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**Sent:** Sun 9/20/2020 5:33:56 AM  
**Subject:** Invitation to review manuscript for Eurosurveillance - Reminder  
**Received:** Sun 9/20/2020 5:33:55 AM

Ref.: Ms. No. eurosurveillance-D-20-01658  
 Epidemiology and precision of SARS-CoV-2 detection following lockdown and relaxation measures  
 Eurosurveillance

Dear 5.1.2e

On 15 Sep 2020 we sent you an invitation to review a manuscript entitled Epidemiology and precision of SARS-CoV-2 detection following lockdown and relaxation measures.

We would be grateful if you could let us know if you can carry out this review.

This is the abstract:

**Introduction:** SARS-CoV-2-detection is critical for clinical and epidemiological assessment of the ongoing CoVID-19 pandemic.  
**Aim:** To cross-validate manual and automated high-throughput 5.1.1c testing for SARS-CoV-2-RNA, to describe detection rates following lockdown and relaxation, and to evaluate SARS-CoV-2-loads in different specimens.  
**Method:** The validation cohort prospectively compared 5.1.1c in 1344 naso-oropharyngeal swabs (NOPS) taken in calendar week 13 using Basel-N-gene-assay for confirmation. Follow-up-cohort-1 and -2 comprised 12363 and 10207 NOPS taken over 10 weeks until calendar week 24 and 34, respectively. SARS-CoV-2-loads were compared in follow-up NOPS, lower respiratory fluids, and plasma.  
**Results:** Concordant results were obtained in 1308 cases (97%) including 97 (9%) SARS-CoV-2-positives showing high quantitative correlations (Spearman  $r > 0.95$ ;  $p < 0.001$ ) for all assays. Discordant samples ( $N=36$ ) had significantly lower SARS-CoV-2-loads ( $p < 0.001$ ). Following lockdown, weekly detection rates declined to  $< 1\%$  reducing single-test positive predictive values from 99.3% to 85.1%. Following relaxation, rates flared up to 4% with similarly high SARS-CoV-2-loads, but patients were significantly younger than during lockdown (34 vs 52 years,  $p < 0.001$ ). SARS-CoV-2-loads in follow-up NOPS declined by  $3 \log_{10}$  copies/mL within 10 days post-diagnosis ( $p < 0.001$ ). SARS-CoV-2-loads in NOPS correlated weakly with those in time-matched lower respiratory fluids and plasma, but remained detectable in 14 and 7 cases of NOPS with undetectable SARS-CoV-2, respectively.  
**Conclusion:** Evaluated manual and automated assays are highly concordant and correlate quantitatively. Following successful lockdown, declining positive predictive values require dual-target-assays for clinical and epidemiologic assessment. Confirmatory and quantitative follow-up testing should be considered within  $< 5$  days, using lower respiratory fluids in symptomatic patients with SARS-CoV-2-negative NOPS.

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If possible, I would appreciate receiving your review in 15 days. You may submit your comments online at the above URL. There you will find spaces for confidential comments to the editor, comments for the author and a report form to be completed.

Kind regards,

The editors at Eurosurveillance

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