



The right treatment begins with the right diagnosis.

Test your patient with both the **BD MAX™ Vaginal Panel** and the **BD CTGCTV2 assay** to diagnose vaginitis and the most prevalent non-viral STIs with one swab.¹⁻⁷



BD MAX™ Vaginal Panel: Get her vaginitis diagnosis right the first time.^{1,4-7}

Help stop the cycle of repeat visits



Traditional diagnostic techniques are often subjective, and their **sensitivity is low**.^{3,5,8}



with vaginitis are misdiagnosed.^{4,6}



Women who receive empiric treatment are more likely to have a **recurrent visit** within 90 days.⁶

Due to the complex etiology of vaginitis, you need a diagnostic tool that provides **actionable and objective results to make informed clinical decisions**.⁹⁻¹²

Get a clear vaginitis diagnosis in one test

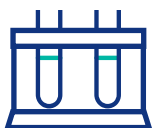
BD MAX™ Vaginal Panel is the first FDA-cleared microbiome-based, PCR assay that directly detects bacterial vaginosis (BV), vulvovaginal candidiasis (VVC), and *Trichomonas vaginalis* (TV), the 3 most common infectious causes of vaginitis, in one test, with one swab.^{12,13}

01100
10110
11110

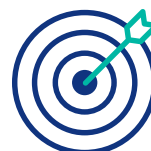
Designed with a proprietary, microbiome-based algorithm for BV.¹



Determines a definitive positive or negative BV result for each patient.¹



Provides **separate results** for candida species *C. glabrata* and *C. krusei* that may not respond to traditional therapeutics.^{1,14}



Utilizes the **highly sensitive** diagnostic technology, NAAT, for TV detection.^{13,17}

Identify vaginitis and STI co-infection from visit one, with one patient collection

Vaginitis and STI co-infection is common

25%

One study found that **approximately 25% of women with BV or VVC also had an STI.**¹⁸

Most people with CT, GC and TV do not develop symptoms, but each has been associated with downstream consequences including pelvic inflammatory disease, tubal factor infertility, and adverse pregnancy outcomes.^{3,15,19,20}



60%-
80%

TV often coexists with BV pathogens, with co-infection rates of 60%-80%.^{13,15-17}

1 SAMPLE: 5 RESULTS.

Get a comprehensive diagnosis from the start^{1-7,12,13,18}

With the BD CTGCTV2 assay and the BD MAX™ Vaginal Panel, you can use the same sample to test for vaginitis and the 3 most prevalent non-viral STIs in symptomatic women.^{1-3,17,18,21}

CT

GC

TV

BV

VVC

BD CTGCTV2 assay: Go one step further in testing for STIs by detecting TV - in addition to CT and GC.^{2,3,21}

TV likely causes more STIs than CT and GC combined in many populations.²¹



The rates of **all STIs** continue to increase.¹⁸



Approximately **70%** of TV infections are asymptomatic.¹⁵

To protect women against the potentially serious adverse outcomes associated with STIs, **you need results you can trust.**¹⁷

Get an accurate diagnosis with advanced detection

The BD CTGCTV2 FDA-cleared assay is designed to detect *Chlamydia trachomatis* (CT), *Neisseria gonorrhoeae* (GC) and *Trichomonas vaginalis* (TV), the 3 most prevalent non-viral STIs, with a single test.^{2,3,21}



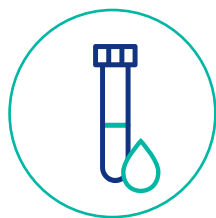
Includes dual gene targets for GC, which **maximizes the assay specificity**: both GC gene targets are required for a positive GC result.^{2,3}



Utilizes the **highly sensitive CDC-recommended** diagnostic technology, NAAT for both CT and TV detection.^{2,17}

Adapt to your patients needs with flexible testing from a wide variety of sample types.^{1,2}

test up to five different conditions



The BD Molecular Swab Collection Kit can be used to test for **up to five different women's health and STI conditions**, including CT, GC, TV, BV, and VVC, from one sample.^{1,2,23}

With the possibility to use patient-collected samples*, you can **spend more time with your patients** and focus on more critical tasks.^{1,2}








spend more time with your patients

include men in testing



The ability to detect CT, GC and TV in urine samples allows you to **include men in testing.**²

	Male		Female	
	Symptomatic	Asymptomatic	Symptomatic	Asymptomatic
 Urine	CT GC TV	CT GC TV	CT GC TV	CT GC TV
 Endocervical Swab			CT GC	CT GC
 Vaginal Swab - Self Collected*			CT GC TV BV VVC	CT GC TV
 Vaginal Swab - Clinician Collected			CT GC TV BV VVC	CT GC TV
 PreservCyt® LBC			CT GC	CT GC

With the BD MAX™ Vaginal Panel and the BD CTGCTV2 assay, you can use the same sample to test for vaginitis and the 3 most prevalent non-viral STIs.^{1-3,17,18,21}

- ✓ Help decrease the number of recurrent visits, incorrect treatments, and risk of negative sequelae.^{4,6}
- ✓ Include TV when you screen for STIs and vaginitis.
- ✓ Detect the major causes of vaginitis and the 3 most prevalent non-viral STIs with just one swab.^{1-3,12,13,21}
- ✓ Adapt to your patients needs with a wide variety of compatible sample types.^{1,2}

Let's shape the future of women's health. Together and now.

BD CTGCTV2 assay - BD MAX™ Vaginal Panel - BD Onclarity™ HPV Assay - BD MAX™ GBS

For more information about BD's comprehensive diagnostic Women's Health portfolio, please visit [womens-health-solutions.bd.com/](https://www.bd.com/womens-health-solutions)

*patient-collection takes place in a healthcare setting

BV, bacterial vaginosis; CT, *Chlamydia trachomatis*; FDA, Food and Drug Administration; GC, *Neisseria gonorrhoeae*; LBC, liquid-based cytology; NAAT, nucleic acid amplification test; PCR, polymerase chain reaction; STI, sexually transmitted infection; TV, *Trichomonas vaginalis*; US, United-States; VVC, vulvovaginal candidiasis.

References: 1. BD MAX™ Vaginal Panel Package Insert (P0258). 2. BD CTGCTV2 for BD MAX™ System Package Insert (P0237). 3. Van Der Pol B et al. Sex Transm Dis. 2021;48(2):134–40. 4. Broache M et al. Obstet Gynecol. 2021;138(6):853–9. 5. Brown H and Drexler M. Popul Health Manag. 2020;23(51):S3–S12. 6. Hillier SL et al. Clin Infect Dis. 2021;72(9):1538–43. 7. Miller JM et al. Clin Infect Dis. 2018;67(6):e1–e94. 8. Menard JP et al. Clin Infect Dis. 2008;47(1):33–43. 9. Hainer BL and Gibson MV. Am Fam Physician. 2011;83(7):807–15. 10. Anderson MR et al. JAMA. 2004;291(11):1368–79. 11. Paladine HL and Desai UA. Am Fam Physician. 2018;97(5):321–29. 12. Gaydos CA et al. Obstet Gynecol. 2017;130(1):181–9. 13. Schwelke JR et al. J Clin Microbiol. 2018;56(6):e00252–18. 14. Pfaller MA et al. J Clin Microbiol. 2010;48(4):1366–77. 15. Trichomoniasis – CDC Fact Sheet, CDC. Available at: <https://www.cdc.gov/std/trichomonas/stdfact-trichomoniasis.htm>. Last updated July 22, 2021. Accessed April 10, 2022. 16. Sobel JD et al. Curr Infect Dis Rep. 2013;15(2):104–8. 17. Workowski KA et al. MMWR Recomm Rep. 2021;70(4):1–187. 18. Van Der Pol B et al. Clin Infect Dis. 2019;68(3):375–81. 19. Chlamydia – CDC Fact Sheet, CDC. Available at: <https://www.cdc.gov/std/chlamydia/stdfact-chlamydia-detailed.htm>. Last updated December 31, 2021. Accessed February 16, 2022. 20. Gonorrhea – CDC Fact Sheet, CDC. Available at: <https://www.cdc.gov/std/gonorrhea/stdfact-gonorrhea-detailed.htm>. Last updated July 22, 2021. Accessed February 16, 2022. 21. Sexually Transmitted Infections Prevalence, Incidence, and Cost Estimates in the United States, CDC. Available at: <https://www.cdc.gov/std/statistics/prevalence-2020-at-a-glance.htm>. Last updated January 25, 2021. Accessed February 18, 2022. 22. Kissinger P. BMC Infect Dis. 2015;15:307. 23. BD Molecular Swab Collection Kit Package Insert (P0246).



bd.com

BD Life Sciences
7 Loveton Circle, Sparks, MD 21152-0999, USA
Tel: 1.800.638.8663

BD, the BD Logo, MAX and Onclarity are trademarks of Becton, Dickinson and Company or its affiliates. All other trademarks are the property of their respective owners.
© 2022 BD. All rights reserved. BD-62308 June 2022