

12I Landscaping exercise

WHO cone bioassay for ITNs

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Acronym List

AI	Active ingredient	
ITN	Insecticide-treated net	
LLIN	Long-lasting insecticidal net	
МоА	Mode of action	
WHO	World Health Organisation	

Summary

Aim and key questions addressed	 Used to assess bioefficacy of insecticide-treated nets (ITNs) and treated surfaces against a well characterised mosquito strain by forcing mosquitoes into close proximity with active ingredients ITN regeneration time, wash-resistance, and efficacy studies Comparing nets sampled from the field at timepoints after distribution can detect longitudinal changes in bioefficacy 	
Context	- Laboratory	
Test item	- Insecticide-treated nets (ITNs)	
Mosquito population	- Laboratory reared	
Number of mosquitoes per replicate	- 5	
Endpoints measured	 1-hour knockdown 24-hour mortality 	
Exposure time	- 3-minutes	
Holding time	 See relevant protocol for active ingredient tested 	
Indicative of personal protection	- No	
Suitable chemistries	 Chemistries applied to ITNs and treated surfaces Not suitable for nets with excito-repellent properties 	
Appropriate controls	 Negative control: untreated netting (ideally equivalent fabric to test item) Positive control: new, unused examples of relevant ITN product or treated surface 	

Relevant stage of production pipeline	 Product development Bioefficacy assessment Durability assessment
Characterisation of output	 Endpoints for pyrethroid nets and pyrethroid synergist nets are well defined. Endpoints have been defined for ITNs with different active ingredients such as chlorfenapyr and pyriproxyfen, however these are new additions to the guidelines and so need to be validated
Accessibility	- Materials and set-up are easily accessible
Cost	- Low
Level of validation and characterisation of outputs	 Validated with a wealth of historical data, however, current endpoints may need redefining if this method is adapted for novel modes of action. The following variables need to be better described: mosquito number, mosquito age, number of biological replicates per net piece, location and number of samples to cut from net
Outstanding questions, gaps and priorities	 More work is needed to correlate the bioavailability of insecticides with regards to mosquito bioassays and chemical net surface analysis
Key references, related SOPs, guidelines and publications	 Lees, R. S., Armistead, J. S., Azizi, S., Constant, E., Diabaté, A., Fornadel, C., Oxborough, R. (2022). Strain Characterisation for Measuring Bioefficacy of ITNs Treated with Two Active Ingredients (Dual-AI ITNs): Developing a Robust Protocol by Building Consensus. <u>https://doi.org/10.20944/preprints202203.0345.v1</u> World Health Organization. (2013). Guidelines for laboratory and field-testing of long-lasting insecticidal nets.

Overview

For a standard WHO cone bioassay (World Health Organization, 2013) five susceptible, nonblood-fed, 2–5-day-old female Anopheles (species to be stated in the test report) mosquitoes are exposed to each piece of insecticide-treated netting (25 cm x 25 cm) for 3 minutes under standard WHO cones, after which they are held for 24 hours with access to 10% sugar solution. Knock-down is recorded 60 minutes after exposure and mortality after 24 hours. One piece each from four different nets, should be tested. Up to four cones at a time may be attached to a piece of netting, and five mosquitoes at one time should be exposed in a cone. This procedure should be repeated until a total of 50 mosquitoes have been exposed to each piece. Results should be reported for each net tested and for the four nets (4 pieces x 10 cone tests x 5 mosquitoes = 200 mosquitoes). Mosquitoes exposed to untreated net pieces are used as controls; they should be tested each day, just before and just after testing treated netting material. If the mortality in controls on any day is < 10%, the results for that day should be adjusted by Abbott's formula. If the mortality in controls is > 10% on a given day, the results for that day are considered invalid and should be discarded. Bioassays should be carried out at 27 ± 2 °C and 75% ± 10% relative humidity.

The definitions of mortality and knock-down are those recommended by the WHO (World Health Organization, 2013). Mosquitoes are considered to be alive if they can both stand upright and fly in a coordinated manner. Mosquitoes that are moribund or dead are classified and recorded as knocked down at 60 minutes and as dead at 24 hours. A mosquito is moribund if it cannot stand (e.g., has one or two legs), cannot fly in a coordinated manner or takes off briefly but falls immediately. A mosquito is dead if it is immobile, cannot stand or shows no signs of life.

The cone test was established to assess the bioefficacy of insecticide treated nets and surfaces. Guidelines exist for its use in laboratory (historically termed 'Phase I') studies (net regeneration, wash-resistance, and efficacy studies), and community ('Phase III') trials (durability of bioefficacy studies). In some instances, this method has been adapted to measure mosquito behaviour at the net interface, however this is not yet validated.

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Accepted Methodologies

Are there existing standard SOPs/Guidelines detailing methodologies?

There are several iterations of the guidelines:

- W.H.O., Test procedures for insecticide resistance monitoring in malaria vectors, bioefficacy and persistence of insecticides on treated surfaces: report of the WHO informal consultation, Geneva, 28-30 September 1998 (World Health Organization, 1998),
- W.H.O., Guidelines for laboratory and field testing of long-lasting insecticidal nets 2005 (World Health Organization, 2005),
- W.H.O., Guidelines for testing mosquito adulticides for indoor residual spraying and treatment of mosquito nets 2006 (World Health Organization, 2006),
- W.H.O., Guidelines for Monitoring the Durability of Long-Lasting Insecticidal Nets 2011 (World Health Organization, 2011),
- W.H.O., Guidelines for laboratory and field testing of long-lasting insecticidal nets 2013 (World Health Organization, 2013).

Are these sufficiently detailed?

The current methodology is sufficiently detailed. Multiple groups have investigated the effect of different iterations on certain parameters specified in the method.

The angle of the cone board is not specified in the actual methodology, but a 45° angle is mentioned in the figure of the 2013 guidelines. Cone angle has been investigated in published literature and has been shown to impact the outcomes of this bioassay (Owusu & Muller, 2016). A review on the minimum number of mosquitoes to use to get an accurate result with cone tests was performed using LLINs from Madagascar. Results reported that the minimum number of mosquitoes that need to be tested is at least 40 mosquitoes, which is an improvement on the WHO recommended number of 100 mosquitoes. (Boyer *et al.*, 2018).

Do these methods require specialised/non-standardised equipment and/or training?

These methods require access to a WHO cone, cone board and tilted stand. Little training is needed for conducting the assay.

Are there issues with the methods or their interpretation?

It can often be unclear if reported mortality is uncorrected or (Abbots) corrected. Often the raw numbers are not reported, and the mortality results may be depicted in graphical form, making it challenging to interpret the results.

What AIs or combinations of AIs have the tests been used for?

The WHO cone test has been used to assess a range of pyrethroid nets and dual active ingredient net products containing an additional insecticide, or synergist. Pre-qualified vector control ITNs which the method can be used for are listed in Table 1.

ITN Product Name	Active Ingredient / Synergist
DuraNet LN	Alpha-cypermethrin
DuraNet Plus	Alpha-cypermethrin, Piperonyl Butoxide (PBO)
Interceptor	Alpha-cypermethrin
Interceptor G2	Alpha-cypermethrin, Chlorfenapyr
MAGNet	Alpha-cypermethrin
NiraNet	Alpha-cypermethrin
OLYSET Net	Permethrin
OLYSET PLUS	Permethrin, Piperonyl Butoxide (PBO)
Panda Net 2.0	Deltamethrin
PermaNet 2.0	Deltamethrin
PermaNet 3.0	Deltamethrin, Piperonyl Butoxide (PBO)

Table 1. Product name and active ingredients of pre-qualified vector control insecticide-treated nets.

Reliefnet Reverte	Deltamethrin	
Royal Guard	Alpha-cypermethrin, Pyriproxyfen	
Royal Sentry	Alpha-cypermethrin	
Royal Sentry 2.0	Alpha-cypermethrin	
SafeNet	Alpha-cypermethrin	
Tsara	Deltamethrin	
Tsara Boost	Deltamethrin, Piperonyl Butoxide (PBO)	
Tsara Plus	Deltamethrin, Piperonyl Butoxide (PBO)	
Tsara Soft	Deltamethrin	
VEERALIN	Alpha-cypermethrin, Piperonyl Butoxide (PBO)	
Yahe LN	Deltamethrin	
Yorkool LN	Deltamethrin	

Are they validated, for which Als/entomological effects, and to what extent?

The assay has been validated by historical use and multiple published studies using this method across multiple sites. There is a wealth of publicly available data in published literature and from the WHO.

What inputs need to be characterised? e.g., samples, mosquitoes, equipment

- The number of mosquitoes per test unit
- The insecticide resistance status of mosquito strain if testing dual-AI nets (Lees et al., 2022)
- The age of mosquitoes to be used for testing (has changed over time with iterations of guidelines)
- Temperature and humidity (slight variations)
- Insecticide-treated net storage conditions

Are endpoints clearly defined and appropriate? Who were they defined by?

Endpoints standardly measured are 60-minute knockdown and 24-hour mortality for pyrethroid only nets. Endpoints for pyrethroid nets and pyrethroid synergist nets are well defined. Endpoints have been defined for ITNs with different active ingredients such as chlorfenapyr and pyriproxyfen, however these are new additions to the guidelines and so need to be validated.

Are their supporting SOPs? e.g., cleaning SOPs, mosquito rearing SOPs required

- SOP: Net washing for laboratory LLIN trials (I2I-SOP-006)
 (https://innovationtoimpact.org/wp-content/uploads/2022/07/Net-washing-for-laboratory-LLIN-trials Updated-May-2022.pdf)
- WHO Guidelines for laboratory and field testing of long-lasting insecticidal nets (World Health Organization, 2013)
- Washing procedure from the Collaborative International pesticides Analytical Council (CIPAC)

Current Use Practices

Does everybody use the same SOP?

A review of published literature and compiled comment from those working in industry, has shown that people generally use the most recent iteration of the WHO cone test, however, the methodology has remained unchanged and so choice of guidelines for referencing should not impact the way that the bioassay is performed.

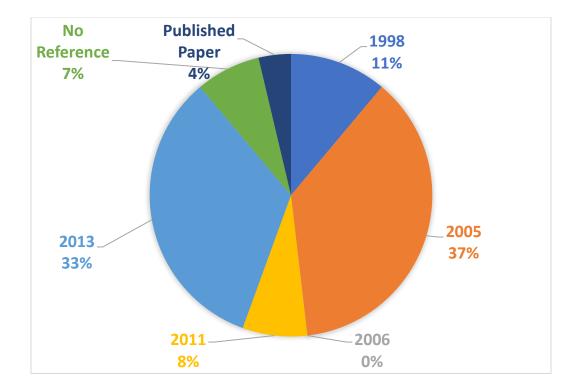


Figure 1. Referenced WHO guidelines for performing a WHO cone test.

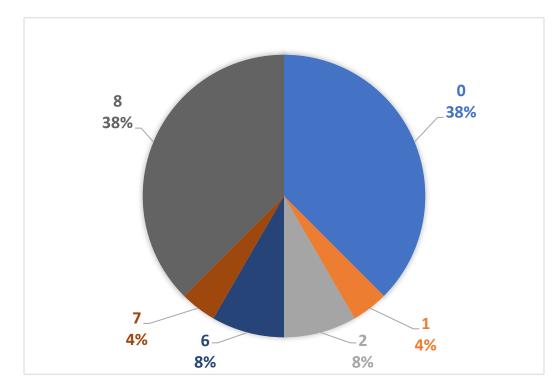


Figure 2. The number of years out of the date the referenced protocol used was in published literature.

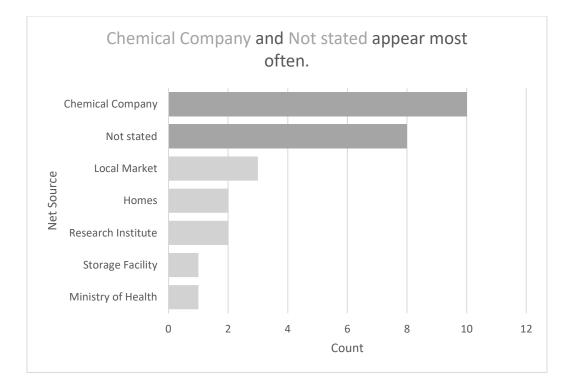


Figure 3 – Reported sound of insecticide-treated net used in WHO cone test.

Conditions	Count
Not stated	13
Ambient Temperature	5
Foil and fridge	2
Foil	1
Plastic bag and ambient temperature	1
Plastic bag	1
30 °C and 75–85% RH	1
Stored in envelope	1
Foil and plastic bag	1
30°C and dark	1

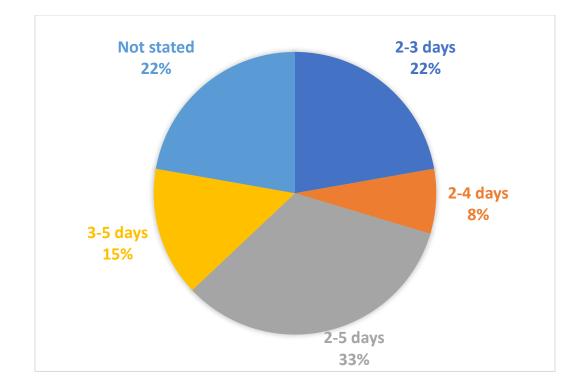


Figure 4 - Age of mosquitoes used in WHO cone test.

Size	Count
25 x 25cm	9
30 x 30cm	7
Whole net	6
Not stated	5

Table 3. Net swatch size used in WHO cone test.

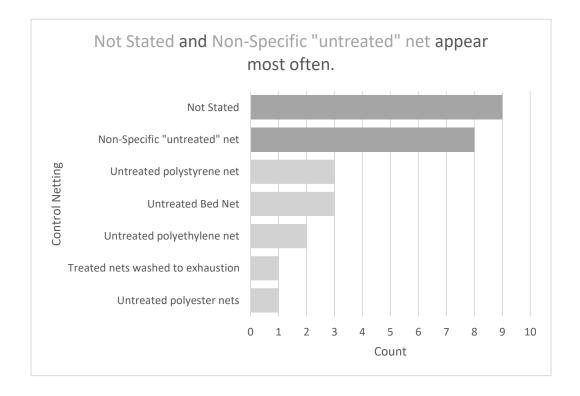
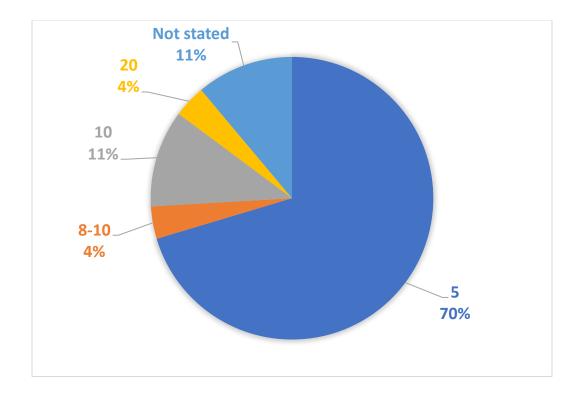


Figure 5 - Negative control netting used in WHO cone test.





Additional parameters of the WHO cone test that differ between use in published literature:

- Samples taken per net varied between 1 10 subsamples
- Number of nets used varied between 1 932 nets
- Mosquito sample size varied between 20 20000 mosquitoes
- Number of cones used per subsample varied between 1 16 cones

Are there differences of interpretation of the method?

Despite 5 mosquitoes per cone being stated in the guidelines, several published studies used between 8 and 10 mosquitoes per cone. Bar this, the method appears to be largely interpretated and carried out in the same way across users.

Are there results obtained largely consistent between studies?

Susceptible strains often show results that largely agree with each other, however these are often mortalities of 100%, or close to 100%, so it can prove difficult to know how consistent results between studies are.

Is further development, refinement or validation of the method required? Based on priority, significance, and relevance of method.

There is some optimisation and refinement underway as part of I2I to identify potential sources of variation in the methodology.

Potential Sources of Variation

What are the sources of variability in the method and are there means to

minimise or characterise these.

Sources of variability in the method include:

- Number of mosquitoes per test unit
- Age of mosquitoes used for testing
- Temperature and humidity
- Operator handling
- Required mosquito sample size
- Required number of cone tests per net
- Required number of net pieces to be tested
- Configuration of the bioassay board

Noise bioassays, similar to that performed by I2I for the WHO tube and bottle tests, could help to investigate sources of variability.

Do current method/s need to be adapted for new active ingredients/MoA/types of tool?

The current endpoints may need redefining if this method is adapted for novel modes of action. This method is currently only validated for insecticides with mortality or oviposition inhibition as the primary endpoint.

Are new methods required? Identify areas where current method/s are not suitable or sufficient.

New methods may be required for alternative MoAs.

Gaps in biological or other understanding that hinder method development or validation

There are gaps in our understanding of the bioavailability of insecticides on the net surface. More work is needed to correlate the bioavailability of insecticides with regards to mosquito bioassays and chemical net surface analysis. I2I are currently undertaking a piece of work around this topic.

Prioritisation – is there an issue that needs to be addressed, what specifics, how urgent is the need?

The number of mosquitoes used per cone needs to be addressed. Hughes (PhD thesis) investigated this:

- Results from bioassays using five individuals were compared to bioassays using ten individuals. For each strain and treatment, there was no significant different in knockdown and 24-hour mortality between five and ten test individuals.
- Susceptible mosquito strain and resistant mosquito strain knock-down and mortality data obtained in the WHO standard cone test using five individuals was used to compare

with ten individuals. These assays were carried out at different time points and with different mosquito batches so results must be viewed with caution.

After exposure to PermaNet, five and ten individuals of both susceptible strains showed consistent knock-down and mortality of between 98% (+2 SEM) - 100%. After exposure to Olyset, with both five and ten individuals of Kisumu, knock-down did not exceed 58% (±4.9 SEM) and mortality 10% (±4.5 SEM). Similarly, for N'gousso, knock-down did not exceed 20% (±6.3 SEM) and mortality 12% (+8 SEM). For the two resistant strains, although knock-down increased in Tiassalé against PermaNet, neither PermaNet nor Olyset induced mortality greater than 10% (+4.5 SEM). Five individuals were used in each replicate in subsequent experiments in line with WHO recommendations.

Previous work has also been undertaken to investigate the angle of the cone board and found that mosquitoes (both pyrethroid resistant and pyrethroid susceptible strains) spent more time on the net at a 60-degree angle than at the WHO guideline recommended 45 degrees (Owusu & Muller, 2016).

The configuration of the bioassay board was investigated by (Koinari et al., 2022) in 'WHO cone bioassay boards with or without holes: relevance for bioassay outcomes in long-lasting insecticidal net studies'.

- Conducted study to investigate whether circular holes in the bioassay board intended to 'force the mosquitoes to stand on the net surface' lead to systematic bias in the key bioassay endpoints (60-minute knockdown and 24-hour mortality).
- Study performed at two sites and results not only varied with bioassay board configuration but also with mosquito colony. WHO cone bioassay results were systematically biased between the two facilities such that the use of *Anopheles* in one site predicted higher knockdown and mortality results.

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