

Babesia crassa–Like Human Infection Indicating Need for Adapted PCR Diagnosis of Babesiosis, France

Appendix

Protocol of Our Routine PCR

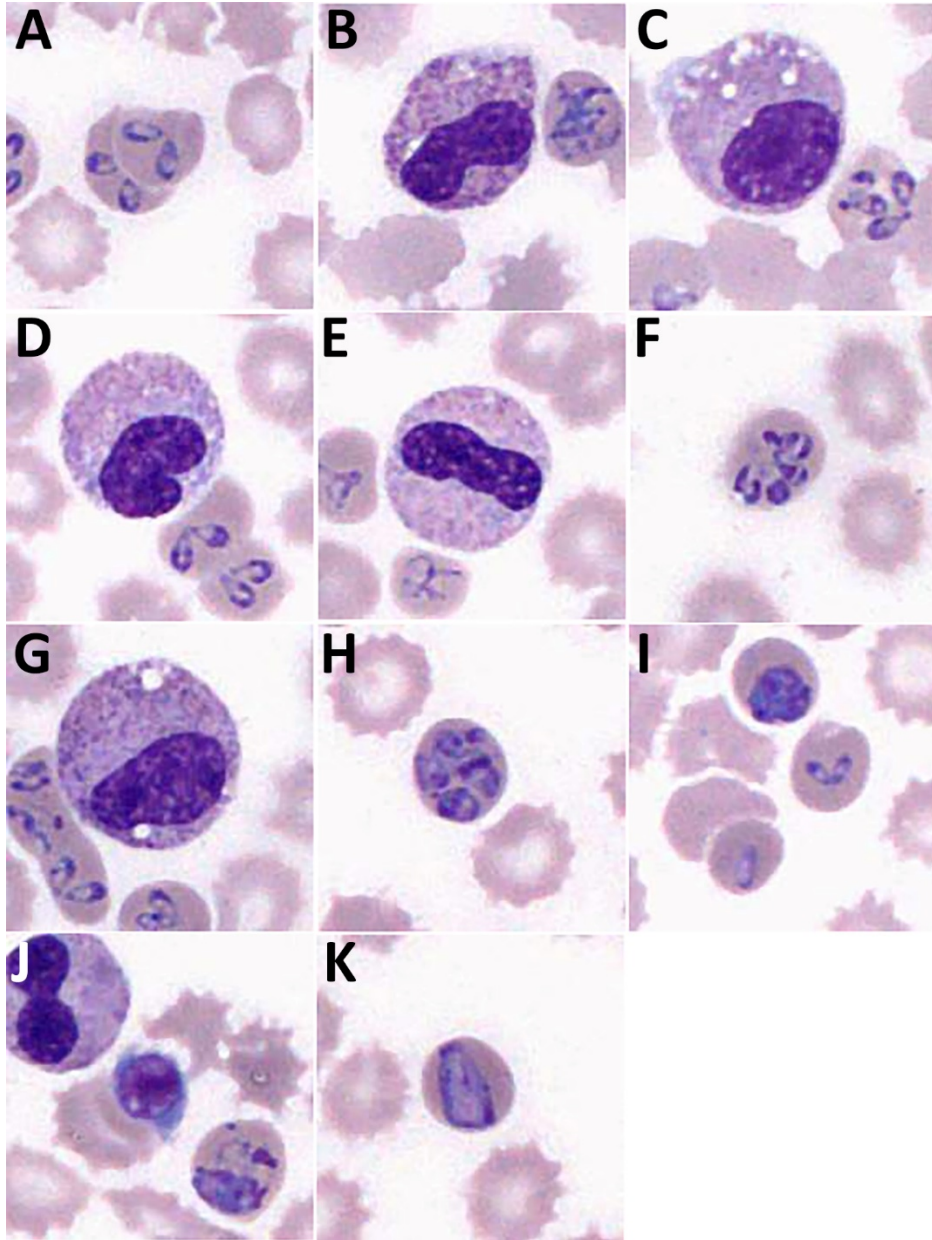
DNA extraction from 100 μ L of whole blood was performed according to the “Pathogen universal 200” program on a MagNA Pure 96 Instrument (Roche, Meylan, France) using MagNA Pure 96 DNA and Viral NA Small volume Kit (Roche, Meylan, France), preceded with lysis using 100 μ L MagNAPure 96 Bacterial Lysis Buffer and 10 μ L Proteinase K (solution containing >600 mAU/ml, QIAGEN, Courtaboeuf, France) according to the manufacturer’s instructions. PCR reactions were set up with extracted DNA (2 μ L for *B. divergens*, 5 μ L for *B. microti*), 1 x LightCycler FastStart DNA Master HybProbe (Roche), 0.9 μ M primers (Invitrogen, Courtaboeuf, France) (Bdiv_mic_Fw 5’ACAACGATGAAGGACGCAG3’ for both reactions and either Bdiv_Rv 5’GATCACACGTGGCGATACC3’ for *B. divergens* detection or Bmic_Rv 5’TCAGCGGATCRTCACATCC3’ for *B. microti* detection) and 0.2 μ M probe (Eurogentec, Serain, Belgium) (Bdiv_probe FAM-CGTTTCAGTGAGCCCCCTTTCCT-BHQ1, Bmic_probe YY-AGTGCACCCATTTTCAGCGCCT-BHQ1) and 4 mM MgCl₂. PCR was performed using a fluorescence detecting temperature cycler (LightCycler 2.0, Roche). The reaction mixture was incubated for 10 min at 95°C, followed by 50 cycles of amplification, 10s at 95°C, 20s at 56°C and 20s at 72°C. The generation of target amplicons was monitored at 530 nm for *B. divergens* or 560 nm for *B. microti*. Samples were considered positive when their fluorescence exceeded background fluorescence, confirmed by visual inspection of the graphical plot generated by the instrument.

Universal *Babesia* spp. PCR

The PCR was performed as described in (1), with modifications. Briefly, 5 µl of template DNA were added to the reaction mix containing 0.5 µM of each primer, 1.5mM MgCl₂, 0.2mM dNTP, 1unit of HotStarTaq Plus DNA Polymerase and 10x associate buffer (Qiagen, Courtaboeuf, France) in a final volume of 25µl. A touchdown protocol of 40 cycles was conducted: 30s at 95°C, 30s at 55°C with a decrement of 0.5°C per cycle, 30s at 72°C. PCR products were separated on an agarose gel and visually inspected.

Reference

1. Casati S, Sager H, Gern L, Piffaretti J-C. Presence of potentially pathogenic *Babesia* sp. for human in *Ixodes ricinus* in Switzerland. Ann Agric Environ Med. 2006;13:65–70. [PubMed](#)



Appendix Figure. Different forms of *Babesia* spp. trophozoites observed in our patient. May–Grünwald–Giemsa stained blood smear (original magnification $\times 1,000$).