

**To:** (10)(2e) (10)(2e) @rivm.nl]  
**From:** (10)(2e)  
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**France:**

<https://sante.journaldesfemmes.fr/fiches-maladies/2623965-coronavirus-test-france-serologique-rapide-virologique-pcr-nez-ordonnance-ou-faire-liste-ministere-de-la-sante-pharmacie-laboratoire-prix-remboursement/>

From May 11th, all French people with symptoms suggestive of Covid-19 can be tested. The National Academy of Medicine recommends that only tests recommended by the National Reference Centre (CNR), which selected the tests on their analytical performance (sensitivity and specificity above 95%) and adapted to the automats used in medical analysis laboratories, be used and reimbursed if prescribed. In its press release of 18 May, the Academy recommends that serological tests should be systematically combined with PCR tests for the identification of outbreaks of infection and the detection of contacts.

Why not test everyone on May 11? "This is not feasible and, above all, has no use. We would have to retest everyone 8 days later and retest again 15 days later", replied Pr Delfraissy on April 30, who acknowledged that "the availability of 700,000 tests per week is a prerequisite (to deconfinement). If we don't have all that, it's not going to happen on May 11th".

As of May 25, 8 automated Elisa type tests have been validated by the National Reference Centre (CNR) in France (one of which is produced by a French laboratory, BioMérieux) as well as 23 rapid serological tests.

**UK:**

<https://www.independent.co.uk/life-style/health-and-families/coronavirus-antibody-test-what-is-it-virus-blood-nhs-matt-hancock-covid-19-a9423571.htm>

**Belgium:**

<https://www.brusselstimes.com/all-news/belgium-all-news/113011/coronavirus-antibody-tests-now-accessible-in-belgium/>

**Italy:**

<https://www.thelocal.it/20200525/italy-begins-mass-blood-testing-coronavirus-antibodies>

<https://www.lastampa.it/cronaca/2020/05/25/news/coronavirus-da-oggi-i-test-serologici-per-individuare-gli-asintomatici-1.38886997>

Today the serological survey on an ISTAT sample of 150,000 Italians, decided by the government on the recommendation of scientists, to determine to what extent and among which population groups the virus has circulated the most.

The sample, distributed in two thousand municipalities, will make it possible not only to collect information on the different geographical areas of the country, but also on the spread of the epidemic by age group (6 were selected), sex and economic activity. Going to identify how many Italians have developed antibodies to Covid it will not only be possible to understand how much of the population is today at least hypothetically immunized, but also to identify the best health strategies to protect the categories most at risk of infection.

**Spain:**

<https://www.sanitainformazione.it/mondo/la-spagna-riparte-in-quattro-fasi-e-abbandona-i-test-serologici-la-testimonianza-di-alessandro-medico-radiologo-a-barcellona/>

No rapid serological tests. Spain after buying a large quantity of kits tested in Madrid and Barcelona decided to change course and focus on the detection of antibodies with the enzyme immunoassay. This is confirmed by Alessandro, an Apulian radiologist working on the front line to fight the Coronavirus in a hospital in Barcelona. "The possibility of using serological tests as a method of screening the population and health personnel has been discussed at length - points out Alessandro, who has been working in the Germans Trias i Pujol Hospital for some years -. We would like to recall that Spain has had the highest incidence of health personnel affected by Covid infection in a more or less serious way. So it was discussed the use of serological tests, and the Spanish government bought some kits on the international market, but at the time of validating these tests, it was discovered that they were not safe enough, so this road was completely abandoned, despite the fact that several million euros were spent on the purchase of the kits. Therefore, the only reliable method for the detection of antibodies remains the classic enzyme immunoassay. This method should be much more sensitive than rapid result tests, but it obviously requires a more complex processing process, because it means analysing not a drop of blood from the finger, but carrying out a real analytical sample, with a longer time and above all it is more expensive. We

will analyse a sample of the population on which to carry out this type of test, while the health personnel will be offered to everyone".