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DEVELOPMENT AND CHARACTERIZATION OF ELECTRONIC NOSES FOR THE RAPID DETECTION OF COVID-19 IN EXHALED BREATH

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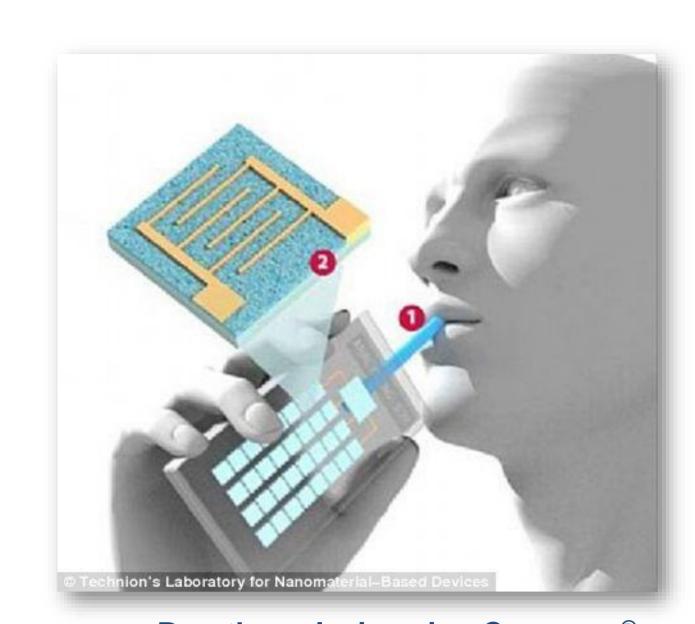






INTRODUCTION •

Non-invasive and rapid approach is needed for diagnosis of COVID-19. In this work, exhaled breath analysis using e-Nose is presented as an innovative technique to identify the COVID-19 specific VOCs. The analytical performances of Cyranose®, a commercial e-Nose device, were investigated under controlled conditions towards this goal. Sensitivity, limit of detection and reproducibility of standardized VOCs existing in the breath was assessed. In addition, the effect of various experimental conditions on sensor response was evaluated, including temperature, relative humidity, flow and sampling time, aiming to select the optimal parameters and to validate it in clinical trials to detect the COVID-19 biomarkers. Cyranose® exhibits high sensitivity and reproducible response towards acetone and nonanal, with a limit of detection of 63 ppb and 20 ppb respectively. Furthermore, results show that the variability of relative humidity, temperature and flow sampling, induced a significant sensors response variation, whereas, varying the sampling time does not affect significantly the sensor response.



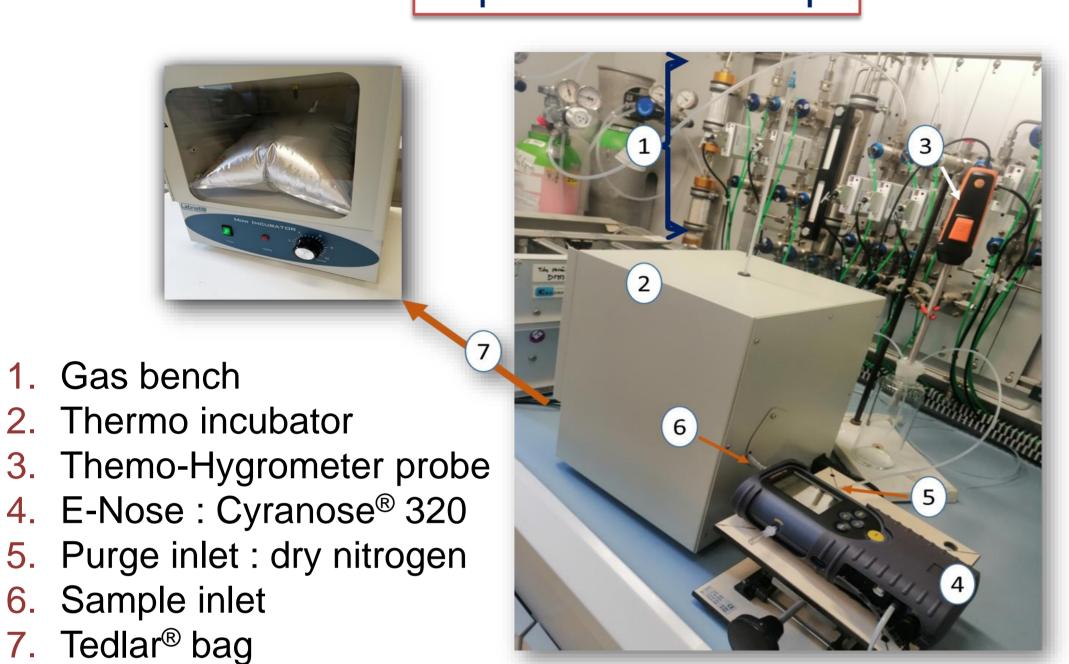
Breath analysis using Cyranose®: an array of 32 gas sensors

- 1- Sampling of an exhaled breath by Cyranose®
- 2- A nanocomposite chemiresistive gas sensors



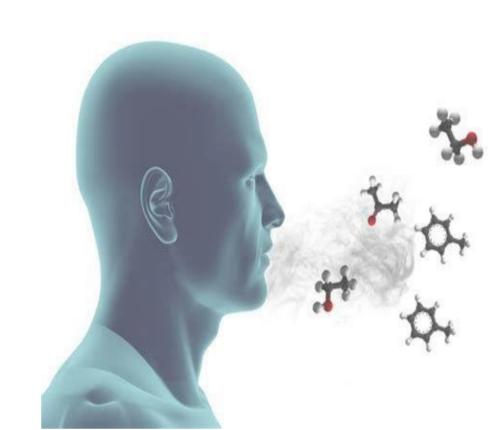
MATERIALS & METHODS -

Experimental Setup



1- Tedlar® Bag containing:

- ✓ Exhaled breath of a control patient ✓ Generated classical VOCs
- (acetone, ethanol...)
- ✓ Specific vapor identified as a biomarker for COVID-19 (nonanal)



https://www.researchsea.com/asia_research_news_2018.php

Evaluation of analytical performances of Cyranose®

Assessment under controlled

conditions ✓ Sensitivity

2- Sampling & Analysis

- ✓ Limit of detection ✓ Reproducibility
- ✓ Repeatability
- ✓ Stability
- ✓ Limitations
- ✓ Impact of various experimental conditions on the response:
- Relative humidity
- Flow rate
- Sampling time - Temperature

3- Data processing & Statistical treatment

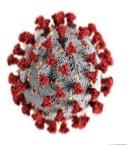
- **Pcnose:** provided with Cyranose®
- **E-NaiR:** software tool for e-Nose devices developed by CEA-JOLIOT and used for data processing of clinical trials at Foch Hospital



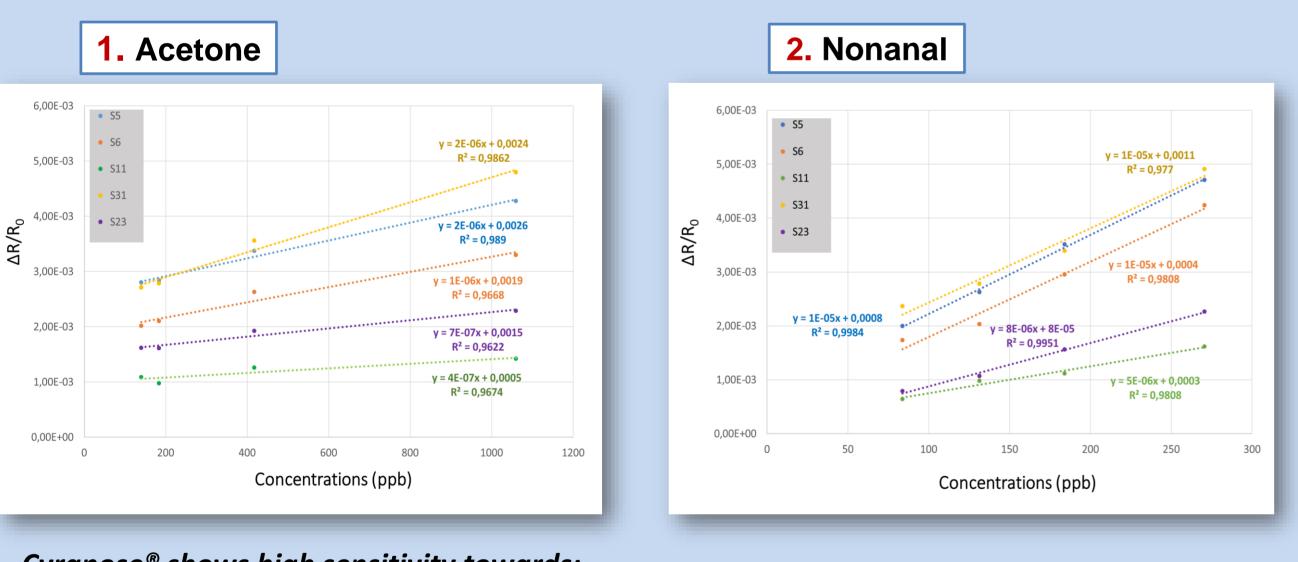
Selection of the most appropriate conditions to detect the biomarkers of COVID-19 in a complex mixture of VOCs from the breath



Validation of optimized analytical protocol in clinical trials



Calibration of Cyranose® in the presence of VOCs



Cyranose® shows high sensitivity towards:

- ✓ Acetone: VOC normally found in the breath of a healthy patient. Limit of Detection: 63 ppb
- ✓ Nonanal: VOC presents in the exhaled breath of COVID-19 patients*. Limit of detection: 20 ppb *S. Grassin-Delyle et al. / EBioMedicine 63 (2021) 103154

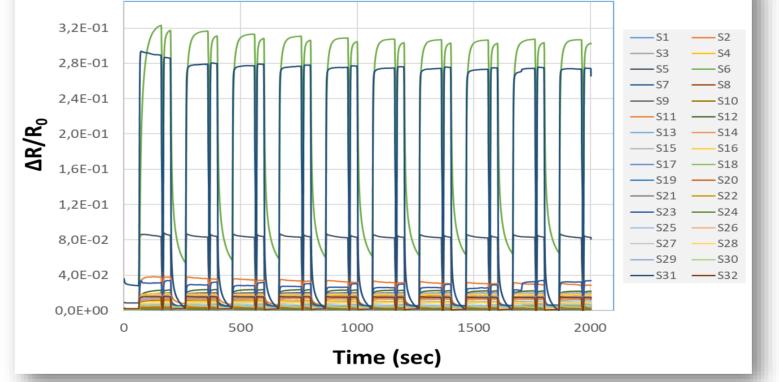
Test of an exhaled breath of a control patient

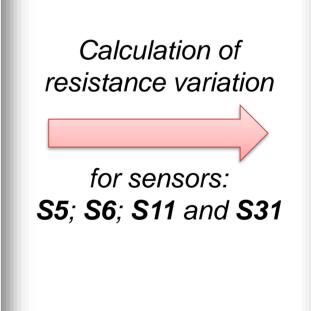
> Real-time response of 32 sensors of Cyranose®:

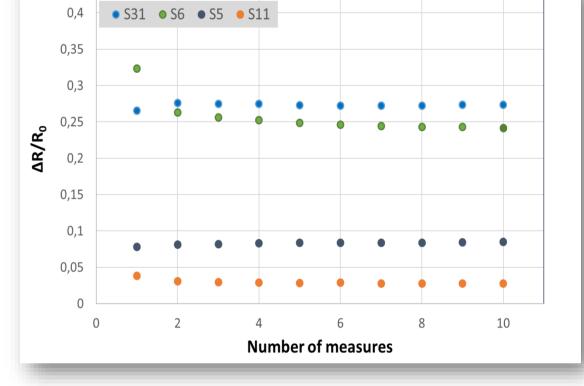
- Sample: exhaled breath of a control patient - Flow rate: 120 mL/min

- Baseline: ultra-pure dry nitrogen

- Baseline & Sampling time: 60 secondes & 90 secondes

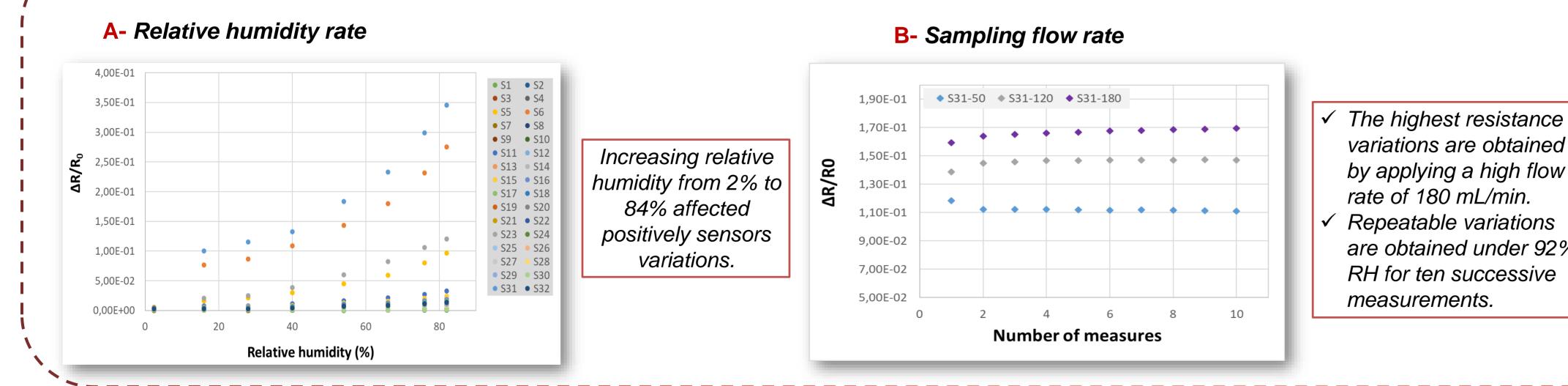




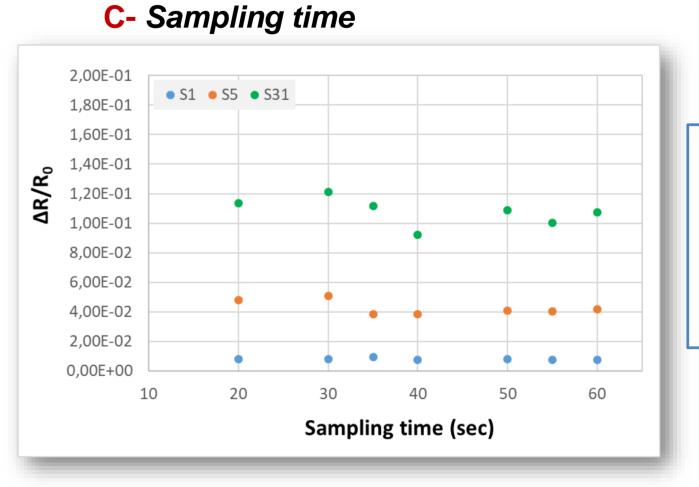


- ✓ Four sensors exhibit meaningful responses for VOCs in the exhaled breath of a control patient
- ✓ High repeatability and reproducibility of resistance variations for ten successive measurements

Effect of various experimental conditions on sensor response



variations are obtained by applying a high flow Repeatable variations are obtained under 92% RH for ten successive



Varying sampling time from 20 s to 60 s does not affect significantly sensor's response.



CONCLUSIONS & PERSPECTIVES ~

Identification of the COVID-19 specific VOCs by breath analysis technique using a commercial e-Nose device is the challenge of this project.

- Characterization and evaluation of the analytical performances of Cyranose® under controlled experimental conditions show:
 - High sensitivity to acetone vapors, normally existing in the exhaled breath, with a limit of detection of 63 ppb.
 - Meaningful response to nonanal vapors, presents in the breath of COVID-19 patients, with a limit of detection of 20 ppb.
- Repeatable and reproducible responses to VOCs existing in the exhaled breath of a control patient. - The Sensor response variations depends potentially on relative humidity changes and sampling flow rate used.
- ✓ Selection of the most appropriate protocol and data processing algorithm for COVID-19 diagnosis.
- ✓ Validation of the optimized analytical strategy in clinical trials.