

[FDA permits emergency use of rapid Ebola test co-developed by Tulane University](#)

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Tulane University researchers played a key role in developing a new rapid Ebola test, which the Food and Drug Administration [authorized](#) yesterday for emergency use in West Africa.

Instead of taking days for lab results, [the new test](#), which is produced by Corgenix Medical Corp., uses a drop of blood from a finger prick to deliver a diagnosis in as little as 15 minutes, allowing public health workers to isolate and treat patients immediately. Getting a fast, accurate diagnosis is crucial in stopping the spread of the virus as initial symptoms of Ebola mimic other common infectious diseases.

“This has the potential to be a game-changer,” said Robert Garry, professor of microbiology and immunology at Tulane University School of Medicine. “Medical personnel will be able to quickly identify hotspots and potentially prevent a resurgence of new cases. Proper deployment of the test can ensure that future Ebola outbreaks are contained before they reach the scale of the current outbreak in West Africa.”

Denver-based Corgenix will manufacture and market the test, which is based on technology originally discovered at Tulane.

“The rapid Ebola test is the result of more than a decade of work led by Dr. Garry who assembled a team of collaborators of tremendous breadth and depth to understand and combat viral hemorrhagic fevers in Africa,” said Dr. Laura Levy, Tulane vice president for research. “This diagnostic promises to transform the public health response to Ebola out in the field where it is needed most. This technology illustrates Tulane's long-standing commitment to bring cutting-edge research to solve the world's most urgent problems.”

With funding from the National Institutes of Health, Corgenix developed the test in cooperation with the [Viral Hemorrhagic Fever Consortium](#), a collaboration of academic and industry members led by Tulane. Partners included Autoimmune Technologies LLC, Zalgen Labs LLC, The Scripps Research Institute and the University of Texas Medical Branch at Galveston, as well as other collaborators in West Africa.