



INTERVENTIONAL LOLLI STUDY FAQs

WHICH TEST IS CARRIED OUT?

An RT-PCR (reverse transcriptase polymerase chain reaction) test is performed in the laboratory. This test detects the genetic material (RNA) of the virus.

WILL MY CHILD'S DNA BE STORED?

No. Only the RNA of the virus is kept as part of a reserve sample in order to perform sequencing if necessary.

ARE FALSE POSITIVE+ TEST RESULTS POSSIBLE?

False positive results are extremely rare but not impossible. PCR has a specificity of almost 100%. However, false positive results can arise, for example, due to contamination of the sample.

CAN FALSE NEGATIVE- TEST RESULTS OCCUR?

Infections with a very low viral load may not be detected. Very low viral loads are also associated with low infectivity at the time of specimen collection.

DOES THE LOLLI METHOD WORK RELIABLY?

Yes. The Lolli-Method was developed and validated at the Institute of Virology, University Hospital Cologne. From a viral load of 1000 copies/ml in the nasopharyngeal swab, the Lolli method can detect SARS-CoV-2 infections with a sensitivity of 95%.

WHY IS A SALIVA TEST DONE AND NOT A THROAT OR NOSE SWAB?

The saliva test is pleasant to perform and ensures high acceptance among participating students. In addition, other tests may not be possible in young children.

WHAT PERCENTAGE IS THE SENSITIVITY OF THE SALIVA TEST?

This depends on the viral load under consideration. Validation has shown that above a viral load of 1000 copies/ml there is a sensitivity of 95%. Samples above a viral load of 10⁶ copies/ml were detected 100% in a study with 120 infected individuals.

DOES POOL TESTING WORK RELIABLY?

Yes. PCR pool tests performed work very well. Since the swabs are pooled in a pre-set volume of liquid, the dilution effect is low even with large pool sizes.

CAN MY CHILD HAVE BREAKFAST BEFORE TAKING THE SAMPLE?

We recommend making sure that at least 30 minutes pass between taking food or drink or cleaning the teeth and taking a saliva sample.

CAN THE TEST PROGRAM PREVENT INFECTIONS?

Regular testing does not guarantee that infections will not occur. However, it can help to detect infections at an early stage. Appropriate measures can then be taken to prevent further spread of infection.

CAN IT HAPPEN THAT MY CHILD HAS TO BE QUARANTINED EVEN THOUGH ANOTHER CHILD FROM THE DAYCARE CENTER IS INFECTED?

Yes, this can happen. The respective health department is responsible for quarantine regulations. Quarantine always serves to protect other, healthy people and is never imposed without reason.



CAN THE EDUCATORS ALSO BE TESTED?

Yes, it has proven practicable for the educators of a school group to add their swab to the group pool. In addition, there is an inter-group pool for each School (e.g. for the School staff).

WHY ARE ALL CHILDREN AND EDUCATIONAL PROFESSIONALS TESTED AND NOT JUST THE SUSPECTED CASES?

Asymptomatic courses of SARS-CoV-2 infection occur particularly in children and adolescents. These would be overlooked if only "suspected cases" were tested.

IS SAMPLING DANGEROUS?

We do not expect any complications to arise during specimen collection. However, specimen collection may only take place under supervision and the swabs should be held by the supervising persons during licking to prevent swallowing.