

Methodology and preliminary results of a systematic literature review of ante-mortem and post-mortem diagnostic tests for bovine tuberculosis

Sara H. Downs^a, Jessica E. Parry^a, Paul A. Upton^a, Jennifer M. Broughan^a, Anthony V. Goodchild^a, Javier Nuñez-Garcia^a, Matthias Greiner^b, Darrell A. Abernethy^{c,d}, Angus R. Cameron^e, Alasdair J. Cook^{a,f}, Ricardo de la Rúa-Domenech^g, Jane Gunn^a, Elizabeth Pritchard^a, Shelley Rhodes^a, Simon Rolfe^h, Michael Sharp^a, H. Martin Vordermeier^a, Eamon Watson^{a,i}, Michael Welsh^{j,k}, Adam O. Whelan^{a,l}, John A. Woolliams^m, Simon J. Moreⁿ, Richard S. Clifton-Hadley^a

^aAnimal and Plant Health Agency (APHA), Weybridge, Surrey KT15 3NB, United Kingdom

^bFederal Institute for Risk Assessment (BfR), D-10589 Berlin, and Veterinary University Hannover, Foundation, Germany

^cVeterinary Service, Department of Agriculture and Rural Development, Belfast BT4 3SB, United Kingdom

^dFaculty of Veterinary Science, University of Pretoria, South Africa

^eAusVet Animal Health Services Pty Ltd, PO Box 3180, South Brisbane, Qld 4101, Australia

^fDepartment of Veterinary Epidemiology, School of Veterinary Medicine, University of Surrey, GU2 7AL, United Kingdom

^gAdvice Services, APHA and Bovine Tuberculosis Programme, Department for Environment, Food and Rural Affairs, London SW1P 3JR, United Kingdom

^hOffice of the Chief Veterinary Officer, Welsh Government, Cardiff CF10 3NQ, United Kingdom

ⁱNational Milk Laboratories, Wiltshire SN15 1BN, United Kingdom

^jVeterinary Sciences Division, Agri-Food and Biosciences Institute (AFBI), Belfast BT4 3SD, United Kingdom

^kCSO SISAF Ltd, Northern Ireland Science Park, Unit 15A The Innovation Centre, Belfast BT3 9DT, United Kingdom

^lMicrobiology, Dstl, Porton Down, SP4 0JQ, United Kingdom

^mThe Roslin Institute, Roslin Biocentre, Roslin, Midlothian EH25 9PS, United Kingdom

ⁿCentre for Veterinary Epidemiology and Risk Analysis, UCD School of Veterinary Medicine, University College Dublin, Belfield, Dublin 4, Ireland

Corresponding author: Sara Downs

Email: sara.down@apha.gsi.gov.uk

Postal address:

Dr Sara Downs Animal and Plant Health Agency (APHA) Weybridge, Woodham Lane, New Haw, Addlestone, Surrey, KT15 3NB, United Kingdom.

Abstract

A systematic review was conducted to identify studies with data for statistical meta-analyses of sensitivity (Se) and specificity (Sp) of ante-mortem and post-mortem diagnostic tests for bovine tuberculosis (bTB) in cattle. Members of a working group (WG) developed and tested search criteria and developed a standardised two-stage review process, to identify primary studies with numerator and denominator data for test performance and an agreed range of covariate data. No limits were applied to year, language, region or type of test in initial searches of electronic databases. In stage 1, titles and available abstracts were reviewed. References that complied with stage 1 selection criteria were reviewed in entirety and agreed data were extracted from references that complied with stage 2 selection criteria. At stage 1, 9,782 references were reviewed and 261 (2.6%) passed through to stage 2 where 215 English language references were each randomly allocated to two of 18 WG reviewers and 46 references in other languages were allocated to native speakers. Agreement regarding eligibility between reviewers of the same reference at stage 2 was moderate (Kappa statistic=0.51) and a resolution procedure was conducted. Only 119 references (published 1934-2009) were identified with eligible performance estimates for one or more of 14 different diagnostic test types; despite a comprehensive search strategy and the global impact of bTB. Searches of electronic databases for diagnostic test performance data were found to be nonspecific with regard to identifying references with diagnostic test Se or Sp data. Guidelines for the content of abstracts to research papers reporting diagnostic test performance are presented. The results of meta-analyses of the sensitivity and specificity of the tests, and of an evaluation of the methodological quality of the source references, are presented in accompanying papers (Nuñez-Garcia et al., 2017; Downs et al., 2017).

Keywords: bovine tuberculosis; diagnostic tests; performance; sensitivity; specificity;
systematic review

Introduction

Virtually all mammals show susceptibility to infection with *Mycobacterium bovis* and bovine tuberculosis (bTB) is endemic in cattle in many parts of the world (O'Reilly and Daborn, 1995, FAO, 2012, OIE, 2012). Field surveillance for bTB in cattle relies on ante-mortem diagnostic tests that can detect subclinical infection (Monaghan et al., 1994, de la Rúa-Domenech et al., 2006, OIE, 2012, EEC, 1964). Tuberculin skin tests which include the Single Intradermal tuberculin (SIT) test, the Single Intradermal Comparative Cervical Tuberculin (SICCT) test and the Caudal Fold (CF) test based on purified protein derivative (PPD) from mycobacterial cultures are standalone ante-mortem tests for diagnosing bTB in cattle and designation of herds as officially bTB free (OFT). Post-mortem meat inspection for lesions characteristic of bTB at routine slaughter is mandatory for every bovine entering the human food chain in most countries. In the EU and elsewhere, post-mortem, culture and/or molecular methods are also used as confirmatory tests where *M. bovis* infection is suspected after a positive ante-mortem test result (de la Rúa-Domenech et al., 2006).

Tests vary in their ability to detect different components or phases of the immunological response in an infected animal and their sensitivity (Se), the probability of a positive test if an animal is truly infected, varies accordingly. Specificity (Sp), the probability of a negative test result if an animal is uninfected, also varies with test type. The accuracy (Se and Sp) of diagnostic tests has important implications for the design of bTB control and eradication strategies in cattle (Salman, 2003, pp. 59). However, a range of estimates for Se and Sp for bTB tests of the same type is reported in the veterinary literature. Test performance is influenced not only by specific test characteristics such as test antigen formulation, positive cut-off point but

also pathogenesis stage of infection in the host, differences in test conduct operators, prevalence of cross-reacting environmental mycobacteria and other factors (de la Rua-Domenech et al., 2006, Bezos, 2014, Clegg et al., 2015).

A systematic literature review attempts to bring together all work in a subject area and to provide an impartial, objective and accurate assessment of evidence. The methodology has been used extensively by Cochrane and others, in conjunction with statistical meta-analyses, to generate summary estimates for the efficacy of healthcare interventions (Bero et al., 1998, Sargeant et al., 2006, Liberati et al., 2009, Sargeant et al., 2010). There has been less work attempting to summarise estimates of the performance of diagnostic tests in domestic animals, although the methodology has been used to obtain pooled estimates of the performance of tests of pulmonary tuberculosis in humans (Steingart et al., 2007, Leeflang et al., 2008) and bTB in deer (EFSA, 2008). Our aim was to develop robust search methodology to identify primary research sources for estimates of Se and Sp of ante- and post-mortem diagnostic tests for bTB in cattle. These data were to be used in statistical meta-analyses to provide summary estimates of performance of different test types (Nuñez-Garcia et al., 2017).

Materials and methods

Working Group (WG) and overview

A standardised process of review was discussed, developed and agreed at WG meetings. A two-stage review of relevant literature was conducted. Stage 1 was conducted through reading the abstract of a reference or title if the abstract was

unavailable. Stage 2 was a more detailed review of entire references that had passed through stage 1 and it led to the extraction of numerator and denominator data for the calculation of Se and/or Sp and other data that the WG had identified as influential on test performance. The methodology was adapted from an approach taken previously in a review of the performance of diagnostic tests for bTB in deer (EFSA, 2008) and from guidelines for systematic review and meta-analyses (Irwig et al., 1994, Stroup et al., 2000, Bossuyt et al., 2004, Westwood et al., 2005).

The WG included 22 scientists. The expertise of the group can be broadly summarised as follows: 12 epidemiologists (10 of whom were also veterinarians), four immunologists specialising in the development of diagnostic tests, one pathologist (also a veterinarian), two bacteriologists, one bioinformatician, one livestock geneticist and one biologist who had specialised in the development of bTB databases for over 15 years.

Two linked, bespoke databases were developed for stages 1 and 2 (VLA 2010, Appendix 1). Communication between WG members was facilitated by a series of workshops, email and a web-based Sharepoint portal.

Stage 1 review

a. Overview

The stage 1 review was a review of titles and abstracts (where available) to identify references likely to be relevant for detailed (stage 2) consideration. Inclusion and

exclusion criteria were discussed and agreed at the first WG meeting (see a. below). A search strategy was developed that included testing different electronic search strings (see b. below).

b. Inclusion and exclusion criteria at stage 1

Inclusion criteria:

- The reference related to primary research (therefore excluding review papers)
- The reference included either report(s) of Se and/or Sp of a diagnostic test for bTB, or provided data enabling these statistics to be calculated
- The diagnostic test performance was measured on bovines

Exclusion criteria:

The Se estimates were from studies where cattle had been experimentally infected with *M. bovis*

c. Sources for references and search strategy

Sources for references included:

1. Electronic databases including:
 - Web of Knowledge (includes Web of Science 1995-, Current Contents 1998-, CAB Abstracts 1910-, Medline 1950-)
 - Dialog (includes Embase 1974-, Agricola 1970-, Agris 1975-)
2. Unpublished data (not in the public domain) that may not have undergone peer review and reports identified from research institutions and laboratories (grey literature). A list of research institutions, Government Departments, agencies and laboratories known to members of the working group and from searches on the World Wide Web was compiled and a member of the WG contacted

each by email asking for sight of reports and other references that reported the performance of diagnostic tests for bTB. VLA librarians attempted to obtain other grey literature that potentially contained performance data identified during the searches of electronic databases e.g. abstracts published in conference proceedings.

3. References known to WG members including an electronic database at the Animal and Plant Health Agency (APHA, previously the Veterinary Laboratories Agency, VLA) that listed references to bTB research
4. Bibliographies in the reports and references already retrieved

Different algorithms of search strings with variations of search terms for bovine tuberculosis and different names for diagnostic tests for bTB were tested in the electronic databases. No limits were placed in terms of diagnostic test type, year of publication or region. The different search strings were compared in terms of the i) their ability to maximise the proportion of a list of 65 references known to contain performance data they identified (sensitivity) and ii) the total number of references identified in the electronic databases.

d. Standardisation of the stage 1 review

Guidelines were developed to standardise the review of abstracts before the stage 1 review itself was conducted (VLA 2010, Appendix 2). To facilitate the development of the guidelines, five studies were conducted to assess repeatability between reviewers. In the first four of these studies, 100 abstracts were allocated to three or four reviewers. Agreement between reviewers was measured using a 2-way Anova model and intra-class correlation coefficients were calculated (Landis and Koch,

1977) and the guidelines were clarified after each study to attempt to improve repeatability. In the fifth study, 500 references were reviewed by the two WG members who were to conduct the stage 1 review of all references.

Stage 2 review

a. Overview

Entire references were obtained for those that passed through the stage 1 review. References written in English were randomly allocated to two WG members whilst references written in Spanish or German were only allocated to native speakers in the WG. Volunteer scientists at the APHA who were native speakers read references in languages other than English, Spanish or German. Relevant data were obtained from the volunteers during structured interviews with WG members.

Each reviewer was asked to evaluate each reference paper or report against agreed inclusion and exclusion criteria (see b. below). Reason(s) for rejection, if relevant, were recorded. Otherwise, data were entered into the stage 2 database according to a guide developed for data-entry (VLA 2010, Appendix 3). Data entered included information about the study population, test characteristics, characteristics of the reference standard and the numerator and denominator data required to estimate Se and/or Sp (VLA 2010, Appendix 1).

b. Inclusion and exclusion criteria at stage 2

Inclusion criteria for Se estimates:

- Se could be calculated

- The bovine population had been naturally exposed to bTB
- Each study animal had been individually examined using one of the following positive reference tests: post mortem examination (PM) (meat inspection or detailed laboratory inspection), culture, microscopic inspection (histology or histopathology), SICCT test

Exclusion criteria for Se estimates:

- The study population had been experimentally infected with *M. bovis*
- The definition of infected was based on a “group” level inference (such as a sample of animals in the study population being positive for culture of *M. bovis*) and there were no results from acceptable reference tests on each animal

Inclusion criteria for Sp estimates:

- Sp could be calculated
- There was good evidence that the bovine population was free from infection with, and exposure to, *M. bovis*, including herds with Officially Tuberculosis Free (OTF) status, herds from OTF area or OTF country, herds from a non-endemic bTB area where the authors stated that the area had been free of bTB for several years, or herds that in authors’ opinion were tuberculosis-free and had been free for several years

Exclusion criteria for Sp estimates:

- Any other evidence of lack of exposure to bTB, including groups of animals with negative tuberculin skin tests of all individual animals in an area where bTB was endemic or had existed in the recent past, negative culture in some animals from the herd in an area where bTB was endemic or had existed in the

recent past, negative PM in some animals from the herd in an area where bTB was endemic or had existed in the recent past, or herds of apparently healthy animals with no other evidence suggesting bTB freedom (VLA 2010, Appendix 5).

c. Resolution of differences after stage 2 review

The data from each reference that potentially contained eligible data were entered into the stage 2 database, by the reviewers using instructions for data-entry including screen shots of the database (VLA 2010, Appendix 3). Two WG members who had not conducted any stage 2 reviews compared data from references reviewed by two reviewers. Agreement between reviewers was measured at different levels of detail:

Level 1: Whether the reference was eligible based on Se and Sp inclusion and exclusion criteria

If both reviewers agreed that the reference was eligible, agreement at levels 2 and 3 was also measured:

Level 2: The number of Se and/or Sp estimates that could be extracted by test type.

Level 3: The Se and/or Sp numerator and denominator data for each test-type and of population.

Each reference that had been reviewed by two reviewers was then randomly assigned one lead reviewer from the pair. The lead reviewer led the resolution of inconsistencies during a WG meeting dedicated to this procedure, and through telephone and email correspondence; and returned a database with revised corrected data to APHA. Remaining disagreements between data in one or more descriptive

covariates were resolved by an APHA WG member by cross-checking related fields and otherwise accepting the data entered by the lead reviewer as the final response.

d. Latent class analysis (LCA)

The following criteria were applied to the primary studies identified in stage 2 to identify those where sensitivity and specificity could be estimated using LCA (Toft et al., 2005); which could include studies where a gold standard or reference test was included but nevertheless met the following criteria::

- a) Observed frequencies (counts) are reported for all possible combinations of positive or negative results for each (sub) population.
- b) Animals were sampled from (sub) populations, i.e. no pooled serum panels were used.
- c) Animals tested have not been pre-selected according to any diagnostic tests for for bTB; i.e. if any (sub) populations had been used for the calculation of test performance they were defined epidemiologically (e.g. observed or stipulated risk factors, epidemiologically distinct production units).
- d) It could be assumed that each animal tested in each of the (sub) populations had the same unknown, but non-zero, probability of being infected with *M. bovis* and the unknown infection prevalences varied among the (sub) populations.
- e) The tests were applied in parallel; i.e. all test were applied to all animals and the decision to conduct a second or third test was independent on any other test results.
- f) The simplifying assumption was justified that the sensitivity and specificity of each tests was the same in all (sub) populations within a study;

- g) It was justified to consider that the diagnostic tests used on all animals in the study were conditionally independent; i.e. the application of or result from one test was not associated with application or result from another test in the study and false positive and false negative errors were uncorrelated (Gardner et al., 2010).

e. Assessment of study quality

The WG decided that a review of the methodological quality of studies of diagnostic tests should be also conducted. As a result of this discussion, the QUADAS instrument developed by Whiting and others (Whiting et al., 2003) for assessing quality of studies of diagnostic test performance was modified for a veterinary context (VLA 2010, Appendix 4) and was incorporated into the stage 2 database. The assessment of the methodological quality of references is reported elsewhere (Downs et al., 2017).

Statistical analyses

Summary distributions of data were examined using Microsoft Excel 2011.

Calculation of the intra-class correlation coefficient using a 2-way Anova model was conducted using Stata release 12.1 (StataCorp) and interpreted according to Landis and Koch, 1977, where values <0 indicate no agreement, values 0-0.20 as slight, 0.21-40 as fair, 0.41-0.60 as moderate, 0.61-0.80 as substantial and 0.81-1.0 as almost perfect.

Results

Stage 1 review

a. Search strings

The number of references identified in electronic databases using the search strings tested ranged from 5,354 to 11,772. The search string eventually used to select references to be reviewed at stage 1 (see below) identified 62/65 of the test references. Of the three test references of the 65 not identified by the search, two were publications from the grey literature which were not indexed on any of the databases searched through Web of Knowledge and Dialog and could only be retrieved from the Defra website (Vordermeier and Ewer, 2006, Veterinary Laboratories Agency, 2006). The other reference was a Norwegian paper published in 1949 (Holth, 1949) which described a diagnostic test no longer used that was classed as ineligible for inclusion in the systematic review by the WG (SE3238 Annex 1 Ineligible Test).

The final search string run on 1st December 2008 (with no date or language limitations) was:

(bovine tuberc* or mycobacterium bovis*) or ((mycobact* not (paratub* or johne*))

AND

(bovin* or cattle or cow or cows or calf or calves or buffa*)

AND

(test* or screen* or diagn* or eia or elisa or pcr or polym* chain react* or lympho* or interferon or skin or rapid or detect* or peptid* or cervical or caudal or sicct or antibody* or necroscopy or necropsy or survei* or sensitivi* or specifici* or perform* or eval* or valid* or accura* or confirmatory)

*indicates truncation or stemming. This technique was used to broaden the search to include various word endings to the root of the word.

The number of references identified by applying the above search string to the Web of Knowledge and associated electronic databases was 8,089. Adding additional references identified using the same search string through searching Dialog increased this total to 9,756. Hand searching, referrals from the WG and external research institutions resulted in a total on the stage 1 database of 9,782. Duplicates were removed at intervals as the database was compiled.

b. Review of abstracts and selection of references at stage 1

b i) Results of study to standardise stage 1 review

Agreement between reviewers ranged between poor and almost perfect with no discernible trend in improvement in level of agreement after each study despite revision of guidelines for reviewing abstracts (Table 1). In the fifth study reviewer A selected twice the number of abstracts as reviewer C. However, agreement was classified as moderate (Landis and Koch, 1977) because all but one (14/15) abstracts selected by reviewer C were also selected by reviewer A. The data suggested that the total number of abstracts classed as complying with Stage 1 inclusion and exclusion criteria increased with the number of reviewers reviewing abstracts, but there was a threshold over which the number of reviewers did not increase the number of abstracts identified as complying with inclusion and exclusion criteria e.g. there was no

Table 1

Agreement between reviewers that abstracts passed stage 1 eligibility criteria

Study	Abstracts reviewed ^a	Abstracts that passed stage 1 Reviewer				Intraclass correlation coefficient	Agreement classification ^b
		A	B	C	D		
1	98	5	6	7	^d	0.59 ^c	Moderate
2	99	3	2	3	3	0.29 ^c	Poor
3	100	9	7	6	10	0.84	Almost perfect
4	100	5	3	4	2	0.46	Moderate
5	500	34	^d	15	^d	0.55	Moderate

Footnote to Table 1:

^a Randomly selected from electronic searches^b (Landis and Koch, 1977)^c Up to 2 abstracts of the 100 allocated were omitted by one reviewer in study^d Indicates that the reviewer did not participate in this study

Table 2

Cumulative totals of abstracts that were passed in development of stage 1 selection criteria

Study	Abstracts ^a that passed stage 1 by reviewer			
	A	A+B	A+B+C	A+B+C+D
1	5	8	10	^b
2	3	5	7	7
3	9	9	10	10
4	5	7	8	8
5	34	^b	35	^b

Footnote to Table 2

^a Randomly selected from electronic searches. A, B, C and D are the four different reviewers that tested stage 1 selection criteria

^b No review conducted

increase in the number of abstracts identified by three compared to four reviewers (Table 2). As a result of these studies it was agreed by the WG group that:

- i) All abstracts to references identified through electronic searches were to be reviewed by two WG members
- ii) Any references identified by either reviewer through review of the abstract as possibly containing information on test performance be passed for detailed review at stage 2.

b ii) Review of stage 1 database of references

The procedure followed is shown in Figure 1. Of the 9,782 references identified from all sources, over 90% had an abstract available. Of the references identified by the electronic searches approximately 80% were from journals or books, and 20% were grey literature (10% reports and 10% other). Over 97% of references reviewed by both reviewers were initially excluded by one or other reviewer, as unlikely to comply with our selection criteria, and only 3% were classified by one or both reviewers as likely to contain eligible data. The reasons for exclusion were re-examined and further review of the abstracts (and titles if no abstract was available) conducted to attempt to ensure that references likely to have eligible test performance data had not been excluded in error.

During the stage 1 review, 87% (8541/9782) of references were excluded by both reviewers as being the wrong subject material; 7% (717/9782) of references were initially excluded because an abstract was not available and there was insufficient information in the title with which to determine eligibility and 3% (257/9782) of references were excluded on the basis that it was unlikely that the reference would

Abstract or title or entire references n = 9782^a

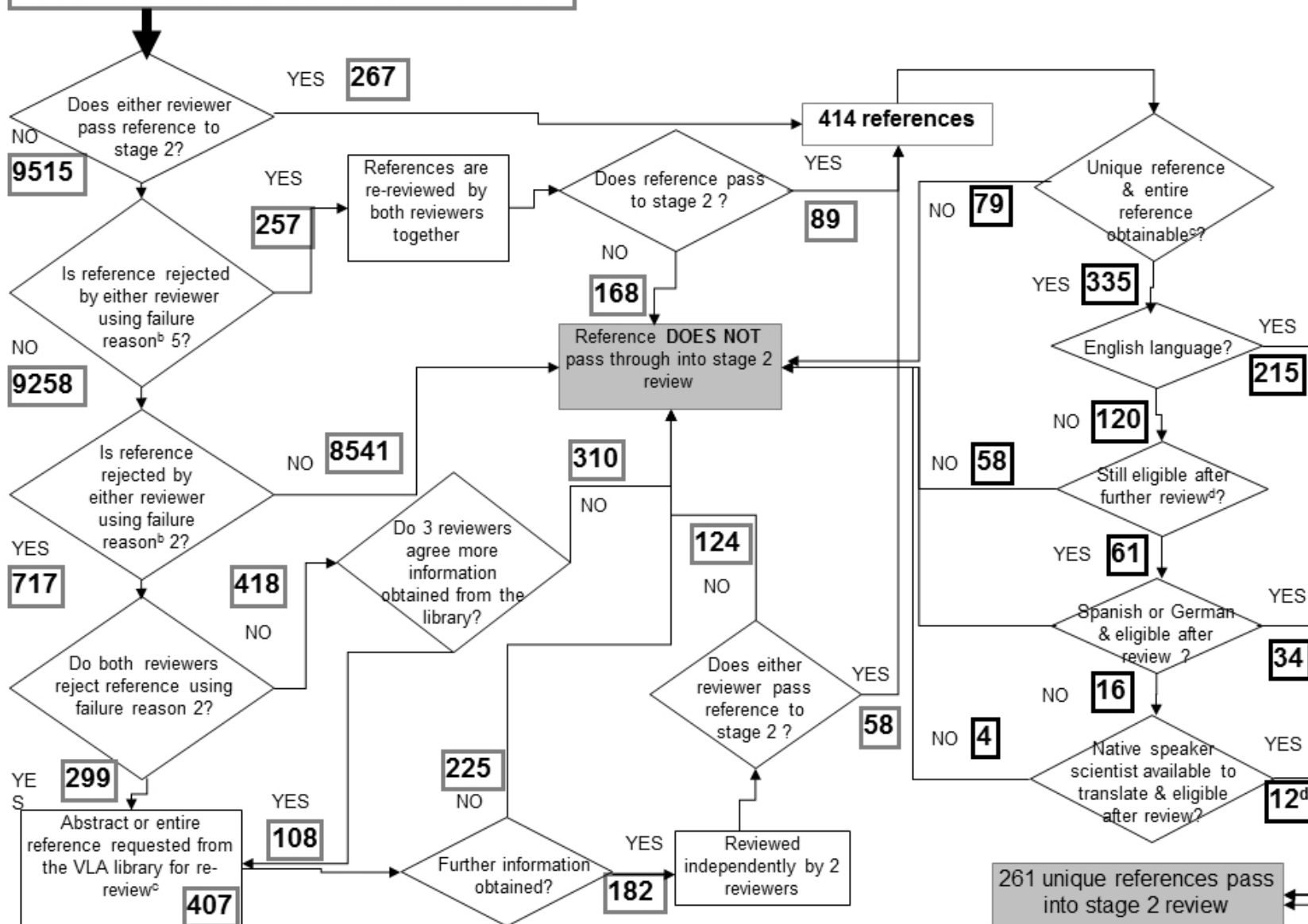


Fig. 1. Decision tree showing how references with eligible data were selected during the systematic review

Footnote to Fig. 1.

^a Identified through searches of electronic bibliographies and other sources

^b Failure reasons 1: Does not contain performance information for diagnostic test for bTB in bovines (wrong subject material) 2. Insufficient information in record 3: Surveillance or prevalence report 4: Review not primary study 5: Not possible to calculate either Se or Sp

^c By APHA library using reasonable means, cost and effort

^d By three WG members in the light of stage 2 exclusion criteria

^e French, Chinese, Polish, Dutch and Italian references reviewed by APHA scientific staff

contain enough data to calculate test performance (e.g. prevalence or surveillance study or review). Reasonable attempts were made to obtain entire references where there was no abstract and only a title available and both reviewers considered that there was insufficient information to judge eligibility (407 references).

Of the references that appeared to have eligible data after stage 1 (Figure 1), 37% (153/414) were excluded for the following reasons: around 11% because they were duplicates, 12% based on further consideration of exclusion criteria by other WG members, 9% because the reference could not be obtained through reasonable means, and 4% because a native speaker to review the reference could not be found.

Stage 2 review

a. Results of review

There were 261 references that passed into stage 2, of which 5% (12/261) were from unpublished sources (grey literature). The remaining 249 references were published in peer reviewed scientific press. Of references that passed through to stage 2, 215 English language references were each randomly allocated to two of the 18 reviewers within the WG. Sixteen and 18 references respectively were reviewed by two Spanish native speakers and one German native speaker in the WG. A further 12 references (six Chinese, two Italian, two Dutch, one French and one Polish) were reviewed by native speakers among APHA veterinarians and scientists. Sixty-one % (160/261) of references were initially classed as having eligible Se and/or Sp data by at least one WG reviewer. Of the references reviewed by two WG reviewers, 71% (173/241) were initially classed by both reviewers as containing eligible Se and/or Sp data (Table 3).

Table 3

Results of stage 2 review of references by pairs of reviewers

Stage 2 phase	Number of references ^a
Reviewed by two ^b WG members	241
Both WG reviewers considered that a reference should be included or excluded based on eligibility criteria	173 (71% ^c)
One WG reviewer classed reference as having eligible data but other did not	68 (28%)
Sensitivity and/or specificity data considered eligible following resolution procedure	119 (49%)

Footnote to Table 3:

^a15 foreign language references were reviewed by one reviewer. Of these three references were classified by the reviewer as containing eligible test performance data

^bReferences reviewed by two of 18 reviewers randomly allocated to English language references and otherwise assigned to native speakers.

^c Kappa statistic=0.512 (moderate agreement)

During the review process a reference reviewed by two reviewers might be included by one and excluded by other. However after the resolution process a reference would either be included or excluded.

Following the resolution process 45% (119/261) of references were identified as having eligible Se and/or Sp data and 5.9% (7/119) were from grey literature. Of the 119 references, 100 were written in English, 9 in Spanish, four in German and the remainder in Chinese, Dutch, French, Italian, Portuguese or Polish. Twenty-five % (30/119) of the references contained eligible data for Se and Sp, 61% (73/119) for Se only and 6% (16/261) for Sp only. Some references contained more than one performance estimate for the same test, for different types of tests or test modifications. Over 10% of references measuring Se and Sp of the IFN- γ blood test using Bovine PPD - Avian PPD diagnostic antigen had more than 7 and 19 estimates respectively.

b. References with eligible estimates of Se and/or Sp

Table 4 shows the number of references with eligible estimates for Se and/or Sp by test type. Individual references could contain one or more estimates for one or more test types. The WG identified 14 different diagnostic test types in total. Lists of the references with eligible performance data for each test type and plots showing the estimates for sensitivity and specificity by reference and test type are in the supplementary material.

The tuberculin skin tests and the IFN- γ and ELISA blood tests included modifications of the basic test format. The Se and Sp of the SICCT test were measured at different cut-off values for a positive response (standard and severe interpretation). An even wider range of cut-off values and algorithms was used to define a positive response in the references reporting the performance of blood tests e.g IFN- γ and ELISA blood

Table 4 Distribution of references^a with eligible estimates of Sensitivity and Specificity by year of publication

Test Name	Sensitivity		Specificity		Percentage of references by year of publication									
	References	Estimates	References	Estimates	1931-69		1970-79		1980-89		1990-99		2000-10	
	n	n	n	n	Se	Sp	Se	Sp	Se	Sp	Se	Sp	Se	Sp
Single intradermal skin test	8	18	4	10	50.0	25.0	25.0	0.0	0.0	0.0	12.5	0.0	12.5	75.0
SICCT test	15	46	8	18	13.3	0.0	20.0	12.5	13.3	0.0	20.0	37.5	33.3	50.0
Caudal fold skin test	17	75	2	3	11.8	0.0	23.5	50.0	11.8	0.0	35.3	50.0	17.7	0.0
IFN- γ blood tests	27	172	19	145	0.0	0.0	0.0	0.0	0.0	0.0	40.7	26.3	59.3	73.7
ELISA	23	62	12	27	0.0	0.0	0.0	0.0	26.1	25.0	47.8	50.0	26.1	25.0
Rapid test	0	0	2	3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Latex bead agglutination assay	2	3	1	1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	100.0
Multiplex immunoassay	1	5	1	4	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0.0	100.0	0.0
Glutaraldehyde Fluorescence polarization assay	1	1	0	0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0
Necropsy ^b	8	14	1	3	0.0	0.0	12.5	0.0	25.0	10.0	0.0	0.0	62.5	0.0
Microscopic examination	13	21	1	1	15.4	100.0	15.4	0.0	15.4	0.0	7.7	0.0	46.2	0.0
Culture	8	16	1	1	0.0	0.0	25.0	0.0	37.5	0.0	0.0	0.0	37.5	100.0
PCR	12	25	4	5	0.0	0.0	0.0	0.0	0.0	0.0	25.0	50.0	75.0	50.0

Footnote to Table 4:

^a All references are listed in the online supplement.

single intradermal comparative cervical tuberculin skin (SICCT) test

^b Includes meat inspection and detailed/laboratory based examination

^c Includes histopathology

tests. Additionally the blood tests varied by diagnostic antigen composition. Around 6%, 43%, 6% and 4% of IFN- γ test performance estimates were based on the Bovine PPD, Bovine PPD-Avian PPD, ESAT6/CFP10 and MPB70 diagnostic antigens respectively, with the remainder a heterogeneous collection. All the skin tests in the review were based on response i.e. change in skin thickness to a intradermal injection of Bovine PPD (the SIT test and CF test) or Bovine PPD minus Avian PPD (the SICCT test).

The choice of the positive reference standard and the level of evidence that a population was free from *M. bovis* infection (the negative reference standard) varied (Figures 2 and 3). Sp was measured in Officially Tuberculosis Free populations in 20, 31.8, 21.4, 33.3 and 100% of percent of references respectively reporting performance of the SIT test, IFN- γ blood test, ELISA blood test, Rapid blood test and LLBA . Although all estimates of Sp were from bTB-free populations, many studies used negative test results from the SICCT test and post-mortem tests as additional criteria for freedom (results not shown). A positive SICCT test result was used as a cattle selection criterion in 33.3, 26.1, 33.3, 21.5, 25.0 and 16.7% of studies measuring Se of the IFN- γ blood test, ELISA blood test, necropsy, microscopic examination, culture of *M. bovis* and PCR respectively and therefore could be considered as part of the reference standard in these studies.

Many factors, known or suspected by the WG as influencing test performance were not reported or not reported in a consistent manner. Ninety percent of the studies did not indicate cattle breed or production class. Sixty percent of references about the IFN- γ blood test did not indicate whether a tuberculin skin test had been conducted

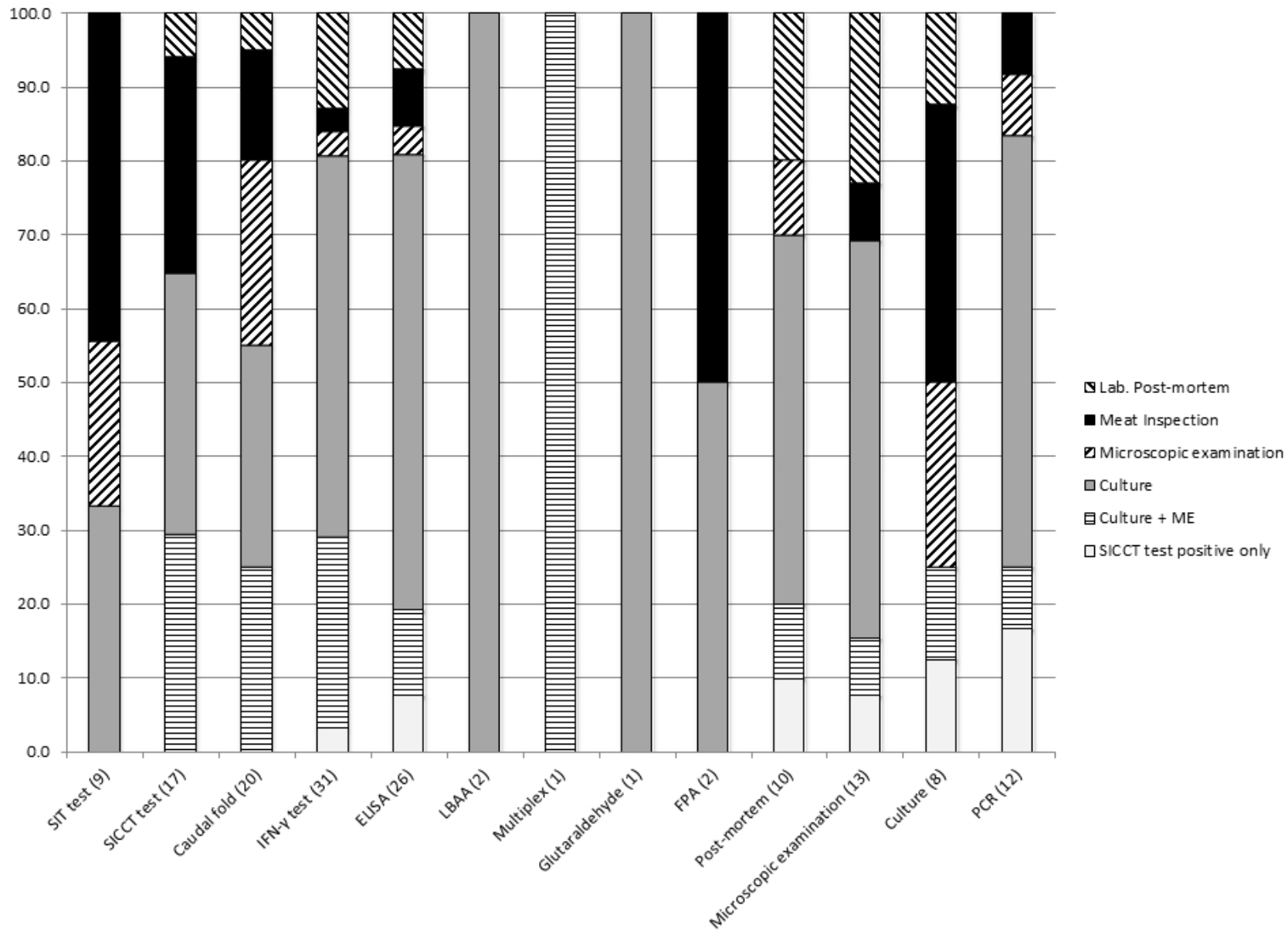


Fig. 2. Distribution of positive reference standards across references with sensitivity estimates

Footnote to Fig. 2.

The number in brackets indicates the denominator, which is the number of reference standards used in references that report Se of the test. This is sometimes larger than the number of references with at least one Se estimates of test because some references reported Se against more than one reference standard.

Lab. Post-mortem = detailed or laboratory based necropsy as opposed to meat Inspection

ME=Microscopic examination such as histopathology

SICCT test= Single Intradermal Comparative Cervical Tuberculin test where the change in skin fold thickness in response to Bovine PPD- response to Avian PPD > 4mm for a positive test

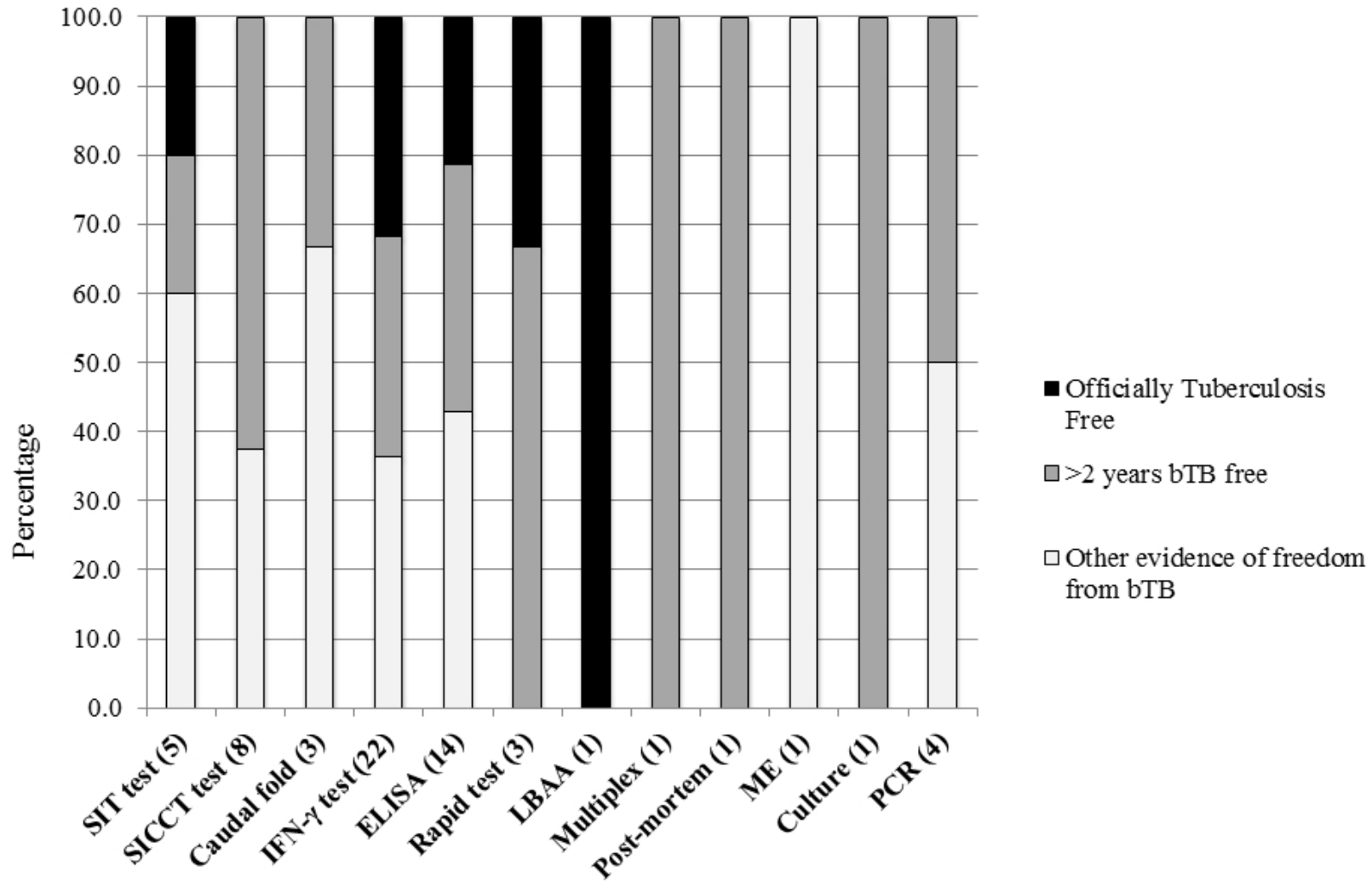


Fig. 3. Distribution of levels of evidence that the study population was bovine tuberculosis free across references with specificity estimates

Footnote to Fig. 3.

The number in brackets indicates the denominator, which is the number of reference standards used in references that report Sp of the test. This is sometimes larger than the number of references with at least one Sp estimates of test because some references reported Sp for more than one population and for different levels of evidence that the populations were bovine tuberculosis (bTB) free

LBAA=Latex bead agglutination assay

ME=Microscopic examination such as histopathology

SICCT test= Single Intradermal Comparative Cervical Tuberculin test where the change in skin fold thickness in response to Bovine PPD- response to Avian PPD > 4mm for a positive test

beforehand. It was not possible to compare bTB prevalence in the Se studies because the scales on which change was measured varied and could not be standardised in a meaningful way.

Study populations where Se was estimated were in general smaller than those estimating Sp. The median number of cattle designated truly positive was 46 (Inter Quartile Range (IQR) 22 to 212) in the Se studies compared with a median of 200 cattle (IQR 25 to 904) designated as truly negative in the Sp studies. Overall, crude Se estimates extracted from the references ranged from 0 to 100% (median 79.3, IQR 57.5 to 91.3) and for Sp ranged from 24.1 to 100% (median 97.0, IQR 90.9 to 100). Summary estimates of Se and Sp by test type calculated through statistical meta-analysis are reported in the accompanying paper (Nuñez-Garcia et al., 2017).

c. Studies with suitable data for Latent Class Analysis

There were 66 references identified by at least one reviewer during the stage 2 review as reporting a study with results of two or more diagnostic tests for cattle sampled from one or more populations. Detailed review by a WG member determined that only six references met all LCA inclusion criteria. The remaining 60 failed inclusion criterion a) and three also failed inclusion criterion c). Bayesian latent class models were fitted to the results of the six studies that met inclusion criteria (Claxton et al., 1979, Wood et al., 1991, Wood et al., 1992, Gaborick et al., 1996, Liebana et al., 2008, Mumtaz et al., 2008). The inclusion of test performance estimates from the LCA, were explored in a meta-analysis reported in Nuñez-Garcia et al 2017).

Discussion

In a systematic review of scientific literature to identify primary studies from which the Se and Sp of diagnostic tests for bTB in cattle could be calculated, 14 different types of contemporary tests were distinguished (Table 4). Only 1% of references identified in the initial search of electronic databases contained eligible performance data despite attempts to improve the accuracy of electronic searches and reviewer agreement. There were relatively few estimates for most test types including the performance of the tuberculin skin tests, which are official tests for measuring bTB incidence worldwide. Reference standards against which performance was estimated varied between studies (Figures 2 and 3), including those of the same test type, and the information provided about other factors known to influence test performance was inconsistent. There was no common scale over which performance of blood tests measuring immunological parameters could be compared. Furthermore, cut-off values to define a positive response to tests often varied between studies.

We set out to design a comprehensive search for published and unpublished studies reporting test performance. Publication bias leading to over-representation of reports of statistically significant findings is well known (Saveleva and Selinski, 2008). With diagnostic tests, there may be a publication bias towards reporting studies with better estimates of test performance (Deeks et al., 2005). In an attempt to reduce publication bias, at stage 1, both published and unpublished literature was obtained and references were not excluded on the basis of test type, date of research and region. We tried to improve the specificity of our search string for the electronic databases, but could not improve it substantially without omitting references that contained eligible data and over 9,000 abstracts were reviewed. Others have also reported difficulty in designing

searches in electronic databases for studies reporting diagnostic test performance that are specific without compromising sensitivity (Leeftang et al., 2008).

Fewer than 300 references from the 9,782 reviewed at stage 1 passed through to stage 2. Stage 1 reviewers excluded 85% of references on the basis of ‘wrong subject material’ reflecting both inadequate reporting in abstracts and poor specificity of search terms. Inadequate reporting in abstracts of diagnostic accuracy studies has been documented elsewhere (Korevaar et al., 2015). Checklists for the information that should be reported both in reference papers and abstracts have been developed, the most well-known being STARD (Standards for Reporting Diagnostic Accuracy) (Bossuyt et al., 2004; Vandembroucke et al., 2007; Bossuyt et al., 2015). Our study also suggests that the efficacy of electronic searches for diagnostic test performance would be improved by requiring abstracts to comply with minimum reporting criteria. One problem is that the words ‘Se’ and ‘Sp’ are used in a variety of contexts and their use is not limited to their technical meaning within the diagnostic test context. Inclusion of the words “denominator” and “numerator” with the associated raw data in abstracts and coupled with Se and Sp as index terms could be explored as an avenue to improve the accuracy of searches (Table 5).

Levels of agreement between reviewers as low as 20% have been reported in systematic reviews, signifying that relying on one reviewer to determine eligibility may lead to substantial misclassification (Chalmers, 1991). At stage 2 in the current project, over 80% of references were randomly allocated to two reviewers who reviewed entire references independently using a standardised procedure before comparing assessments. Agreement regarding whether a reference should be included

Table 5

Proposal for minimum content required of abstracts reporting results from studies measuring the Sensitivity and Specificity of performance of diagnostic tests in cattle

1	Usual name of index diagnostic test/s and active diagnostic reagent
2	Usual name of test to be used as a reference standard (if relevant)
3	Cattle breed and/or production type
4	Estimate of background disease prevalence as a percentage of cattle population (for SE study) , or evidence of freedom from disease (Sp study)
5	Sampling method of cattle population (census, random, purposive/haphazard/convenience)
6	Numerator – being the number of cattle that test positive (Se study) or the number of animals that test negative (Sp study)
7	Denominator - being the number of cattle positive or negative based on the reference standard (if relevant)
8	Definition for cut-off value/s for a positive response

or excluded was moderate (Landis and Koch, 1977) and the resolution procedure led to almost 40% of references that were initially classified by at least one reviewer as having performance data, being excluded. Discussion within the WG about the possible paucity of studies with eligible data may have predisposed reviewers to initially retain studies if compliance with eligibility criteria was ambiguous, thereby delaying exclusion of such studies until after discussion with fellow reviewers.

Dynamic biological processes such as disease pathogenesis (affecting Se) and interference by colonisation by environmental mycobacteria (affecting Sp) are difficult to measure and control for when evaluating test performance. Other factors such as time interval between tests, diagnostic reagent, animal breed, etc. may be more easily measured. We tried to capture as much information as possible about factors that could explain heterogeneity in estimates of test performance and could be controlled for in a multivariable statistical analysis. Many factors known or suspected by the WG as influencing test performance were not reported or not reported consistently however, limiting exploration or adjustment for influential co-factors (Nuñez-García et al., 2017). Selection criteria for studies from which Sp could be calculated included a requirement that the Sp was estimated in a population sample where there was good evidence that the population was bTB free, since the parameter relies on comparing the number of cattle that were negative to the diagnostic test under evaluation to the number of truly negative cattle. This is likely to have improved the internal validity of our Sp estimates. However, it also means that test Sp may be over-estimated (and less externally valid) for populations infected with bTB since the estimates will not take account of the higher risk of false positives in an infected population. Ideally test performance is evaluated in a population as similar as

possible to the population in which the test is eventually to be used (Berkvens et al., 2006). Furthermore, the majority of references for the IFN- γ and ELISA blood tests reported more than one performance estimate, each relating to a different cut-off value for a positive response. The algorithms used to define a positive test result varied between studies and were often based on different scales, hindering comparative assessment of performance and control in combined analyses.

Differences in choice of reference standard and associated accuracy may bias between test comparisons (Lijmer et al., 1999). Culture and microscopic examination were the most common reference standards for Se estimates. Both are likely to have high specificity because the endpoints are isolation of the bacteria or confirmation through histopathology (Liebana et al., 2008). Both however are conditional on the performance of post-mortem examination which is likely to negatively bias Se. Meat inspection is likely to have lower Se than laboratory based necropsy because it relies on existence of macroscopic lesions that can be observed through visual inspection, palpation and incision of organs and may also have less than perfect Sp because of the misclassification of the cause of the lesion (Corner et al., 1990, Liebana et al., 2008). The least common reference standard in eligible papers was the SICCT test (Figure 2). The SICCT test (at standard interpretation) is reported to have very high specificity, higher than the other tuberculin tests, because attempts to exclude immunological responses caused by exposure to environmental mycobacteria by measuring the response to *M. avium* as well as *M. bovis* (de la Rua-Domenech et al., 2006, Goodchild et al., 2015). However, the SICCT test is likely to classify a different spectrum of animals as infected than post-mortem tests because it measures

immunological changes early in pathogenesis whereas most other reference standards detect later stage pathology (Pollock et al., 2005).

Despite the comprehensive search strategy, only 119 references were identified with eligible estimates for one of 14 different diagnostic test types between 1934 and 2009 (see supplementary material). The number of references varied widely, from one each for the Multiplex Immunoassay and Glutaraldehyde tests, 15 for the SICCT test and 27 for the IFN- γ blood test. This is relatively few given that the methodological quality of the studies may vary (see Downs et al., 2017) and other factors may affect the accuracy of reported estimates. Changes in the molecular evolution of *M. bovis* have been recorded and subtle changes in test format over time may have affected performance and encouraged selection for particular strains of *M. bovis* that can evade detection (Smith et al., 2006). The move from using PPD (tuberculin) based on *M. tuberculosis* to PPD produced from *M. bovis* strain AN5 in the 1970s (Lesslie et al., 1975) and changes in the companies that supply tuberculin may have led to differences in test performance (Downs et al., 2013, Tameni et al., 1998).

Since the conduct of this systematic review and early 2016, Se and Sp have been estimated for the SICCT test in three studies: Karolemeas et al., 2012 (Se), EFSA, 2012 (Se and Sp), Goodchild et al., 2015 (Sp). The Se and Sp of the SIT test was assessed by Casal et al., 2014 (Se) and EFSA, 2012 (Se and Sp) (see Nuñez-García et al., 2017, for further discussion). There have been no new studies measuring the performance of the CF test, although a meta-analysis has been published (Farnham et al., 2012).

In conclusion, in a comprehensive and systematic search of the literature spanning almost 80 years there were comparatively few references providing estimates of the performance of diagnostic tests for bTB in cattle despite the global importance of the disease. The systematic literature review also showed that there is substantial scope for improvement in search methodology and technology for the detection of veterinary studies of the performance of diagnostic tests and that standardised reporting of diagnostic test performance is urgently needed.

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Authors’ contributions

All authors contributed to the design of the systematic review, and the identification of variables for which data should be extracted prior to the conduct of the review. PU with input from JP and SD designed and created the bespoke databases stages 1 and 2 for data entry. Protocol documents were developed by JP, PU and SD with input from the rest of the WG. EP, JP and SD designed the search string for electronic databases and tested it. EP obtained references through APHA library and SD contacted research institutions for unpublished work. SD, JP, TG, JB, and RCH developed the methodology and guidelines for stage 1 review of abstracts. SD and JP reviewed the abstracts at stage 1. DA, JB, AC, RdIR, AG, JG, JNG, S.R, MS, MV, EW, MW AW, JW, SM, SD and RCH conducted stage 2 reviews of references. JP and PU compared agreement between authors at stage 2 and designed and conducted the resolution

procedure to obtain agreed estimates of performance. SD cleaned the covariate data. JNG plotted the unadjusted estimates of Se and Sp by reference and country. SD drafted the first version of the manuscript circulated to the WG. All authors contributed to the discussion of results, read, commented on and approved the final manuscript. SD was project leader.

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Additional Material

The supplementary material lists all the references with eligible estimates of Se and/or Sp identified in the systematic review and displays the distribution of estimates used in the meta-analysis of test performance (Nuñez-Garcia et al, 2017).

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SICCT test with IFN- γ blood test

Aranaz, A., De Juan, L., Bezos, J., Alvarez, J., Romero, B., Lozano, F., Paramio, J.L., Lopez-Sanchez, J., Mateos, A., Dominguez, L., 2006. Assessment of Diagnostic

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SIT with IFN- γ blood test

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Caudal fold with IFN- γ blood test

Ryan, T.J., de Lisle, G.W., Wood, P.R., 1991. The performance of the skin and gamma interferon tests for the diagnosis of tuberculosis infection in cattle in New Zealand. Massey University Continuing Education, 143-150. Unpublished.

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Caudal fold with SICCT test

Norby, B., Bartlett, P.C., Fitzgerald, S.D., Granger, L.M., Bruning-Fann, C.S., Whipple, D.L., Payeur, J.B., 2004. The sensitivity of gross necropsy, caudal fold and comparative cervical tests for the diagnosis of bovine tuberculosis. *J. Vet. Diagn. Invest.* 16, 126-131.

Culture with microscopic examination

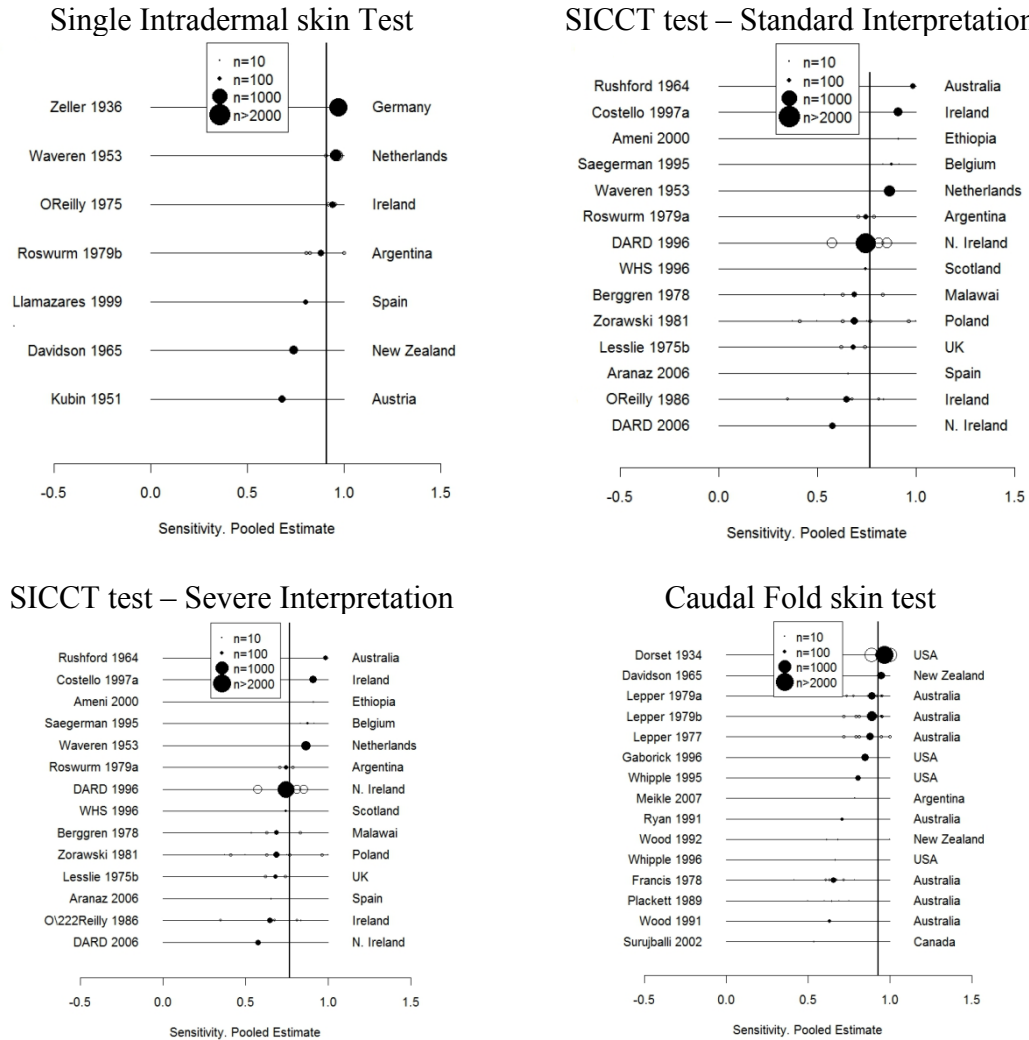
Liebana, E., Johnson, L., Gough, J., Durr, P., Jahans, K., Clifton-Hadley, R., Spencer, Y., Hewinson, R.G., Downs, S.H., 2008. Pathology of Naturally Occurring Bovine Tuberculosis in England and Wales. *Vet. J.* 176, 354-360.

Multiple IFN- γ blood tests

Buddle, B.M., de Lisle, G.W., Ryan, T.J., 2005. Optimisation and definition of the criteria of using a *Mycobacterium bovis*-specific ancillary serial test for the diagnosis of bovine tuberculosis in cattle. Wallaceville Animal Research Centre & New Zealand Food Safety Authority. 1-17. Final Report to Animal Health Board. Unpublished.

Plots of crude pooled estimates¹ of diagnostic test performance by reference and country that formed data in statistical meta-analyses of test performance², that were extracted from references identified in the systematic review.

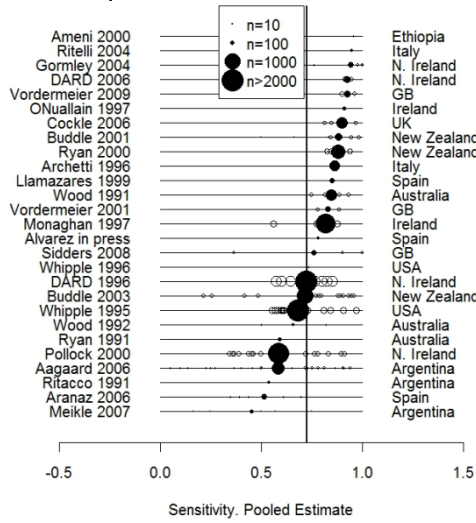
1. Sensitivity estimates



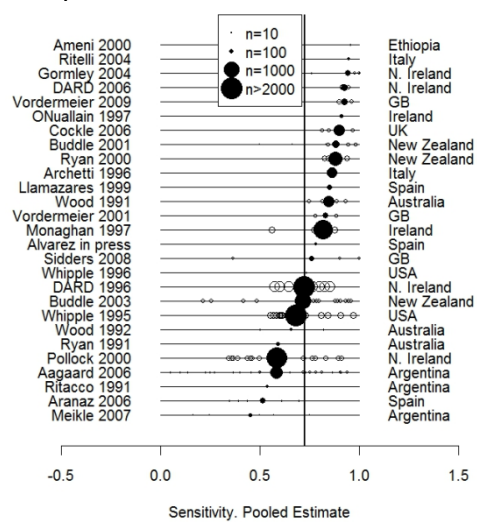
¹ Plots created using R software: <https://www.r-project.org/>. Size of bubbles is indicative of population size.

² Nuñez-García, J., Downs, S.H., Parry, J.E., Abernethy, D.A., Broughan, J.M., Cameron, A.R., Cook, A.J., de la Rua-Domenech, R., Goodchild, A.V., Gunn, J., More, S.J., Rhodes, S., Rolfe, S., Sharp, M., Upton, P.A., Vordermeier, H.M., Watson, E., Welsh, M., Whelan, A.O., Woolliams, J.A., Clifton-Hadley, R.S., Greiner, M., 2017. Meta-analysis of the sensitivity and specificity of a range of ante-mortem and post-mortem diagnostic tests for bovine tuberculosis in the UK and Ireland, *Prev. Vet. Med.* doi: 10.1016/j.prevetmed.2017.02.017.

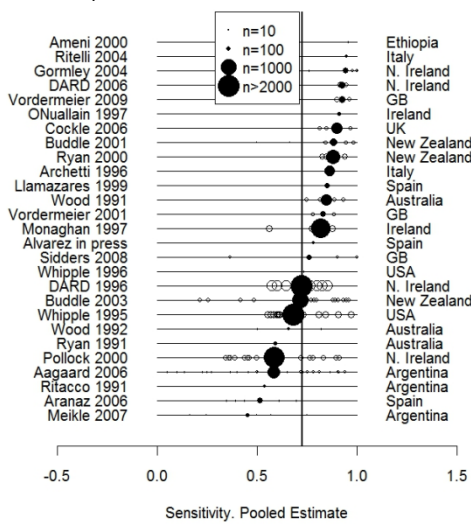
IFN- γ blood test – Bovine PPD



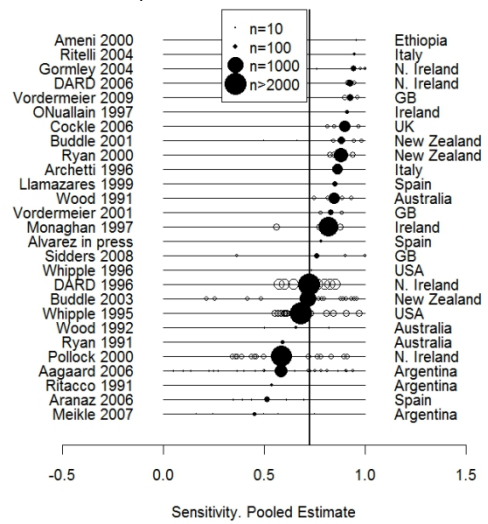
IFN- γ blood test – Bovine-Avian PPD



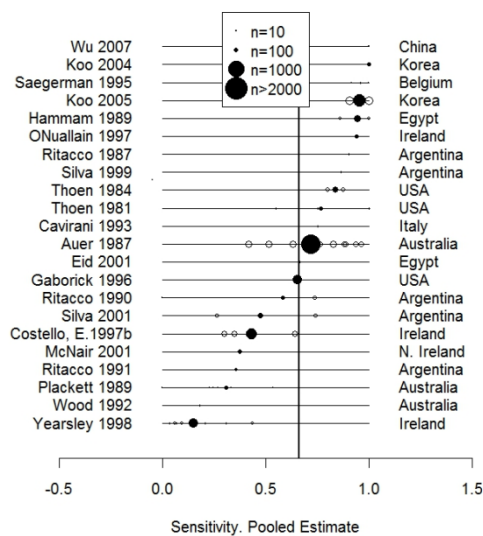
IFN- γ blood test – ESAT6/CFP10



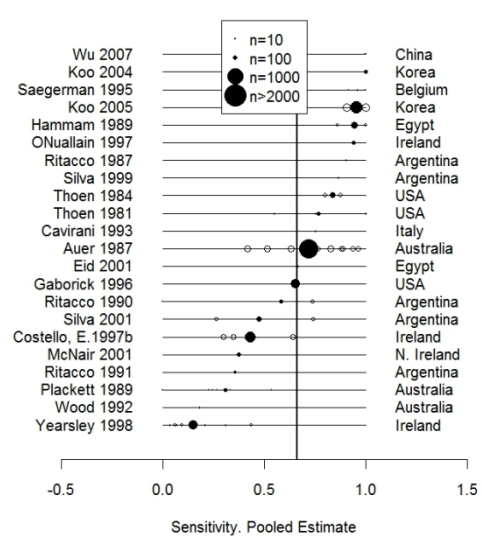
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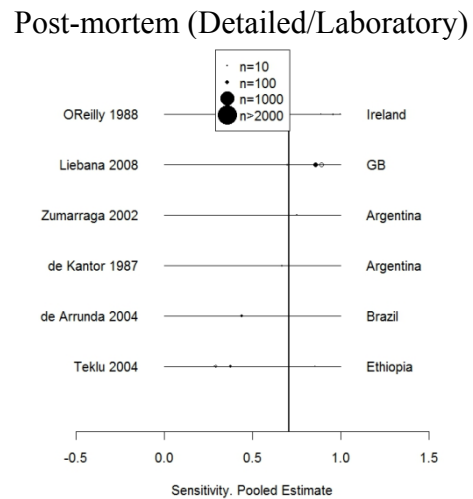
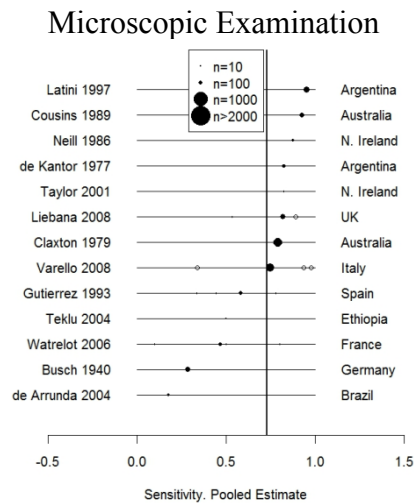
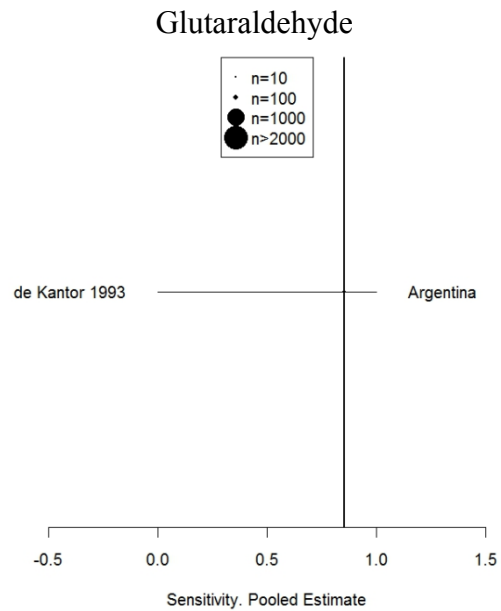
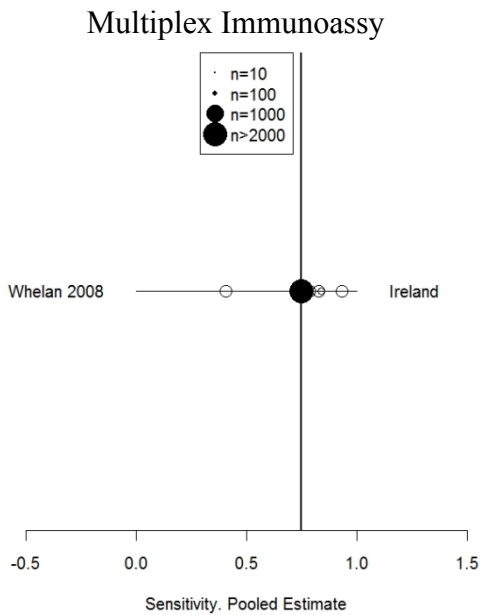
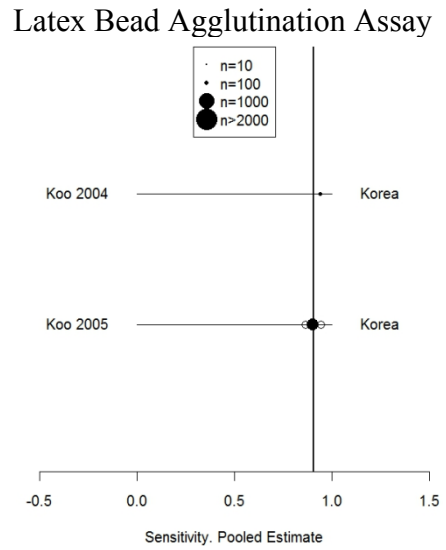
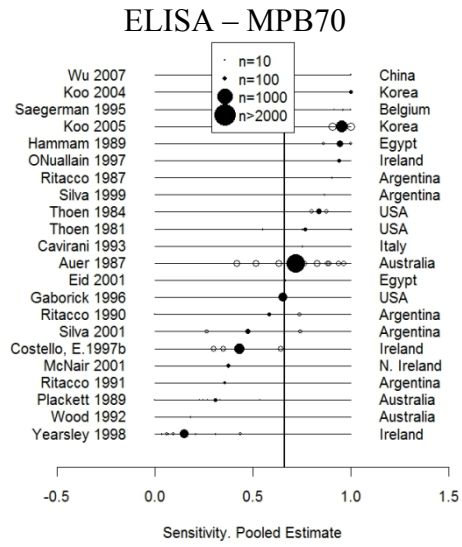


ELISA – Bovine PPD

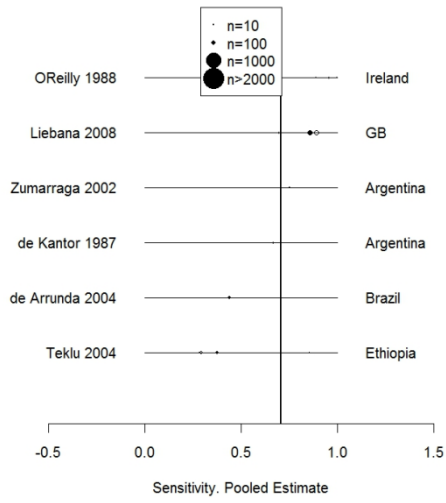


ELISA – Bovine PPD -Avian PPD

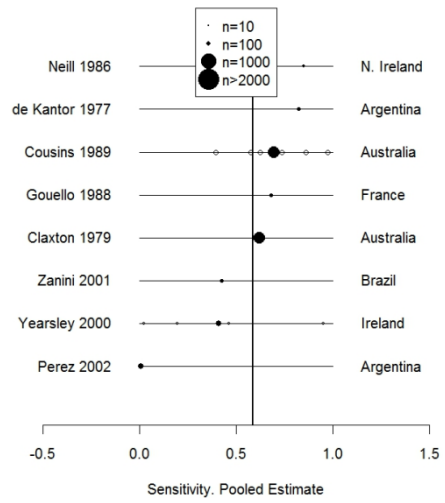




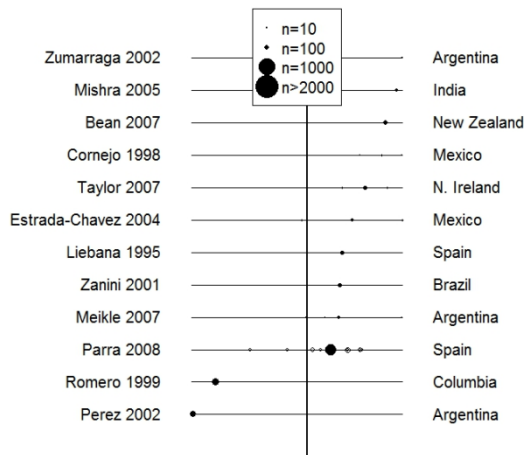
Post-mortem (Meat Inspection)



Culture

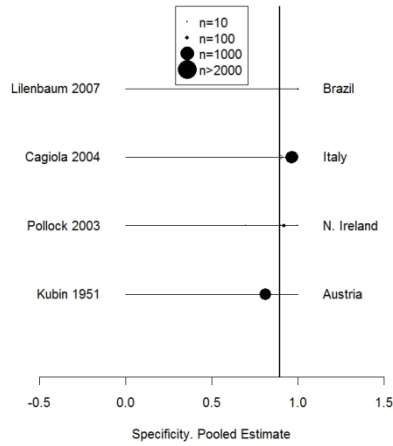


PCR

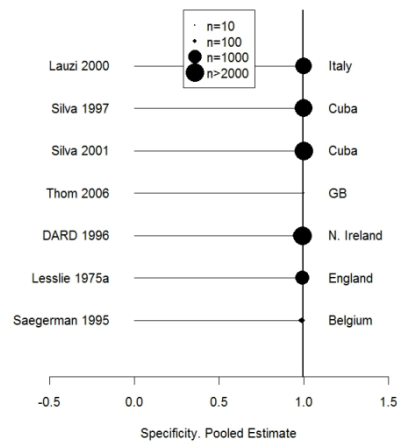


2. Specificity estimates

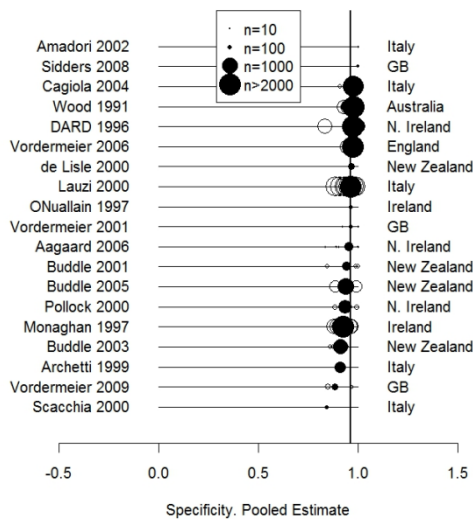
Single Intradermal Skin test



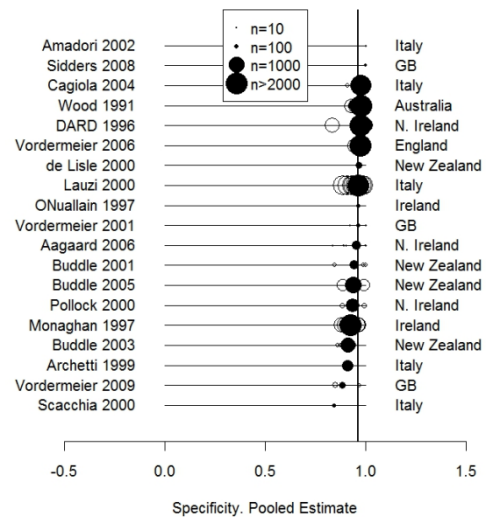
SICCT test – Standard Interpretation



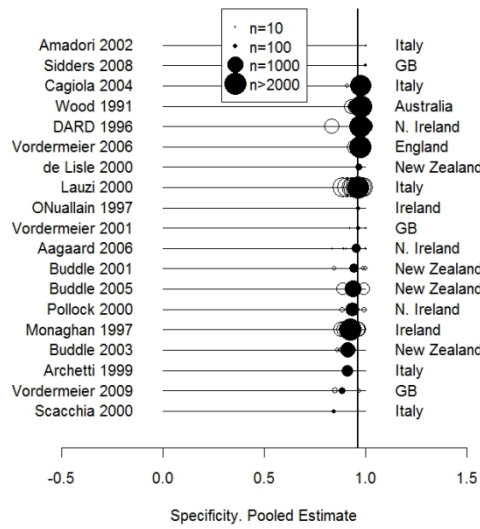
IFN- γ blood test – Bovine PPD



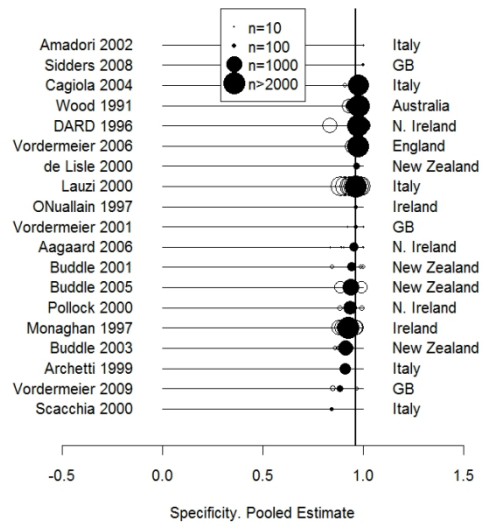
IFN- γ blood test – Bovine PPD - Avian PPD



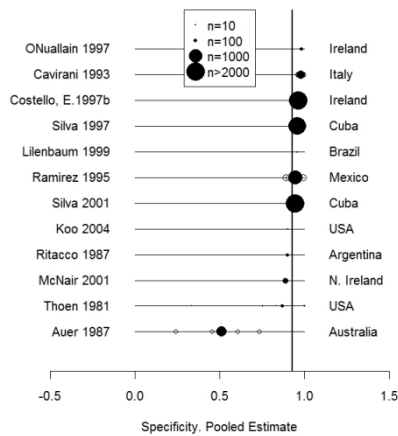
IFN- γ blood test – ESAT6/CFP10



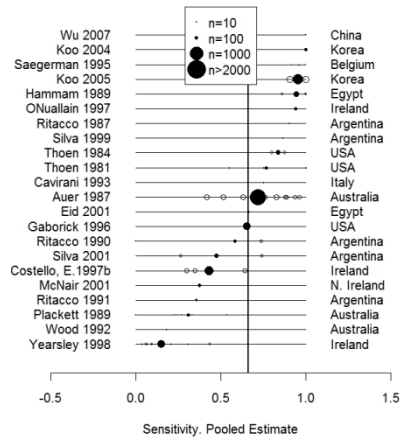
IFN- γ blood test – MPB70



ELISA – Bovine PPD

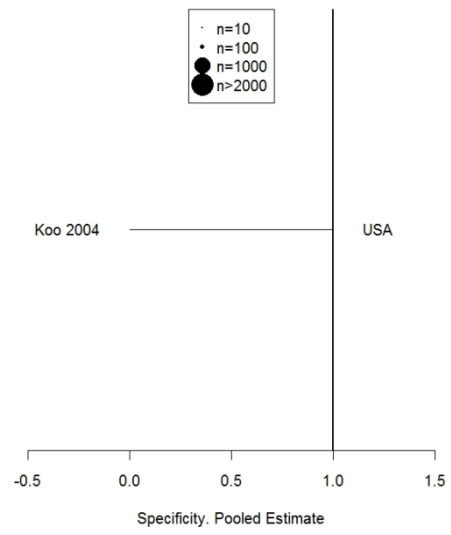
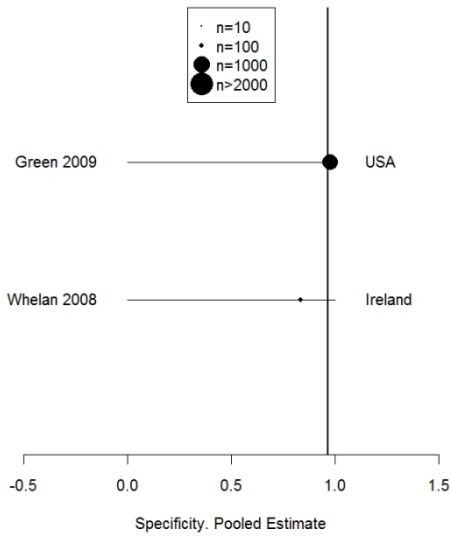


ELISA – Bovine-Avian PPD

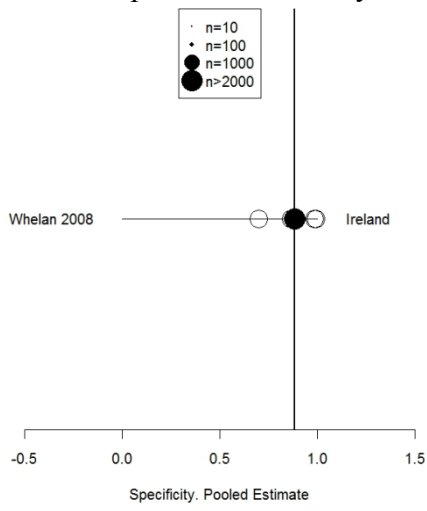


Rapid test

Latex Bead Agglutination Assay



Multiplex Immunoassay



Post-mortem

