0.80, 1.00]		
Sambri 2018	38	1	4	72	0.90 [0.77, 0.97]	0.99 [0.93, 1.00]		
Sujeesh 2021	28	1	6	38	0.82 [0.65, 0.93]	0.97 [0.87, 1.00]		

The diagnostic accuracy of DTT and sonication were 86.7% and 83.9%, respectively

Clinical evaluation of dithiothreitol in comparison with sonication for biofilm dislodgement in the microbiological diagnosis of periprosthetic joint infection.

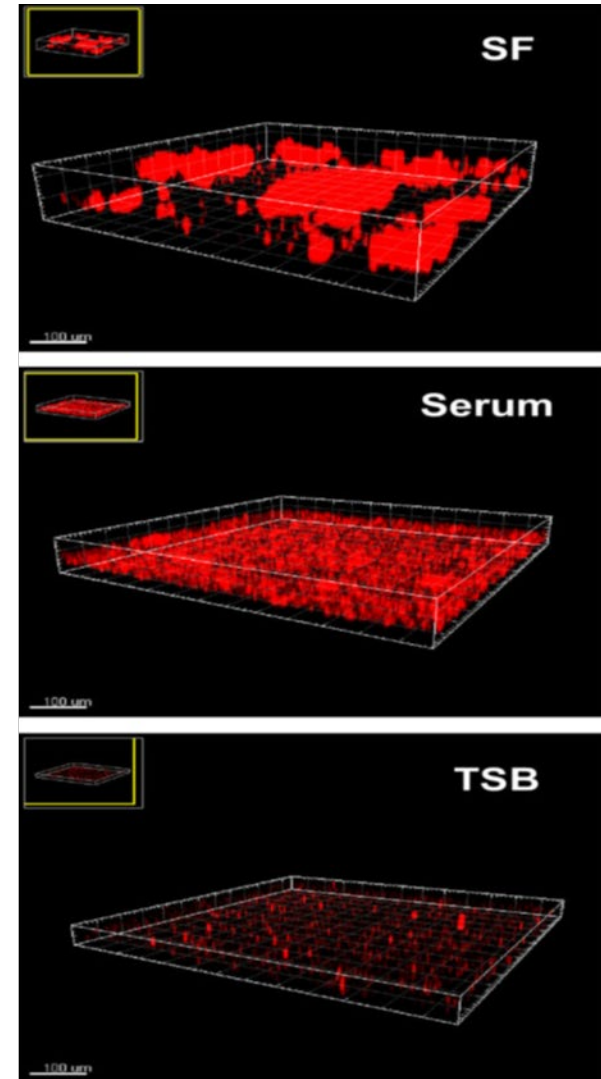
Svetlana Karbysheva, Sabrina Cabric, Anna Koliszak, Maja Bervar,
Stephanie Kirschbaum, Sebastian Hardt, Carsten Perka, Andrej Trampuz
Diagnostic Microbiology and Infectious Disease (2022)

Sonication showed better sensitivity (73.8%) than DTT (43.2%) and comparable specificity (98% and 94.6%, respectively)

- *“If the processing of the samples was carried out with delay (on the next day or by 48 hours from the explant), **prostheses were submerged in DTT solution from the DTT diagnostic kit and kept in refrigerator at 4°C.**”*
- *“**24% patients of DTT group the explanted prostheses were processed with delay after the samples collection (mean 19 hours, range 14–24 hours).**”*

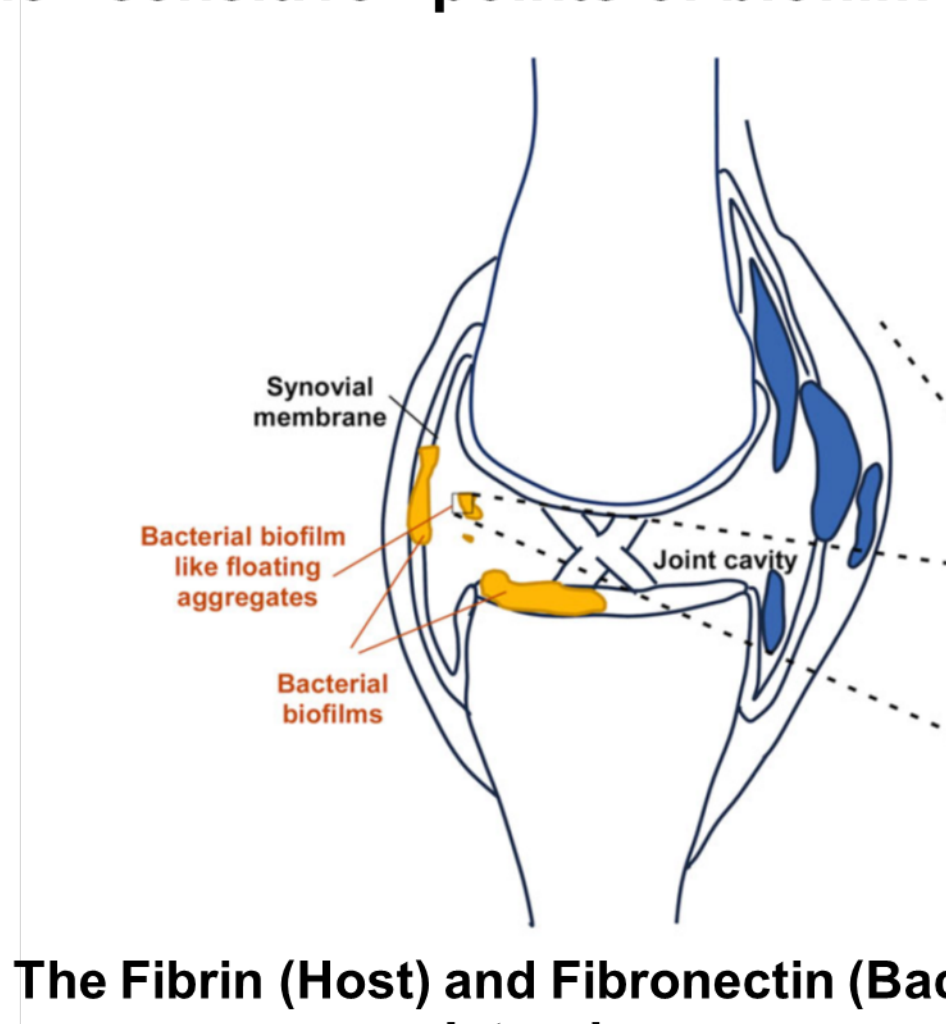


Biofilm Producing by *S.aureus* in different fluids





The «sensitive» points of biofilm location

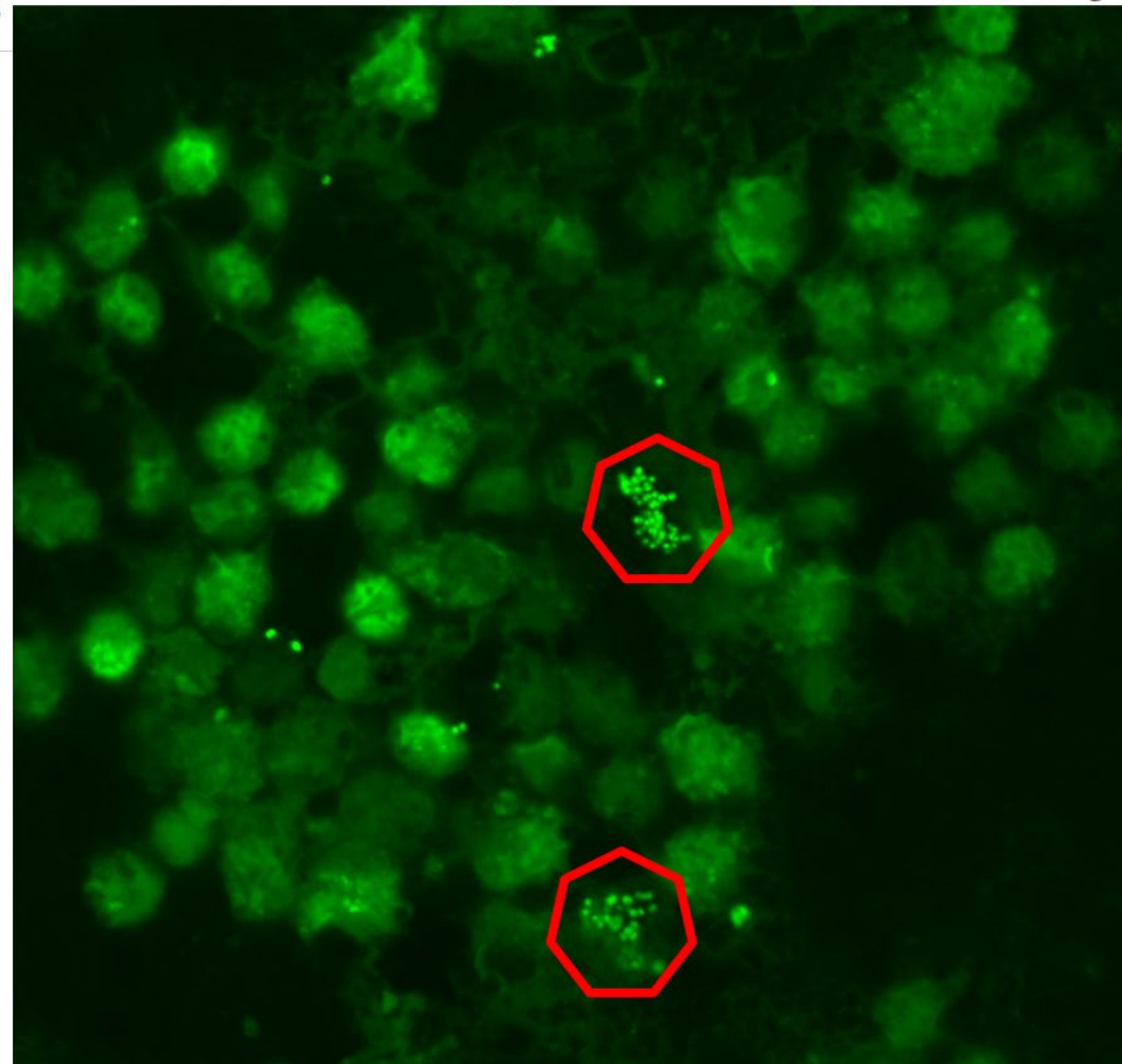




Review

Bacteria Living in Biofilms in Fluids: Could Chemical Antibiofilm Pretreatment of Culture Represent a Paradigm Shift in Diagnostics?

Lorenzo Drago ^{1,2,*} , Andrea Fidanza ^{3,4}, Alessio Giannetti ⁵, Alessio Ciuffoletti ⁵, Giandomenico Logroscino ³ 
and Carlo Luca Romanò ⁶





Dithiotreitol pre-treatment of synovial fluid samples improves microbiological counts in peri-prosthetic joint infection

Lorenzo Drago¹ · Delia Romanò² · Andrea Fidanza^{3,4} · Alessio Giannetti³ · Rocco Erasmo⁴ · Andreas F. Mavrogenis⁵ · Carlo Luca Romanò⁶

- **Dithiothreitol pre-treatment led to a higher number of positive samples, compared to controls (27 vs 19);**
- **Statistically significant increase in the sensitivity (from 54.3 to 77.1%);**
- **Colony-forming units count from 1884±2.129 CFU/mL to 20.442±19.270 with DTT (P=0.02).**



HYPOTHESIS

- Bacteria in the liquids form spontaneously co-aggregates
- When aggregates are few → high probability to get Negs
- When aggregates are dissolved → counts are higher



RESPONSE/RECOMMENDATION:

Dithiothreitol (DTT) has been demonstrated to disrupt biofilms formed on orthopedic implants and synovial fluid, thereby enhancing bacterial recovery and improving diagnostic accuracy of periprosthetic joint infections (PJI).

LEVEL OF EVIDENCE: Moderate



❖ **Vote:**

Agree n=19; 63%

Disagree n=1; 4%

Abstain n=10; 33%