

ProMedica Laboratories moving to 2-Step *C. difficile* Algorithm Positive

Notification Date: 12/15/2025

Additional notification will occur in the next few weeks with a go-live date of this reflex test change.

Overview

The clinical microbiology laboratory is implementing a two-step testing algorithm for *Clostridioides difficile* (*C. diff*). This approach provides more information by detecting both the gene of toxigenic *C. diff* (PCR) and the presence or absence of toxin produced by *C. diff*. (EIA).

Testing Workflow

- **Step 1: *C. diff* PCR**
 - Detects the **toxin gene (tcdB)**
 - Indicates the organism is present and capable of producing toxin.
- **Step 2: *C. diff* Toxin Test (Performed ONLY if PCR is positive)**
 - Detects **free toxin** in stool being produced by *C. diff*.

Both results are reported together when PCR is positive.

Result Interpretation

PCR Positive / Toxin Positive

- **What this means:**
 - Toxin gene present AND toxin detected (indicates *active toxin production*).
 - Patients have higher likelihood of severe disease and recurrence.
- **Clinical Action:**
 - High likelihood of true CDI.
 - Note – High levels of toxin can be seen in asymptomatically colonized patients as well.
 - Treat based on clinical presentation and severity.

PCR Positive / Toxin Negative

- **What this means:**
 - Toxin gene present, but toxin not detected.
 - Represents either:
 - Colonization,
 - Toxin degradation in transport
 - Early or low-level toxin production, or
 - Intermittent toxin expression.

- **Important Note:**
 - A negative toxin result does NOT rule out *C. difficile* infection.
 - Clinical presentation should determine if patients have true CDI.
 - PCR +/-toxin - CDI cases have similar rates of CDI complications (except severe CDI and recurrence rates) to PCR+/toxin+ patients.
- **Clinical Action:**
 - Evaluate symptoms, stool frequency, leukocytosis, creatinine, and risk factors.
 - Treat ONLY if clinical picture supports CDI.
 - Avoid treating asymptomatic colonization.

PCR Negative

- **What this means:**
 - No toxin gene detected.
 - CDI is unlikely.
- **Clinical Action:**
 - Seek alternative causes for diarrhea.
 - Repeat testing is **not recommended** unless new, high-risk symptoms develop.

Key Clinical Considerations

- Test only **unformed stool** from symptomatic patients (≥ 3 loose stools in 24 hours).
- **Do not test for cure**; PCR can remain positive for weeks.
- Avoid testing patients on laxatives.
- Do not test patients under the age of one (per IDSA guidelines).
- Consider infection prevention measures for PCR-positive patients per facility policy.

Reference:

Tansarli GS, Falagas ME, Fang FC. 2025. Clinical significance of toxin EIA positivity in patients with suspected *Clostridioides difficile* infection: systematic review and meta-analysis. J Clin Microbiol 63: e00977-24. <https://doi.org/10.1128/jcm.00977-24>