



Review of MetaPanel™

MetaPanel™: A diagnostic metagenomic gastrointestinal pathogen assay detecting pathogens and antimicrobial resistance genes in patients with chronic gastrointestinal symptoms

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Gastrointestinal (GI) infection is routinely diagnosed by culture, PCR or a combination of both. However, the diagnosis is limited to pathogens that are targets in the multiplex PCR assay or detected on routine culture media. Up to 47% of patients presenting to general practitioners (GPs) with GI complaints remained unresolved.¹ In March 2024, MetaPanel™, a comprehensive, shotgun metagenomic next-generation sequencing assay, was introduced through Sonic Healthcare Australia Pathology laboratories. This assay has evolved from an initial proof of concept,² and now reports 115 DNA pathogens, including bacteria and selected bacterial virulence factors, protozoa, helminths, viruses, fungi and microsporidia, in addition to 60 antimicrobial resistance (AMR) gene families and a research-use-only dysbiosis measure, incorporating diversity and richness scores.

Table 1. A sample from the MetaPanel target list

Bacteria			
<i>Aeromonas</i> spp. (4 species)	<i>Clostridium perfringens</i> , toxigenic	<i>Klebsiella pneumoniae</i> , hypervirulent	<i>Staphylococcus aureus</i> , toxigenic
<i>Arcobacter</i> spp. (2 species)	<i>Edwardsiella tarda</i>	<i>Listeria monocytogenes</i>	<i>Treponema pallidum</i>
<i>Campylobacter</i> spp. (6 species)	<i>Escherichia</i> spp. (2 species)	<i>Neisseria gonorrhoeae</i>	<i>Tropheryma whippelii</i>
<i>Chlamydia trachomatis</i>	<i>Grimontia hollisae</i>	<i>Plesiomonas shigelloides</i>	<i>Vibrio</i> spp. (6 species)
<i>Clostridioides difficile</i> , toxigenic	<i>Helicobacter</i> spp. (5 species)	<i>Salmonella</i> spp. (2 species)	<i>Yersinia</i> spp. (2 species)
Virulence factors			
Cholera toxin	<i>Clostridium perfringens</i> enterotoxin	EPEC virulence factor (<i>E. coli</i>)	Listeriolysin O
<i>Clostridium difficile</i> binary toxin positive	EAEC virulence factor (<i>E. coli</i>)	ETEC heat-labile toxin (<i>E. coli</i>)	<i>Staphylococcus enterotoxin A-H</i>
<i>Clostridium difficile</i> toxin A &/or B	EHEC O157:H7 virulence factor	ETEC heat-stable toxin (<i>E. coli</i>)	<i>Staphylococcus leukocidin ED</i>
	EIEC invasion plasmid antigen	STEC shiga toxin (<i>E. coli</i>)	<i>Yersinia stable toxin</i>
		<i>Klebsiella</i> mucoid regulator	
Viruses			
<i>Adenovirus</i> spp. (7 species)	Cytomegalovirus (CMV)	<i>Herpes simplex virus</i> (2 species)	
Parasites/Protozoa			
<i>Cryptosporidium</i> spp. (6 species)	<i>Cyclospora cayentanensis</i>	<i>Entamoeba</i> spp. (2 species)	<i>Giardia intestinalis</i>
Parasites/Helminths			
<i>Ancylostoma duodenale</i>	<i>Dipylidium caninum</i>	<i>Hymenolepis</i> spp. (2 species)	<i>Strongyloides stercoralis</i>
<i>Ascaris lumbricoides</i>	<i>Enterobius vermicularis</i>	<i>Necator americanus</i>	<i>Taenia</i> spp. (2 species)
<i>Clonorchis sinensis</i>	<i>Fasciola hepatica</i>	<i>Opisthorchis</i> spp. (2 species)	<i>Trichuris trichiura</i>
<i>Dibothriocephalus latius</i>	<i>Fasciolopsis buski</i>	<i>Schistosoma</i> spp. (2 species)	
Fungi/Microsporidia			
<i>Anncalia algerae</i>	<i>Encephalitozoon</i> spp. (3 species)	<i>Enterocytozoon bienersi</i>	<i>Histoplasma capsula</i>
<i>Candida auris</i>			

Methods

A review of the first 725 MetaPanel samples was undertaken, focusing on type of referrer, patient demographics, detected pathogens, detected AMR genes, and proportion with low diversity and richness (defined as falling in the lowest decile of a healthy cohort). Putative pathogens were considered those with some evidence of an organism being present and included indeterminate results (with genomic reads just below the confident), with the exception of indeterminate *Campylobacter concisus*, *Aeromonas* and *Salmonella* species based on validation studies.

Results

- Demographics:** 56% female; average age 48 years (range 1-97; 7.7% <18 years)
- Referrer type:** of the 438 individual referrers:
 - 72% GPs, 12.9% integrated health practitioners who together referred 60.7% of patients
 - 16% gastroenterologists who referred 27% of patients
 - 12% other specialists, including infectious diseases (ID) physicians (n=7)
 - >1 sample referred by 125 clinicians (28.5%) with median of 3 samples (2-20)
 - 71.3% had clinical history available and all confirmed symptomatic

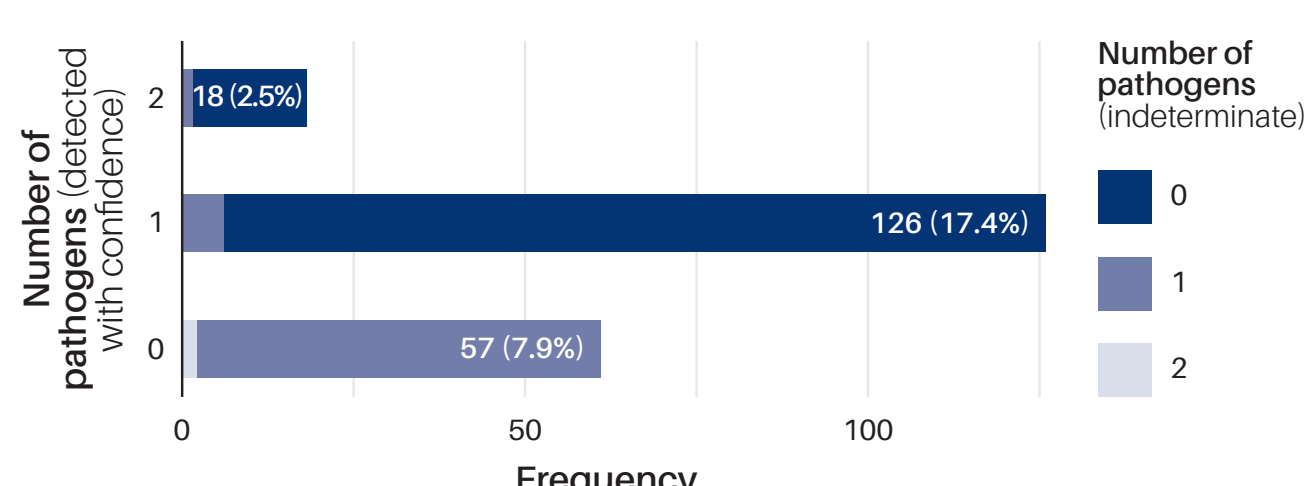


Figure 1. Number of pathogens per test (detected and indeterminate)

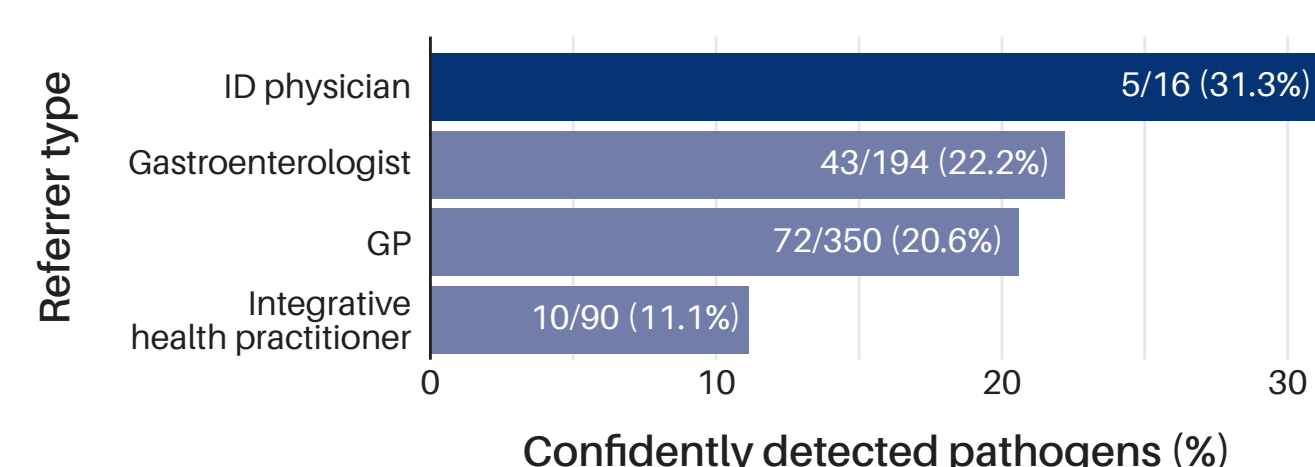


Figure 2. Number of confidently detected pathogens by referrer type

Detected pathogens:

- 34 unique pathogens identified in 201 patients (27.7%; 144 (19.9%) confident, 57 (7.9%) indeterminate), with 18 patients having 2 pathogens (Figure 1)
- ID physician referrals had a higher percent positivity of confidently detected pathogens than GPs and gastroenterologists (Figure 2)
- Most common pathogens were *Campylobacter concisus* (n=56), enteropathogenic *E. coli* (EPEC) (17), toxigenic *Clostridium perfringens* (14) and *Tropheryma whippelii* (14)
- Worms were detected in 5 patients: *Enterobius vermicularis* (4), *Schistosoma mansoni* (1) (Figure 3)
- 23/34 (67.6%) of the detected pathogens would not likely be detected using standard testing algorithms

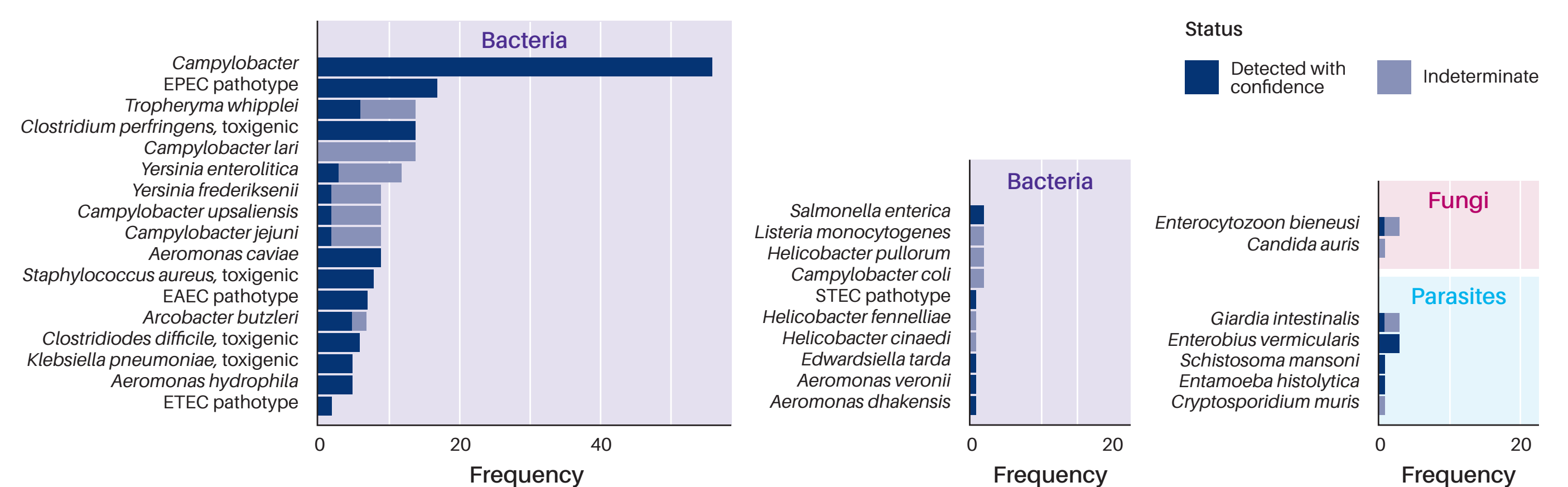


Figure 3. Pathogen frequency (detected and indeterminate)

AMR gene detection:

- 26 unique AMR genes were detected in 185 patients (25.5%) (Figure 4)
- 61/149 (40.9%) of ESBL, AmpC and qnr genes were not detected with their known hosts suggesting they were plasmid mediated

Microbial diversity and richness:

- 73.6% of samples were classified as being of low diversity and/or richness supportive of underlying dysbiosis (Figure 5)

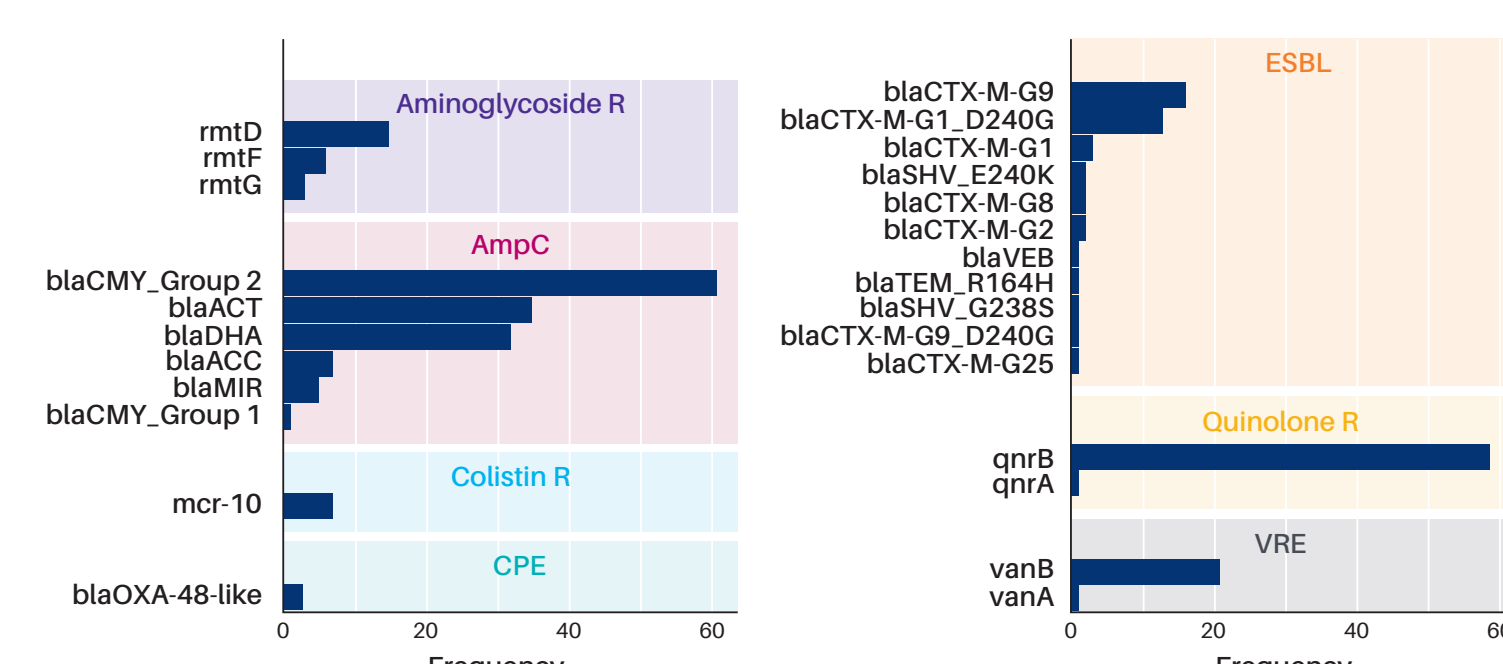


Figure 4. AMR frequency (detected)

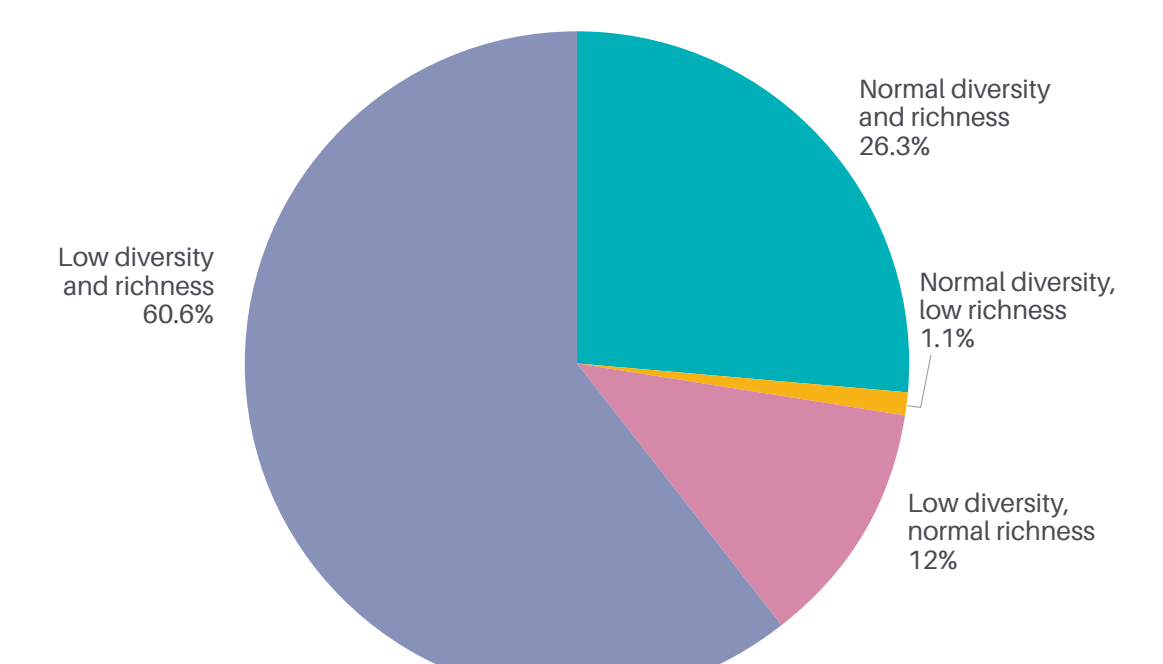
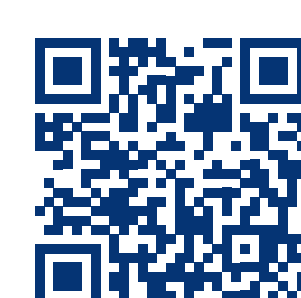


Figure 5. Diversity and richness

Conclusion

Early results support the utility of a faecal metagenomics assay (MetaPanel™) in diagnosing difficult-to-detect GI pathogens and carriage of relevant AMR genes. Further studies are underway to investigate the impact of MetaPanel on patient management and clinical outcomes.



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References

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 - Angel NZ, et al. Metagenomics: a new frontier for routine pathology testing of gastrointestinal pathogens. *Gut Pathog*. 2025 Jan 18;17(1):4. PMID: 39827146
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