

Overview**Useful For**

Rapid, sensitive, and specific identification of *Mycoplasma hominis* from plasma

Method Name

Real-Time Polymerase Chain Reaction (PCR) Using LightCycler and Fluorescent Resonance Energy Transfer (FRET)

NY State Available

Yes

Specimen**Specimen Type**

Plasma EDTA

Specimen Required

The high sensitivity of amplification by PCR requires the specimen to be processed in an environment in which contamination of the specimen by *Mycoplasma hominis* DNA is unlikely.

Collection Container/Tube:

Preferred: Lavender top (EDTA)

Acceptable: Royal blue top (EDTA), pink top (EDTA), or sterile vial containing EDTA-derived aliquot

Submission Container/Tube: Screw-capped, sterile container

Specimen Volume: 1 mL

Collection Instructions: Centrifuge and separate plasma within 24 hours of collection.

Specimen Minimum Volume

0.5 mL

Reject Due To

All specimens will be evaluated at Mayo Clinic Laboratories for test suitability.

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Plasma EDTA	Refrigerated (preferred)	7 days	
	Frozen	7 days	

Clinical and Interpretive

Clinical Information

Mycoplasma hominis has been associated with a number of clinically significant infections, although it is also part of the normal genital flora.

M hominis may be found in the respiratory specimens and spinal fluid of neonates. Although the clinical significance of such findings is often unclear, as spontaneous clinical recovery may occur without specific treatment, in premature infants, clinical manifestations of meningoencephalitis have been reported.

M hominis may play a role in some cases of pelvic inflammatory disease, usually in combination with other organisms. *M hominis* may be isolated from amniotic fluid of women with preterm labor, premature rupture of membranes, spontaneous term labor, or chorioamnionitis; there is evidence that it may be involved in postpartum fever or fever following abortion, usually as a complication of endometritis.

M hominis has rarely been associated with septic arthritis (including prosthetic joint infection), pyelonephritis, intraabdominal infection, wound infection, endocarditis, central nervous system infection (including meningoencephalitis, brain abscess, central nervous system shunt infection and subdural empyema), pneumonia, and infected pleural and pericardial effusions. Extragenital infection typically occurs in those with hypogammaglobulinemia or depressed cell-mediated immunity. In lung transplant recipients in particular, *M hominis* has been associated with pleuritis and mediastinitis. Recent evidence implicates donor transmission in some cases of *M hominis* infection in lung transplant recipients.

Reference Values

Not applicable

Interpretation

A positive PCR result for the presence of a specific sequence found within the *Mycoplasma hominis tuf* gene indicates the presence of *M hominis* DNA in the specimen.

A negative PCR result indicates the absence of detectable *M hominis* DNA in the specimen, but does not rule-out infection as false-negative results may occur due to inhibition of PCR, sequence variability underlying the primers and probes, or the presence of *M hominis* in quantities less than the limit of detection of the assay.

Cautions

Interfering substances may affect the accuracy of this assay; results should always be interpreted in conjunction with clinical and epidemiological findings

Since *Mycoplasma hominis* may be part of the normal flora, results should be interpreted accordingly.

This test does not detect other mycoplasmas or ureaplasmas (including *Mycoplasma pneumoniae*, a common cause of community acquired pneumonia)

This test is not intended for medicolegal use.

Supportive Data

Validation included spiking studies for *Mycoplasma hominis*. Spiking studies were carried out using 30 EDTA whole

blood and plasma samples spiked with genomic DNA for *M hominis* (as well as 10 unspiked specimens). Sensitivity and specificity was 100%.

Clinical Reference

1. Cunningham SA, Mandrekar JN, Rosenblatt JE, Patel R: Rapid PCR Detection of Mycoplasma hominis, Ureaplasma urealyticum, and Ureaplasma parvum. Int J Bacteriol. Vol 2013, Article ID 168742. Available at <http://dx.doi.org/10.1155/2013/168742>
2. Sampath R, Patel R, Cunningham SA, et al: Cardiothoracic Transplant Recipient Mycoplasma hominis: An Uncommon Infection with Probable Donor Transmission, EBioMedicine 2017 May;19:84-90
3. Waites KB, Taylor-Robinson D: *Mycoplasma* and *Ureaplasma*. In Manual of Clinical Microbiology. 11th edition. Edited by JH Jorgensen. ASM Press, Washington, DC, 2015, pp 1088-1105

Performance

Method Description

This PCR method employs a target-specific detection system including primers, as well as fluorescent resonance energy transfer (FRET) hybridization probes designed for the *tuf* gene of *Mycoplasma hominis*. The LightCycler instrument amplifies and monitors target nucleic acid sequences by fluorescence during PCR cycling. This is an automated PCR system that can rapidly detect amplified product development. The detection of amplified products is based on the FRET principle. For FRET product detection, a hybridization probe with a donor fluorophore, fluorescein, on the 3' end is excited by an external light source, which emits light that is absorbed by a second hybridization probe with an acceptor fluorophore, LC-Red 640, on the 5' end. The acceptor fluorophore then emits light of a different wavelength that is measured with a signal that is proportional to the amount of specific PCR product. The process is completed in a closed-tube system. (Cunningham SA, Mandrekar JN, Rosenblatt JE, Patel R: Rapid PCR Detection of Mycoplasma hominis, Ureaplasma urealyticum, and Ureaplasma parvum. Int J Bacteriol 2013 Jan 30 doi: 10.1155/2013/168742)

PDF Report

No

Day(s) and Time(s) Test Performed

Monday through Friday

Analytic Time

3 days

Maximum Laboratory Time

4 days

Specimen Retention Time

7 days

Performing Laboratory Location

Rochester

Fees and Codes

Fees

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- Authorized users can sign in to [Test Prices](#) for detailed fee information.
 - Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
 - Prospective clients should contact their Regional Manager. For assistance, contact [Customer Service](#).

Test Classification

This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. This test has not been cleared or approved by the U.S. Food and Drug Administration.

CPT Code Information

87798

LOINC® Information

Test ID	Test Order Name	Order LOINC Value
MHPRP	Mycoplasma hominis PCR, P	68546-1

Result ID	Test Result Name	Result LOINC Value
MPSRC	Specimen Source	31208-2
44134	Mycoplasma hominis PCR, P	68546-1