

Recombinase Polymerase Amplification for Rapid Detection of Zoonotic Pathogens

Ruichen Lv, Nianhong Lu, Junhu Wang, Yuexi Li*, Yong Qi*

Huadong Research Institute for Medicine and Biotechniques,
210002, #293 Zhongshandonglu, Nanjing, Jiangsu, China

* Corresponding author addresses: liyxi2007@126.com for Y. L. and
qslark@gmail.com for Y. Q.

Grant supports: This work was supported by Medical Science and
Technology Projects (BWS20J021, 19SWAQ04, A3705011904-06, and
JJ2020A01 to Y. L.) and a Jiangsu Province Social Development Project
(BE2020631 to Y. L.).

Abstract

With the advent of molecular technology, several isothermal techniques for fast detecting zoonotic pathogens have been developed. Among them, Recombinase Polymerase Amplification (RPA) is becoming an important technology for rapid, sensitive and economical detection of zoonotic pathogens. RPA technology has the advantage of being implemented in a field-based scenario because the method requires minimal sample preparation and is performed at a constant low temperature (37-42 °C). It is rapidly becoming a promising tool for rapid detection and further prevention and control of zoonotic diseases. This article will discuss the principles of RPA technology and its derivatives, including RPA coupled with lateral flow test (RPA-LF), real-time fluorescence RPA, Electrochemical RPA, Flocculation RPA and other technologies, and their applications in detection of zoonotic pathogens for a brief review.

Keywords: recombinase polymerase amplification; rapid detection; zoonotic pathogen; zoonosis; RPA

1. Introduction

Nucleic acid amplification (NAA) in vitro, the artificial replication of genetic material, has permeated nearly every field of the life sciences and biotechnology. The development of this technology originated from the invention of polymerase chain reaction (PCR) by Kary Mullis in 1983[1]. The PCR amplification technique has been widely used in the

rapid detection of nucleic acids and demonstrated to be highly specific and efficient. However, the PCR amplification technique still has several limitations. It relies on the thermal cycler for heating and cooling and high-quality nucleic acids as starting point, which will be limited by the environment and equipment to a certain extent. Furthermore, skilled operators and laboratory environment are also needed, impeding its application in low-resource settings.

In order to overcome the limitations of PCR method, various isothermal DNA amplification methods using various enzymes and amplification systems have been established, including the loop-mediated isothermal amplification (LAMP), rolling circle amplification (RCA), nucleic acid sequence-based amplification (NASBA), helicase-dependent amplification (HDA), strand displacement amplification (SDA) and recombinase polymerase amplification (RPA) (Table 1)[2-4]. Isothermal nucleic acid amplification greatly simplifies the incubation conditions for artificial nucleic acid amplification, and the elimination of thermal cycling reduces the requirements for amplification equipment, making nucleic acids detection no longer dependent on the laboratory environment. Another advantage of the isothermal nucleic acid amplification is that multiple molecular reactions, like denaturation, annealing, and elongation, can be performed asynchronously in one isothermal amplification reaction, which can effectively reduce the nucleic acid amplification reaction time [5, 6]. Among all the isothermal DNA amplification methods, RPA is remarkable due to its simplicity,

strong specificity and high sensitivity, though with a very short history.

Table 1 Isothermal nucleic acid amplification techniques

Isothermal technique	Template	Primers	Temperature (°C)	Incubation time	Amplified length (bp)	Lyophilised reagents
LAMP	DNA	4~6	60~65	15~60	200	No
RCA	DNA/RNA	1	30~65	60~240	100	No
NASBA	RNA	2	37~42	60~180	100~250	Yes
HDA	DNA	2	60~65	30~120	80~120	No
SDA	DNA	4	30~55	60~120	200	No
RPA	DNA/RNA	2	37~42	20~40	400	Yes

2. Recombinase polymerase amplification (RPA)

RPA was first developed by Niall Armes from ASM Scientific Ltd of Cambridge, UK in 2006 [7]. Unlike the traditional PCR methods, RPA does not rely on thermal denaturation and annealing. Three key enzymes required for the RPA reaction are recombinase that can bind to single-stranded nucleic acid, DNA single-stranded binding protein (SSB), and strand-displacement DNA polymerase[7, 8]. The amplification reaction starts with the combination of the recombinase and a primer with a length of about 30 to 35 nt, the combination complex searches for the target site in double-stranded DNA template. Once the complex is located, it can directly initiate a chain exchange reaction to form a D-shaped loop. SSB then binds to the replaced DNA chain to prevent the primer dissociation. Subsequently, the active hydrolysis of ATP in the recombinase-primer complex leads to a change in the conformation of the complex. After the recombinase disassembled from the nucleoprotein

filament, the 3' end of the primer is exposed and recognized by the strand-displacement DNA polymerase. The DNA polymerase adds the corresponding base to the 3' end of the primer according to the template sequence, and the DNA amplification reaction starts. Both forward and reverse primers enable the amplification reaction to occur in both directions simultaneously. The synthesized amplicon can be used as new template to finally realize an exponential amplification [9].

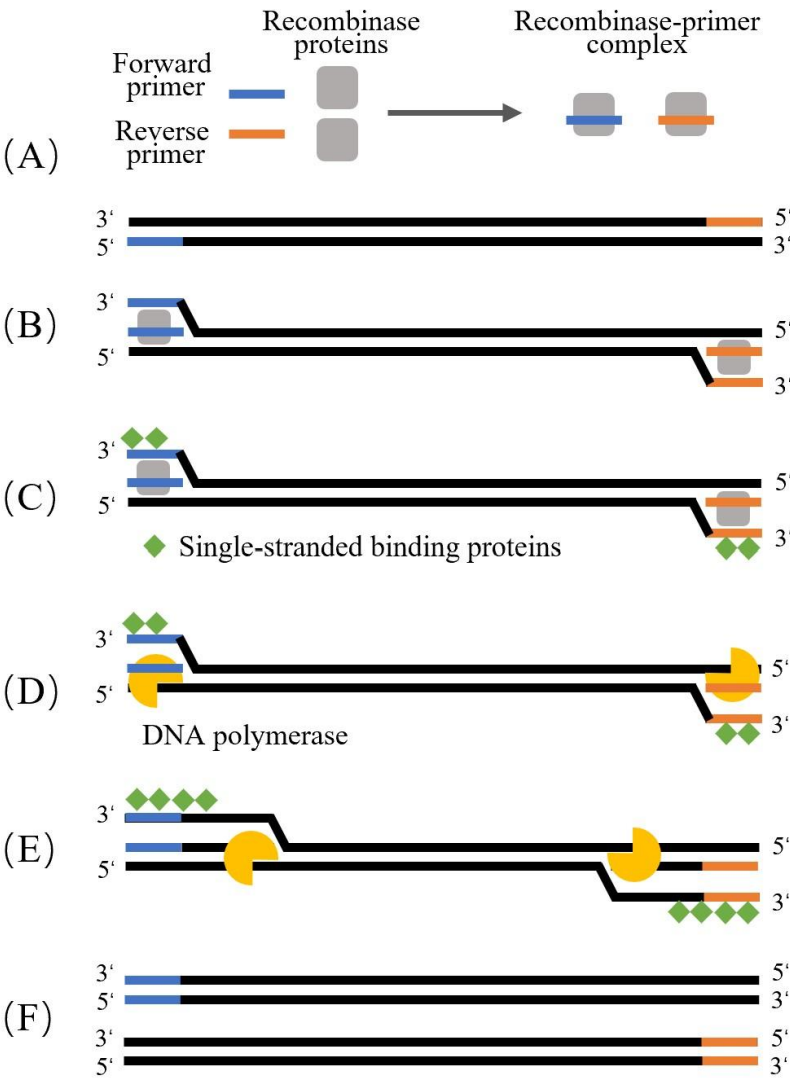


Fig.1. Schematic of RPA principle. (A) The recombinase proteins combine with each primer.

(B) The combination complex searches for the target site and directly initiate a chain exchange reaction forming a D-loop. (C) Single stranded binding proteins binds to the replaced DNA chain to prevent the primer dissociation. (D) The recombinase disassembled from the nucleoprotein filament and the DNA polymerase extends from the 3' end of primers. (E) DNA amplification reaction starts. (F) Exponential amplification is achieved by cyclically repeating the process.

2.1 Template

RPA was initially designed to amplify double-stranded DNA, single-stranded DNA, and DNA methylation [10, 11]. It was later shown that the cDNA produced by reverse transcription of RNA or miRNA can also be amplified [12, 13], and this process requires the participation of reverse transcriptase [14]. Regardless of nucleic acid template type, the length of the RPA amplicon should be less than 500bp for efficient amplification. Most published RPA papers show that although RPA can also amplify targets up to 1.5kb, it is more suitable for amplicons of between 100 and 200bp [7, 15], because the shorter the sequence, the higher the amplification efficiency.

2.2 Primer and probe

Unlike traditional PCR, the length of RPA primer is generally between 30 and 35 nucleotides, in order to facilitate the formation of a complex between the recombinase and the primer. Longer primers (up to

45 nucleotides) may produce secondary structure and potential primer artifacts, and lead to less amplification efficiency. Also, there is no melting temperature requirement for RPA primer and probe design. Like primers of traditional PCR, the GC content of the RPA primers should be between 30% and 70%, and long-chain guanines should be avoided at the 5' end, while guanine and cytosine nucleosides can be used at the 3' end to improve performance. The probe is not necessary in the common RPA assay, while is necessary when RPA is combined with various endpoint detection methods addressed below [16-18]. The procedure for primer and probe design is not standardized and no software is available, however, the selected primers and probes can be evaluated using the software for PCR primer design like Primer Premier 5. Usually, multiple groups of primers and probes are designed and evaluated in experiment to screen the best group [19-22] .

2.3 Temperature and incubation time

The optimum reaction temperature of the enzymes used in the RPA assay is between 25 and 42°C, determining the optimum temperature for the RPA reaction is also in this range. RPA assay does not require strict temperature control [23-25]. Even if it exceeds the recommended temperature range, the RPA reaction can still proceed. However, the recommended RPA reaction temperature in most studies is between 37 and 42 °C [9, 26].

The time required for nucleic acid amplification to reach a detectable level depends on the concentration of the starting DNA template. At the

appropriate reaction temperature, it usually takes less than 20 minutes to complete the detection [27]. In practical applications, the amplification results can be observed as low as 3 to 4 minutes. For the solution phase RPA amplification reaction, the recombinase can consume all ATP in the system within 25 minutes. Therefore, too long incubation time is unnecessary. Also, it's recommended to add a step of shaking at the fourth minute of the reaction to improve reaction efficiency [20, 21, 28].

2.4 Advantages and disadvantages of RPA assay

RPA assay offers several advantages. It can carry out nucleic acid amplification under constant temperature conditions of 37-42 °C without requiring pre-denaturation steps and high temperature annealing steps. So, RPA does not need expensive thermal cycling equipment, and is suitable for non-instrumented nucleic acid amplification platforms. Researchers have tried to use human body temperature to complete the amplification in various conditions [28].

RPA technology is simple to operate with good expansibility, and can be combined with different detection systems to achieve different detection purposes. Combining with reverse transcriptase makes a reverse transcription-RPA system and can be used to amplify RNA sequences; combining with fluorescence probe makes a real-time fluorescence RPA and can complete a real-time detection; combining with lateral flow (LF) test makes a RPA-LF, and can detect target sequences visually with naked eyes [18, 29-32]. Recently, Clustered Regularly Interspaced Short Palindromic Repeats (CRISPR)-associated nuclease (Cas) was introduced

to make a CRISPR-based diagnostic (CRISPR-Dx) named “SHERLOCK” and has promoted the popularity and scope of application of RPA assay [33].

RPA reagents can also be provided in lyophilized form with excellent stability and be transported and stored without refrigeration [34, 35]. As of PCR, multiplex RPA assays that can detect multiple target sequences quickly in one reaction are also available, though depending on the target sequence, amplicon size and primer design [36-38]. All the above advantages facilitate the implementation of RPA in field-based rapid detection applications. In recent years, RPA has been greatly developed in the rapid detection of various pathogens, especially in zoonotic pathogens.

Of course, RPA technology does have some disadvantages. RPA product normally requires purification before agarose gel electrophoresis to avoid smearing caused by other components. Secondly, there is no special software available for the design and screen of RPA primers and probes. It mainly relies on a large number of synthesis and screening work, resulting in increased cost and time consumption. Furthermore, conventional real-time PCR probes (such as Taq-Man probes) are not compatible with the RPA reaction, and the fluorescent fuels are prone to false positive results. In addition, real-time amplification using RPA is not easy to control due to its isothermal amplification properties. Because it is based on a time threshold rather than a cycling threshold, which is dependent on the initial conditions of the reaction, incubation temperature

and mixing steps. With regard to cost, RPA kits are currently sold by only one company, and the users have limited flexibility in the kit formulations which makes for higher costs when used in small batches.

3. Applications of RPA in zoonotic pathogen detection

Zoonosis, also known as animal-derived disease, refers to any disease or infection that is naturally transmissible from vertebrate animals to humans or from humans to animals [35, 39]. Approximately 60% of emerging human infections are zoonosis in nature, and more than 70% of pathogens originated from wild animal species [40]. At present, there are more than 200 species of zoonotic pathogens known in the world, and the most prevalent ones are anthrax, plague, foot-and-mouth disease, avian influenza, Japanese encephalitis, rabies, etc. [41-43]. Zoonosis is a major public health concern that directly threatens human health. In recent decades, there have been large-scale epidemics of zoonosis, such as the 2005 H5/N1 avian influenza outbreak, the 2009 H1/N1 influenza pandemic, the 2013–2016 West African Ebola outbreak, and the COVID-19 pandemic [44]. Since entering the 21st century, the global economic impact of zoonosis outbreaks has exceeded over 100 billion U.S. dollars [45, 46]. The currently ongoing COVID-19 outbreak, affecting millions of people around the globe, again shows the development of rapid and sensitive detection technology for zoonotic pathogens detection, for patient and health care in general, and for risk prevention of large-scale outbreaks and further spread, is paramount

important in public health [47]. RPA assay is widely used in the detection of zoonotic pathogens due to its high sensitivity, efficiency, expansibility, rapidity, and strong specificity (Table 2) [48-58].

Table 2 Major Zoonotic Diseases and RPA Detection Methods

Disease	Etiology	RPA method	Amplification time (min)	Temperature (°C)	Limit of defection (LOD)
Bacterial zoonoses					
Tubercu losis	<i>Mycobacterium bovis</i> , <i>Mycobacterium caprae</i> , <i>Mycobacterium microti</i>	Direct RPA	20	39	6.25 fg
		LF-RPA	25~45	5	5 copies/action
		Real-time fluorescence RPA	20	39	4 copies/μl
		Electrochemical			
			20	39	0.04 ng/μl
		RPA			
Brucell osis	<i>Brucella abortus</i> <i>Brucella melitensis</i> , <i>Brucella suis</i> ,	CRISPR/Cas-RP	180	37	4.48 fmol/L
		A			
		Direct RPA	20	38	3 copies/reaction
		LF-RPA	10~30	30-37	6 copies/reaction
		Real-time	16	40	17 copies/reaction

<i>Brucella canis</i> ,		fluorescence RPA			
Plague	<i>Yersinia pestis</i>	CRISPR/Cas-LF-	50	37	10 ³ -10 ⁶ fg/μl
		RPA			
Leptospirosis	<i>Leptospira interrogans</i>	CRISPR/Cas-RP	60	39	100 copies/ml
		A			
Tularemia	<i>Francisella tularensis</i>	Real-time	20	39-42	10 copies/reaction
		fluorescence RPA			
		Electrochemical	60	37	500 fM
		RPA			
Lyme disease	<i>Borrelia burgdorferi</i>	LF-RPA	30	37	25 copies/reaction
Viral zoonoses					
Rabies	Rabies virus	Direct RPA	20	42	562
					copies/reaction
		Real-time	15	42	4 copies/reaction
		fluorescence RPA			
Avian influenza	Influenza A virus	LF-RPA	20	30-42	0.15 pg
		Real-time			

		fluorescence RPA	copies/reaction		
Ebola disease	Ebola				
	Ebola virus	LF-RPA	40	37	134 copies/ μl
Dengue fever	Dengue virus	LF-RPA	23	37	10 copies/ μl
		Real-time			14-241
			20	38	
		fluorescence RPA			copies/reaction
Zika fever	Zika	Real-time			
	Zika virus		20	41	5 copies/reaction
		fluorescence RPA			
West Nile fever	West	Real-time			
	West Nile virus		15	39	10 copies/reaction
		fluorescence RPA			
SARS	SARS coronavirus	LF-RPA	45	42	35.4 copies/ μl
		Real-time			7.74
			20	42	
		fluorescence RPA			copies/reaction
		CRISPR/Cas-RP			1-10
			50	37	
		A			copies/reaction
		Ligation-RPA	30	37	10 copies/reaction
		RPA/rkDNA-gra			
			96	37	6.0 aM
		phene oxide probing			

3.1 RPA-LF

The majority of end-point RPA detection methods reported to date rely on lateral flow assays, for the results can be obtained extremely rapidly in a visual read-out format. Lateral flow chromatography test strips are mainly used as simple devices for qualitative and semi-quantitative detection, and are suitable to be used in resource-limited or non-laboratory environments [59]. RPA-LF is based on the principle of RPA amplification, using biotin-labeled primers and carboxyfluorescein (FAM)-labeled probes for amplification reaction with target nucleic acid, and the final amplified product carries both FAM and biotin labels. The detection line of the lateral flow test strip contains streptavidin. When the FAM on the amplicon binds to the gold-labelled-anti-FAM antibody in the sample pad, an immune complex is formed. The immune complex will undergo chromatographic diffusion on the strip. The streptavidin on the detection line can capture the immune complex containing the biotin amplicon and develop color [60]. In addition, multiplex lateral flow strips have been developed, like PCRD Nucleic Acid Detector cassette (Abingdon Health, UK), which has two detection lines that can detect FAM/Biotin and DIG/Biotin labelled amplicons, respectively. This allows detection of various pathogens in the same tube as well as introduction of the internal control, which has been reported in detection of three *Anaplasma* species [61].

The limit of detection (LOD) of RPA-LF can be as low as 1 to 10

copies/ reaction in detection of zoonotic pathogens. Wu et al. established RPA-LF for detection *Toxoplasma gondii* with a LOD of 0.1 oocyst/ reaction, which was 10 times higher than the sensitivity of nested PCR [62]. Shi et al. used this method to detect avian influenza A virus (H7N9) with a LOD of 32fg nucleic acid sample, and without cross-reaction with other subtypes of influenza viruses [55]. Alka Rani et al. presented a rapid, sensitive, specific and portable method to detect *rfbE*, *fliC* and *stx* genes of *Escherichia coli* O157:H7, with LODs being as low as 4-5 CFU/mL, 10^1 CFU/mL and 10^2 CFU/mL, respectively, in 8 minutes at the temperature between 37 and 42 °C [53].

The RPA-LF is also used in the detection of other various zoonotic parasites, bacteria, rickettsia, and virus, such as *Trypanosoma cruzi*, *Brucella* spp., *Burkholderia mallei*, *Chlamydia trachomatis*, *Orientia tsutsugamushi*, *Rickettsia typhi*, *Coxiella burnetii*, *Borrelia burgdorferi*, Newcastle disease virus (NDV), Dengue virus (DENV) , Orf virus, Human Adenovirus, SARS-CoV-2, et al. [19, 20, 22, 28, 49, 52, 53, 57, 63-71].

RPA-LF detection can be performed around 20 minutes at 25-45°C. Therefore, some simple heating equipment, such as electric water heaters or even body temperature can be used to achieve accurate detection. The RPA-LF test results show a red band on the strip, which can be observed with the naked eyes. Even non-professionals can directly observe the analysis results. It is very suitable for on-site detection, especially in areas with poor economic conditions and insufficient resources [49, 72].

However, LF assays, with insufficient accuracy and stability, are not suitable for quantitative analysis in clinical applications [73]. Also, during the color development procedure of strips, lid of the reaction tube needs to be open, and it is very easy to cause environmental pollution and produce false positive in the following detections. Currently, many efforts have been used to address this deficiency. Among them, microfluidic technology has shown great advantages, it could integrate the RT-RPA and universal lateral flow detection system into a single chip. It only needs simple nucleic acid extraction, loading and incubation for nearly 30min to obtain the results. This MI-IF-RPA detection method is rapid and sensitive and effectively decreases the risk of contamination[74].

3.2 Real-time fluorescence RPA

As of PCR, the results of RPA amplification can be monitored by real-time fluorescence [75]. Fluorophore Dyes, such as SYBR Green and Eva Green can be employed for real time detection[76, 77]. However, these dyes cannot distinguish between amplicons and primer dimers, which can lead to false positive results. Therefore, specific probes are preferred to be used in the RPA reaction, including Exo probe and Fpg probe, named after the enzymes introduced [75, 78]. The Exo probe carries a fluorescence group and a fluorescence quenching group, which are respectively combined with a thymine, separated by a tetrahydrofuran (THF) base [79]. During the process of RPA amplification, the DNA repair enzyme Exonuclease III will cut off the tetrahydrofuran (THF) in the Exo-probe, leading to the separation of the fluorescence group and the

fluorescence quenching group, and thus facilitating the generation of fluorescence to be monitored.

Generally, real-time fluorescence RPA takes less time to complete the detection than RPA-LF. Also, the lids of the reaction tubes do not need to be open, which reduces the risk of contamination during operations. The only disadvantage of this method is that a thermostatic fluorescence detection instrument is needed, which may limit its ease of use. The low reaction temperature shows an advantage for miniaturization since it needs much less energy input and is therefore better candidate for battery driven hand-held devices [12]. So, researchers have tried to design and produce simple portable fluorescent reader [80, 81].

In detecting zoonotic pathogens, ultrasensitive real-time fluorescence RPA methods have been established. The LOD in detecting kinetoplast minicircle DNA of *Leishmania donovani* [80], CeuE gene of *Campylobacter jejuni* [82], hipO gene of *Campylobacter coli* [82], and 18S RNA gene of *Plasmodium knowlesi* [83] can be as low as 1 cell/reaction, 1 CFU/ml, 1 CFU/ml, and 1 plasmid/reaction, respectively.

Based on the real-time fluorescence RPA, Milena Euler et al. developed 10 detection methods towards 8 zoonotic pathogens, which are also biothreat agents, including *Francisella tularensis*, *Yersinia pestis*, *Bacillus anthracis*, and variola virus using RPA assays, and Rift Valley fever virus, Ebola virus, Sudan virus, and Marburg virus using reverse transcriptase RPA (RT-RPA) assays [12]. Their analytical sensitivities ranged from 16 to 21 molecules detected and the detection time ranged

from 4 to 10 min, which showed a detection performance better to PCR, real-time PCR or LAMP [12].

In addition, other zoonotic pathogens, for which the real-time fluorescence RPA detection method has successfully implemented, include *Streptococcus suis* serotype 2 (SS2), *Mycobacterium tuberculosis*, *Rickettsia* spp., Yellow fever virus, dengue virus types 1-4, Orf virus, Rabies virus, Avian influenza virus, Hepatitis E virus (HEV), Chikungunya virus (CHIKV), Crimean-Congo Hemorrhagic fever virus (CCHFV), Zika virus, Highly pathogenic porcine reproductive and respiratory syndrome virus (HP-PRRSV), SARS-CoV-2, etc [30, 48, 81, 84-94].

Nowadays, since various detection methods towards single zoonotic pathogen have been established, integrating multiple methods to make multiplex detection reagents or devices is one of the development trends of fluorescence RPA method. Researchers have tried to integrate multiple methods into microfluidic chip to detect dozens of pathogens simultaneously [95, 96]. Also, when detecting zoonotic pathogens in the field, a mobile suitcase laboratory is necessary and has been applied in several studies [80, 81, 90, 97].

3.3 CRISPR/Cas-RPA detection

One of the constraints of isothermal amplification is that single-nucleotide polymorphisms (SNPs), which are crucial in both pathogen and disease detection, cannot always be discriminated [47, 98]. Recently a new molecular diagnostic tool based on CRISPR/Cas system

has been developed and can overcome this weakness [33]. The origin of CRISPR based detection lies in the discovery of the collateral cleavage activity of protein Cas13a. When Cas13a is associated with a CRISPR RNA (crRNA), this crRNA can specifically complement with a target sequence, inducing enzymatic cleavage of both the targeted sequence and untargeted collateral cleavage of all single stranded RNA (ssRNA)[99]. Then a comprehensive and applicable CRISPR system named SHERLOCK, which combined the CRISPR/Cas system with RPA, was developed [33], relying on the collateral trans-cleavage of quenched fluorescent nucleotides after target binding. Over the years, other Cas proteins, including Cas9, Cas12, and Cas14, has also proven to work for DNA or RNA sensing with high sensitivity and selectivity [47]. Myhrvold et al. developed "SHERLOCK" as "HUDSON" technology to detect viruses directly from body fluids [100]. Chen et al. used Cas12a collateral trans-cleavage and isothermal amplification to develop the "DETECTR" method [101], which achieved amol/L sensitivity for DNA detection. Li et al. developed a highly sensitive nucleic acid detection method "HOLMES" using Cas12a and ssDNA fluorescence probe, which is used for rapid detection of DNA and RNA viruses with a sensitivity as low as 1-10 amol/L [102].

Nowadays, though signal amplification has been improved by introducing spherical nucleic acid (SNA) reporter or multiple crRNA [103, 104], the sensitivity still cannot meet the requirement of clinical detection and is not suitable for application without a nucleotide

amplification procedure. In order to amplify the signal and improve the detection sensitivity, CRISPR/Cas diagnostic technology is usually combined with NAA technology, such as PCR, LAMP, and RPA. Compared with other NAA assays, RPA has inherent advantage in cooperating with CRISPR/Cas system, because they share the similar reaction temperature around 37°C. Based on this feature, All-In-One Dual CRISPR-Cas12a (AIOD-CRISPR) assay for one-pot, ultrasensitive, and visual SARS-CoV-2 detection has been developed [105, 106], in which, the components for both RPA and CRISPR-based detection were prepared in one-pot, completely circumventing the separate pre-amplification of target nucleic acids [101], or physical separation of Cas enzyme [107].

In detection of other zoonotic pathogens, to our knowledge, only limited studies have been conducted based on CRISPR/Cas12a or CRISPR/Cas13a, towards bacteria or viruses like *Leptospira*, *Salmonella* spp., Zika virus, dengue virus, avian influenza A (H7N9) virus, influenza A virus, influenza B virus, and rabies virus [100, 108-111].

The limited use of this technology in detection zoonotic pathogens may account for the short development time. Also, compared with RPA-LF and real-time fluorescence RPA, CRISPR/Cas-RPA detection uses extra labelled ssDNA or ssRNA reporter for collateral cleavage, which may increase the cost. The advantage of the CRISPR/Cas-RPA detection method in discriminating SNPs may become a disadvantage when there is a mutation in the target sequence in clinical application,

which focuses on disease diagnosis rather than typing. Anyway, as a novel and promising detection method, more studies are needed in application of zoonotic pathogen detection.

3.4 Electrochemical RPA

Electrochemical RPA detection relies on the rapid isothermal amplification of target pathogen DNA sequences by RPA followed by gold nanoparticle-based electrochemical assessment with differential pulse voltammetry. It couples RPA and electrochemistry on disposable screen printed carbon electrodes, and electrochemically active substances are used to generate signals related to nucleic acid amplification [112]. and is capable making the.

In detection of zoonotic pathogens, a rapid electrochemical detection method for *Mycobacterium tuberculosis* based on colloidal gold nanoparticles has been reported with LOD as low as 1 CFU [113]. Jonathan Sabaté del Ró et al. constructed an electrochemical platform with a lowered LOD of 1×10^{-15} M and conducted on *Francisella tularensis* detection [51]. Also, the electrochemical RPA in detection of SARS-CoV-2 using human body temperature was established and performed LOD slightly lower than or comparable to that of RPA assay results obtained by gel electrophoresis without post-amplification purification [114]. The method usually uses a solid phase and needs a handheld device for electrochemical measurement in the on-site detection. The solid-phase RPA approach, on one hand, allows integrating DNA amplification, hybridisation and detection on a platform, thus reducing

analysis time and contamination, which paves the road to on-site testing, on the other hand, leads to lower amplification efficiency than in solution due to the steric hindrance effect on various components in the amplification system [115]. However, the electrochemical RPA is still incipient, and more work is required for improving its performance and capabilities [115].

3.5 Other methods coupled with RPA

Some other different detection methods coupled with RPA, have been reported to be applied in zoonotic pathogen detection, including flocculation assay, chemiluminescent, and silicon microring resonator (SMR)-based photonic [16].

Flocculation analysis detection is based on the phenomenon of colloidal chemical bridging flocculation. The flocculation assay detection was first combined with RPA assay by Wee EJ, in which, in positive results, RPA amplicons on the magnetic bead surfaces cross-linked multiple other RPA-magnetic bead conjugates, causing a sharp transition from solution phase to flocculate[116]. The transition can be judged by naked eyes. The method was subsequently extended to detect zoonotic pathogens like malaria parasites, *Mycobacterium tuberculosis*, and influenza virus H1N1[116, 117].

The chemiluminescent detection converts chemical energy into the emission of visible light as the result of an oxidation or hydrolysis reaction [16]. The RPA assay coupled with chemiluminescent detection method for some zoonotic pathogens, including HAdV 41, *Legionella* spp.

and *Legionella pneumophila* have been applied on flow-based microarrays [118, 119]. It's suitable for multiplex detection by immobilizing one of the two primers from different pathogens on one chip for asymmetric amplification. However, the procedure is tedious and a little time-consuming, which may limit its use in the field and source-limited regions.

As of the chemiluminescent detection, SMR-based photonic detection also involves performing nucleic acid amplification in an asymmetric manner. One of the primers is pre-immobilized on the SMR, and the binding of nucleic acids to pre-immobilized primers will induce changes in the refractive index proximal to the waveguide surface, which can be monitored in real-time on the SMR. The applications on detection of zoonotic pathogens including *M. tuberculosis* and *F. tularensis*, have proven the SMR-RPA detection is an alternative detection method for fluorophore-based real-time detection, yet is label-free and much more sensitive [120, 121].

Table 3 Comparison of each RPA types

RPA types	Advantages	Disadvantages
RPA-LF	1. Results can be obtained extremely rapidly in a visual read-out format; 2. Testing equipment is simple and suitable for resource-limited or non-laboratory environments.	1. Insufficient accuracy and stability; 2. It is very easy to cause environmental pollution and produce false positive.
Real-time fluorescence RPA	1. Shorter detection time; 2. Closed reaction tubes reduces the risk of contamination during operations;	The thermostatic fluorescence detection instrument limits its ease of use.

CRISPR/Cas-RPA	1. The limit of detection (LOD) is very low;	
	2.The components of the CRISPR and RPA assays have similar reaction temperature(37 °C), and can be reacted in one tube..	1. Long detection time; 2. Extra labelled ssDNA or ssRNA reporter increases the cost.
Electrochemical RPA	Solid phase reaction allows integrating amplification, hybridisation and detection on a platform, reducing analysis time and contamination.	
		Solid phase reaction leads to lower amplification efficiency

3.6 Applications of RPA in SARS-CoV-2 detection

Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2)

has become a serious public health concern in recent years[122, 123]. As there are numerous asymptomatic infected patients, the total number of infections remains unclear[124]. The development of sensitive, rapid, specific and cost-effective detection methods has never been more important. RPA has been widely used for the detection of SARS-CoV-2 viral RNA in clinical samples[71, 97, 125]. Combine with the lateral flow assays, reverse transcriptase recombinase polymerase amplification can complete the detection of pathogen nucleic acids within 20min and the detection limit can be as low as 7.659 copies/ μ L RNA[69]. Utilizing a microfluidic chip that integrates RT-RPA and universal lateral flow, the

detection limit can be increased to 1 copy per/ μ l, with an incubation time of approximately 30 minutes[74].

CRISPR-Cas system has recently been used to sensitively detect nucleic acids, and Numerous CRISPR-Cas-RPA detection systems have been developed[125-128]. Most of these studies are based on combination of CRISPR/Cas12a and RT-RPA, with introduction of fluorescence probe for fluorescence readout or gold nanoparticles (AuNPs) for colorimetric readout [31, 122, 126, 127, 129-132]. For example, the technique of the CRISPR–Cas12-based assay combine with the DNA-modified gold nanoparticles (AuNPs) has been developed, making the detection limit to 1 copy of viral genome sequence per test. But the detection time has been increased to 50 minutes, of which 30 minutes were used for colorimetric readings[122, 126, 127]. Two separate scientific teams combined CRISPR/Cas9, LF assay, and RT-RPA technology as a platform for visual detection of SARS-CoV-2, providing an accurate and convenient pathway for diagnosis of COVID-19 or other infectious diseases in resource-limited regions [128, 133]. Few studies are based on CRISPR/Cas13a, in which, an extra transcription step is needed

and may elongate the detection time. Arizti-Sanz J et al. identified the optimal conditions to allow Cas13-based detection and RPA to occur in a single step and developed a sensitive and specific diagnostic tool that can detect SARS-CoV-2 RNA from unextracted samples, with a sample-to-answer time of 50 min [134]. Moreover, Tian T. et al. designed a system using both Cas12a and Cas13a for dual-gene detection, in which, dual-gene amplified products from the multiplex RPA were simultaneously detected by Cas12a and Cas13a assay in a single tube [135].

In addition to LF assay and CRISPR-Cas system, many other detection techniques have been combined with the RPA. Pei Wang et al. established a ligation and recombinase polymerase amplification method (L/RPA). Using the high concentration of T4 DNA ligase, this method achieved a satisfactory sensitivity of 10 copies per reaction within 30 min[136]. Furthermore, Moon H.C. et al. combined an rkDNA-graphene oxide (GO) probe system with RPA and developed a rapid detection method exhibiting extremely high sensitivity (LOD 6.0 aM)[137].

At present, with the continuous development of the SARS-CoV-2

epidemic, research on rapid and sensitive detection of SARS-CoV-2 virus is still a development focus.

4. Conclusions and future perspectives

In recent years, the existence and prevalence of zoonosis in the world have caused great economic losses, and also seriously threatened the health and life safety of the people. Traditional detection technologies can no longer meet the detection requirements of zoonotic pathogens, so it is necessary to establish rapid, sensitive, specific, and multiplex detection methods. As an emerging molecular detection technology, RPA assay has not only been widely used in medicine and pharmacy, but also has begun to emerge in the detection of zoonotic pathogens. RPA assay has many technical advantages: it does not require thermal cycling, and the reaction can be completed at lower temperature of 37 to 42 °C; the reaction is fast with amplification time from 5 to 20 min; it is convenient to carry, and the combination of RPA and LF, fluorescence, CRISPR/Cas system, and other technologies have been realized. Since the pandemic of SARS-CoV-2, RPA technology has performed crucial role in rapid detection of the pathogen.

However, RPA assay is novel and has not been as widespread or popular as PCR method in detection of zoonotic pathogens, though it has developed faster since the pandemic of SARS-CoV-2. Considering that RPA has the advantage of being naturally suitable for on-site test, more attention is needed for integrating sample preparation with the RPA

detection, resulting in fast “sample-to-result”, which would largely facilitate a complete RPA assay for on-site or field application. Multiplex and high-throughput detection is another research and application direction for zoonotic pathogen detection, and in this respect, combination of microfluid or microarray technology with RPA assay is a good prospect. Also, as the viewpoint of Jia Li et al. [16], developing wearable sensors and performing a fast RPA assay using people’s body temperature to detect potential zoonotic pathogens could revolutionize RPA diagnostics to be a self-testing. Anyway, with its continuous fast development, it is believed that RPA will play a more important role in the prevention and control of zoonotic diseases in the near future, especially in mobile and point-of-care applications.

References

1. Saiki RK, Bugawan TL, Horn GT, Mullis KB, Erlich HA: Analysis of enzymatically amplified beta-globin and HLA-DQ alpha DNA with allele-specific oligonucleotide probes. *Nature* 1986, 324(6093):163-166.
2. Craw P, Balachandran W: Isothermal nucleic acid amplification technologies for point-of-care diagnostics: a critical review. *Lab on A Chip* 2012, 12(14):2469-2486.
3. Deng H, Gao Z: Bioanalytical applications of isothermal nucleic acid amplification techniques. *Analytica Chimica Acta* 2015, 853:30-45.
4. Lei Y, Jie Z, Yue Z, Garrison AS, Roembke BT, Nakayama S, Sintim HO: Isothermal amplified detection of DNA and RNA. *Molecular Biosystems* 2014, 10(5):970-1003.
5. Li J, Macdonald J: Advances in isothermal amplification: novel strategies inspired by biological processes. *Biosensors and Bioelectronics* 2015, 64:196-211.

6. Zhao Y, Chen F, Li Q, Wang L, Fan C: Isothermal Amplification of Nucleic Acids. *Chemical Reviews* 2015, 115(22):12491.
7. Piepenburg O, Williams CH, Stemple DL, Armes NA: DNA Detection Using Recombination Proteins. *Plos Biology* 2006, 4(7):1115-1121.
8. Euler M, Wang Y, Otto P, Tomaso H, Weidmann M: Recombinase Polymerase Amplification Assay for Rapid Detection of *Francisella tularensis*. *Journal of Clinical Microbiology* 2012, 50(7):2234-2238.
9. Kojima K, Juma KM, Akagi S, Hayashi K, Yasukawa K: Solvent engineering studies on recombinase polymerase amplification. *Journal of Bioscience and Bioengineering* 2020, 131(2).
10. Mcquillan JS, Wilson MW: Recombinase Polymerase Amplification for Fast, Selective, DNA-based Detection of Faecal Indicator *Escherichia coli*. *Letters in Applied Microbiology* 2020.
11. Eugene, Wee, Thu, Ha, Ngo, Matt, Trau: Colorimetric detection of both total genomic and loci-specific DNA methylation from limited DNA inputs. *Clinical Epigenetics* 2015.
12. Euler M, Wang Y, Heidenreich D, Patel P, Strohmeier O: Development of a Panel of Recombinase Polymerase Amplification Assays for Detection of Biothreat Agents. *Journal of Clinical Microbiology* 2013, 51.
13. Mekuria TA, Zhang S, Eastwell KC: Rapid and sensitive detection of Little cherry virus 2 using isothermal reverse transcription-recombinase polymerase amplification. *Journal of Virological Methods* 2014, 205:24-30.
14. Wee EJH, Trau M: Simple Isothermal Strategy for Multiplexed, Rapid, Sensitive, and Accurate miRNA Detection. *Acs Sensors* 2016:670-675.
15. Wang, Jianchang, Jinfeng, Geng, Yunyun, Yuan, Wanzhe: A recombinase polymerase amplification-based assay for rapid detection of African swine fever virus. *Canadian Journal of Veterinary Research* 2017.
16. Li J, Macdonald J, Stetten FV: Review: a comprehensive summary of a decade development of the recombinase polymerase amplification. *Analyst* 2019.
17. A ME, B YW, C ON, C OP, A FTH, A MW: Recombinase polymerase amplification assay for rapid detection of Rift Valley fever virus. *Journal of Clinical Virology* 2012, 54(4):308-312.
18. Jarvi SI, Atkinson ES, Kaluna LM, Snook KA, Steel A: Development of a recombinase polymerase amplification (RPA-EXO) and lateral flow assay (RPA-LFA) based on the ITS1 gene for the detection of *Angiostrongylus*

cantonensis in gastropod intermediate hosts. *Parasitology* 2021, 148(2):251-258.

19. Qi Y, Yin Q, Shao Y, Cao M, Li S, Chen H, Shen W, Rao J, Li J, Li X *et al*. Development of a rapid and visual nucleotide detection method for a Chinese epidemic strain of *Orientia tsutsugamushi* based on recombinase polymerase amplification assay and lateral flow test. *Int J Infect Dis* 2018, 70:42-50.

20. Qi Y, Li W, Li X, Shen W, Zhang J, Li J, Lv R, Lu N, Zong L, Zhuang S *et al*. Development of Rapid and Visual Nucleic Acid Detection Methods towards Four Serotypes of Human Adenovirus Species B Based on RPA-LF Test. *Biomed Res Int* 2021, 2021:9957747.

21. Qi Y, Shao Y, Rao J, Shen W, Yin Q, Li X, Chen H, Li J, Zeng W, Zheng S *et al*. Development of a rapid and visual detection method for *Rickettsia rickettsii* combining recombinase polymerase assay with lateral flow test. *PLoS One* 2018, 13(11):e0207811.

22. Qi Y, Yin Q, Shao Y, Li S, Chen H, Shen W, Rao J, Li J, Li X, Sun Y *et al*. Rapid and Visual Detection of *Coxiella burnetii* Using Recombinase Polymerase Amplification Combined with Lateral Flow Strips. *Biomed Res Int* 2018, 2018:6417354.

23. Kersting S, Rausch V, Bier F, Nickisch-Rosenegk MV: Rapid detection of *Plasmodium falciparum* with isothermal recombinase polymerase amplification and lateral flow analysis. *Malaria Journal* 2014, 13(1):1-9.

24. Dilip C, Sudakshina P, Mathew P, Yelena D, Jennifer KS, Tim P, Mittanck DW, Manali S, Glenn KC, Olaf P: Development of a Rapid Point-of-Use DNA Test for the Screening of Genuity Roundup Ready 2 Yield Soybean in Seed Samples. *Biomed Research International* 2016, 2016:3145921.

25. Fuller SL, Savory E, Weisberg AJ, Buser JZ, Gordon MI, Putnam M, Chang JH: Isothermal Amplification and Lateral-Flow Assay for Detecting Crown-Gall-Causing *Agrobacterium* spp. *Phytopathology* 2017:PHYTO04170144R.

26. Lorraine L, Dara L, Singhal MC, Jason C, Jered S, Paul L, Anthony T, Olaf P, Mathew P, Robert W: Non-Instrumented Incubation of a Recombinase Polymerase Amplification Assay for the Rapid and Sensitive Detection of Proviral HIV-1 DNA. *Plos One* 2014, 9(9):e108189.

27. Xia X, Yu Y, Weidmann M, Pan Y, Wang Y: Rapid Detection of Shrimp White Spot Syndrome Virus by Real Time, Isothermal Recombinase Polymerase Amplification Assay. *PLoS ONE* 2014, 9(8):e104667-e104667.

28. Chao CC, Belinskaya T, Zhang Z, Ching WM: Development of Recombinase Polymerase Amplification Assays for Detection of *Orientia tsutsugamushi* or *Rickettsia typhi*. *PLoS Negl Trop Dis* 2015, 9(7):e0003884.
29. Wang J, Wang J, Li R, Liu L, Yuan W: Rapid and sensitive detection of canine distemper virus by real-time reverse transcription recombinase polymerase amplification. *Bmc Veterinary Research* 2017, 13(1):241.
30. Ole B, Iris B, Martin S, Marina S, Ahmed A, Gerhard D, Gregory D, Hufert FT: Rapid Detection of SARS-CoV-2 by Low Volume Real-Time Single Tube Reverse Transcription Recombinase Polymerase Amplification Using an Exo Probe with an Internally Linked Quencher (Exo-IQ). *Clinical Chemistry* 2020(8):8.
31. Feng W, Peng H, Xu J, Liu Y, Le XC: Integrating Reverse Transcription Recombinase Polymerase Amplification with CRISPR Technology for the One-Tube Assay of RNA. *Analytical Chemistry* 2021, 93(37).
32. Lalremruata A, Nguyen TT, McCall MBB, Mombo-Ngoma G, Agnandji ST, Adegnikaa AA, Lell B, Ramharter M, Hoffman SL, Kremsner PG *et al*: Recombinase Polymerase Amplification and Lateral Flow Assay for Ultrasensitive Detection of Low-Density *Plasmodium falciparum* Infection from Controlled Human Malaria Infection Studies and Naturally Acquired Infections. *J Clin Microbiol* 2020, 58(5).
33. Gootenberg JS, Abudayyeh OO, Lee JW, Essletzbichler P, Dy AJ, Joung J, Verdine V, Donghia N, Daringer NM, Freije CA *et al*: Nucleic acid detection with CRISPR-Cas13a/C2c2. *Science* 2017, 356(6336):438-442.
34. McCoy AG, Miles TD, Bilodeau GJ, Woods P, Blomquist C, Martin FN, Chilvers MI: Validation of a Preformulated, Field Deployable, Recombinase Polymerase Amplification Assay for *Phytophthora* Species. *Plants* 2020, 9(4).
35. Rohrman BA, Richards-Kortum RR: A paper and plastic device for performing recombinase polymerase amplification of HIV DNA. *Lab on A Chip* 2012, 12(17):3082-3088.
36. Ma B, Li J, Chen K, Yu X, Sun C, Zhang M: Multiplex Recombinase Polymerase Amplification Assay for the Simultaneous Detection of Three Foodborne Pathogens in Seafood. *Foods* 2020, 9(3).
37. Frimpong M, Simpson SV, Ahor HS, Agbanyo A, Phillips RO: Multiplex Recombinase Polymerase Amplification Assay for Simultaneous Detection of *Treponema pallidum* and *Haemophilus ducreyi* in yaws-like lesions. 2020.
38. Tsai SK, Chen CC, Lin HJ, Lin HY, Chen TT, Wang LC: Combination of

multiplex reverse transcription recombinase polymerase amplification assay and capillary electrophoresis provides high sensitive and high-throughput simultaneous detection of avian influenza virus subtypes. *Journal of veterinary science* 2020, 21(2):e24.

39. Cross AR, Baldwin VM, Roy S, Essex-Lopresti AE, Prior JL, Harmer NJ: Zoonoses under our noses. *Microbes and infection* 2019, 21(1):10-19.

40. Taylor LH, Latham SM, Woolhouse ME: Risk factors for human disease emergence. *Philosophical transactions of the Royal Society of London Series B, Biological sciences* 2001, 356(1411):983-989.

41. Fasanella A, Galante D, Garofolo G, Jones MH: Anthrax undervalued zoonosis. *Veterinary microbiology* 2010, 140(3-4):318-331.

42. Mortimer PP: Influenza: the centennial of a zoonosis. *Reviews in medical virology* 2019, 29(1):e2030.

43. Wilde H, Hemachudha T, Wacharapluesadee S, Lumlertdacha B, Tepsumethanon V: Rabies in Asia: the classical zoonosis. *Current topics in microbiology and immunology* 2013, 365:185-203.

44. Gebreyes WA, Dupouy-Camet J, Newport MJ, Oliveira CJ, Schlesinger LS, Saif YM, Kariuki S, Saif LJ, Saville W, Wittum T *et al*. The global one health paradigm: challenges and opportunities for tackling infectious diseases at the human, animal, and environment interface in low-resource settings. *PLoS neglected tropical diseases* 2014, 8(11):e3257.

45. Cascio A, Bosilkovski M, Rodriguez-Morales AJ, Pappas G: The socio-ecology of zoonotic infections. *Clinical microbiology and infection : the official publication of the European Society of Clinical Microbiology and Infectious Diseases* 2011, 17(3):336-342.

46. Bennett R, Ijpelaar J: Updated Estimates of the Costs Associated with Thirty Four Endemic Livestock Diseases in Great Britain: A Note. *Journal of Agricultural Economics* 2010, 56(1):135-144.

47. van Dongen JE, Berendsen JTW, Steenbergen RDM, Wolthuis RMF, Eijkel JCT, Segerink LI: Point-of-care CRISPR/Cas nucleic acid detection: Recent advances, challenges and opportunities. *Biosens Bioelectron* 2020, 166:112445.

48. Xu Y, Wu P, Zhang H, Li J: Rapid detection of Mycobacterium tuberculosis based on antigen 85B via real-time recombinase polymerase amplification. *Letters in applied microbiology* 2021, 72(2):106-112.

49. Gumaa MM, Cao X, Li Z, Lou Z, Zhang N, Zhang Z, Zhou J, Fu B: Establishment of a recombinase polymerase amplification (RPA) assay for the

detection of *Brucella* spp. Infection. *Molecular and cellular probes* 2019, 47:101434.

50. Chen G, Lyu Y, Wang D, Zhu L, Cao S, Pan C, Feng E, Zhang W, Liu X, Cui Y *et al.* Obtaining Specific Sequence Tags for *Yersinia pestis* and Visually Detecting Them Using the CRISPR-Cas12a System. *Pathogens* 2021, 10(5).

51. Del Rio JS, Lobato IM, Mayboroda O, Katakis I, O'Sullivan CK: Enhanced solid-phase recombinase polymerase amplification and electrochemical detection. *Analytical and bioanalytical chemistry* 2017, 409(12):3261-3269.

52. Liu W, Liu HX, Zhang L, Hou XX, Wan KL, Hao Q: A Novel Isothermal Assay of *Borrelia burgdorferi* by Recombinase Polymerase Amplification with Lateral Flow Detection. *International journal of molecular sciences* 2016, 17(8).

53. Rani A, Ravindran VB, Surapaneni A, Shahsavari E, Haleyr N, Mantri N, Ball AS: Evaluation and comparison of recombinase polymerase amplification coupled with lateral-flow bioassay for *Escherichia coli* O157:H7 detection using different genes. *Scientific reports* 2021, 11(1):1881.

54. Faye M, Abd El Wahed A, Faye O, Kissenkotter J, Hoffmann B, Sall AA, Faye O: A recombinase polymerase amplification assay for rapid detection of rabies virus. *Scientific reports* 2021, 11(1):3131.

55. Ma S, Li X, Peng B, Wu W, Wang X, Liu H, Yuan L, Fang S, Lu J: Rapid Detection of Avian Influenza A Virus (H7N9) by Lateral Flow Dipstick Recombinase Polymerase Amplification. *Biological & pharmaceutical bulletin* 2018, 41(12):1804-1808.

56. Yang M, Ke Y, Wang X, Ren H, Liu W, Lu H, Zhang W, Liu S, Chang G, Tian S *et al.* Development and Evaluation of a Rapid and Sensitive EBOV-RPA Test for Rapid Diagnosis of Ebola Virus Disease. *Scientific reports* 2016, 6:26943.

57. Xi Y, Xu CZ, Xie ZZ, Zhu DL, Dong JM: Rapid and visual detection of dengue virus using recombinase polymerase amplification method combined with lateral flow dipstick. *Molecular and cellular probes* 2019, 46:101413.

58. Vasileva Wand NI, Bonney LC, Watson RJ, Graham V, Hewson R: Point-of-care diagnostic assay for the detection of Zika virus using the recombinase polymerase amplification method. *The Journal of general virology* 2018, 99(8):1012-1026.

59. Posthuma-Trumpie GA, Korf J, Amerongen AV: Lateral flow (immuno)assay: its strengths, weaknesses, opportunities and threats. A literature survey. *Analytical and bioanalytical chemistry* 2009, 393(2):569-582.

60. Cordray MS, Richards-Kortum RR: A paper and plastic device for the combined isothermal amplification and lateral flow detection of Plasmodium DNA. *Malar J* 2015, 14:472.
61. Salazar A, Ochoa-Corona FM, Talley JL, Noden BH: Recombinase polymerase amplification (RPA) with lateral flow detection for three Anaplasma species of importance to livestock health. *Sci Rep* 2021, 11(1):15962.
62. Wu YD, Xu MJ, Wang QQ, Zhou CX, Wang M, Zhu XQ, Zhou DH: Recombinase polymerase amplification (RPA) combined with lateral flow (LF) strip for detection of Toxoplasma gondii in the environment. *Vet Parasitol* 2017, 243:199-203.
63. Jimenez-Coello M, Shelite T, Castellanos-Gonzalez A, Saldarriaga O, Rivero R, Ortega-Pacheco A, Acevedo-Arcique C, Amaya-Guardia K, Garg N, Melby P *et al.* Efficacy of Recombinase Polymerase Amplification to Diagnose Trypanosoma cruzi Infection in Dogs with Cardiac Alterations from an Endemic Area of Mexico. *Vector borne and zoonotic diseases* 2018, 18(8):417-423.
64. Saxena A, Pal V, Tripathi NK, Goel AK: Development of a rapid and sensitive recombinase polymerase amplification-lateral flow assay for detection of Burkholderia mallei. *Transbound Emerg Dis* 2019, 66(2):1016-1022.
65. Castellanos-Gonzalez A, Saldarriaga OA, Tartaglino L, Gacek R, Temple E, Sparks H, Melby PC, Travi BL: A Novel Molecular Test to Diagnose Canine Visceral Leishmaniasis at the Point of Care. *The American journal of tropical medicine and hygiene* 2015, 93(5):970-975.
66. El-Tholoth M, Branavan M, Naveenathayalan A, Balachandran W: Recombinase polymerase amplification-nucleic acid lateral flow immunoassays for Newcastle disease virus and infectious bronchitis virus detection. *Molecular biology reports* 2019, 46(6):6391-6397.
67. Krölov K, Frolova J, Tudoran O, Suhorutsenko J, Lehto T, Sibul H, Mäger I, Laanpere M, Tulp I, Langel Ü: Sensitive and rapid detection of Chlamydia trachomatis by recombinase polymerase amplification directly from urine samples. *J Mol Diagn* 2014, 16(1):127-135.
68. Yang Y, Qin X, Wang G, Jin J, Shang Y, Zhang Z: Development of an isothermal amplification-based assay for rapid visual detection of an Orf virus. *Virology* 2016, 13:46.
69. Lau YL, Ismail IB, Mustapa NIB, Lai MY, Tuan Soh TS, Haji Hassan A, Peariasamy KM, Lee YL, Abdul Kahar MKB, Chong J *et al.* Development of a reverse transcription recombinase polymerase amplification assay for rapid and

direct visual detection of Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2). *PLoS One* 2021, 16(1):e0245164.

70. Wang Z, Yang PP, Zhang YH, Tian KY, Bian CZ, Zhao J: Development of a reverse transcription recombinase polymerase amplification combined with lateral-flow dipstick assay for avian influenza H9N2 HA gene detection. *Transbound Emerg Dis* 2019, 66(1):546-551.

71. Shelite TR, Uscanga-Palomeque AC, Castellanos-Gonzalez A, Melby PC, Travi BL: Isothermal recombinase polymerase amplification-lateral flow detection of SARS-CoV-2, the etiological agent of COVID-19. *J Virol Methods* 2021, 296:114227.

72. Shelite TR, Bopp NE, Moncayo A, Reynolds ES, Thangamani S, Melby PC, Bloch K, Aguilar PV, Travi BL: Isothermal Recombinase Polymerase Amplification-Lateral Flow Point-of-Care Diagnostic Test for Heartland Virus. *Vector borne and zoonotic diseases* 2021, 21(2):110-115.

73. Kasetsirikul S, Shiddiky M, Nguyen NT: Challenges and perspectives in the development of paper-based lateral flow assays. *Microfluidics and nanofluidics* 2020, 24(2):17.11-17.18.

74. Liu D, Shen H, Zhang Y, Shen D, Zhu M, Song Y, Zhu Z, Yang C: A microfluidic-integrated lateral flow recombinase polymerase amplification (MI-IF-RPA) assay for rapid COVID-19 detection. *Lab Chip* 2021, 21(10):2019-2026.

75. Davi SD, Kissenkotter J, Faye M, Bohlken-Fascher S, Stahl-Hennig C, Faye O, Faye O, Sall AA, Weidmann M, Ademowo OG *et al.* Recombinase polymerase amplification assay for rapid detection of Monkeypox virus. *Diagnostic microbiology and infectious disease* 2019, 95(1):41-45.

76. Lai MY, Lau YL: Detection of Plasmodium knowlesi using recombinase polymerase amplification (RPA) combined with SYBR Green I. *Acta tropica* 2020, 208:105511.

77. Zhang S, Sun A, Wan B, Du Y, Wu Y, Zhang A, Jiang D, Ji P, Wei Z, Zhuang G *et al.* Development of a Directly Visualized Recombinase Polymerase Amplification-SYBR Green I Method for the Rapid Detection of African Swine Fever Virus. *Frontiers in microbiology* 2020, 11:602709.

78. Pang Y, Cong F, Zhang X, Li H, Chang YF, Xie Q, Lin W: A recombinase polymerase amplification-based assay for rapid detection of Chlamydia psittaci. *Poultry science* 2021, 100(2):585-591.

79. Wang JC, Liu LB, Han QA, Wang JF, Yuan WZ: An exo probe-based

recombinase polymerase amplification assay for the rapid detection of porcine parvovirus. *J Virol Methods* 2017, 248:145-147.

80. Mondal D, Ghosh P, Khan MA, Hossain F, Böhlken-Fascher S, Matlashewski G, Kroeger A, Olliaro P, Abd El Wahed A: Mobile suitcase laboratory for rapid detection of *Leishmania donovani* using recombinase polymerase amplification assay. *Parasit Vectors* 2016, 9(1):281.

81. Kissenkotter J, Hansen S, Bohlken-Fascher S, Ademowo OG, Oyinloye OE, Bakarey AS, Dobler G, Tappe D, Patel P, Czerny CP *et al.* Development of a pan-rickettsial molecular diagnostic test based on recombinase polymerase amplification assay. *Analytical biochemistry* 2018, 544:29-33.

82. Kim JY, Lee JL: Development of a multiplex real-time recombinase polymerase amplification (RPA) assay for rapid quantitative detection of *Campylobacter coli* and *jejuni* from eggs and chicken products. *Food Control* 2016:1247-1255.

83. Lai MY, Ooi CH, Lau YL: Rapid Detection of *Plasmodium knowlesi* by Isothermal Recombinase Polymerase Amplification Assay. *The American journal of tropical medicine and hygiene* 2017, 97(5):1597-1599.

84. Gao S, Wang J, Li D, Li Y, Lou C, Zha E, Yue X, Tiezhong Z: Development and evaluation of a time-saving RT-qRPA method for the detection of genotype 4 HEV presence in raw pork liver. *International journal of food microbiology* 2020, 322:108587.

85. Coertse J, Weyer J, Nel LH, Markotter W: Reverse transcription recombinase polymerase amplification assay for rapid detection of canine associated rabies virus in Africa. *PLoS One* 2019, 14(7):e0219292.

86. Wang S, Huang B, Ma X, Liu P, Wang Y, Zhang X, Zhu L, Fan Q, Sun Y, Wang K: Reverse-transcription recombinase-aided amplification assay for H7 subtype avian influenza virus. *Transbound Emerg Dis* 2020, 67(2):877-883.

87. Jiang X, Zhu L, Zhan D: Development of a recombinase polymerase amplification assay for rapid detection of *Streptococcus suis* type 2 in nasopharyngeal swab samples. *Diagnostic microbiology and infectious disease* 2021, 102(2):115594.

88. Patel P, Abd El Wahed A, Faye O, Prüger P, Kaiser M, Thaloengsok S, Ubol S, Sakuntabhai A, Leparac-Goffart I, Hufert FT *et al.* A Field-Deployable Reverse Transcription Recombinase Polymerase Amplification Assay for Rapid Detection of the Chikungunya Virus. *PLoS Negl Trop Dis* 2016, 10(9):e0004953.

89. Escadafal C, Faye O, Sall AA, Faye O, Weidmann M, Strohmeier O, von

Stetten F, Drexler J, Eberhard M, Niedrig M *et al*. Rapid molecular assays for the detection of yellow fever virus in low-resource settings. *PLoS Negl Trop Dis* 2014, 8(3):e2730.

90. Abd El Wahed A, Patel P, Faye O, Thaloengsok S, Heidenreich D, Matangkasombut P, Manopwisedjaroen K, Sakuntabhai A, Sall AA, Hufert FT *et al*. Recombinase Polymerase Amplification Assay for Rapid Diagnostics of Dengue Infection. *PLoS One* 2015, 10(6):e0129682.

91. Yang Y, Qin X, Wang G, Zhang Y, Shang Y, Zhang Z: Development of a fluorescent probe-based recombinase polymerase amplification assay for rapid detection of Orf virus. *Virol J* 2015, 12:206.

92. Yang Y, Qin X, Sun Y, Chen T, Zhang Z: Rapid detection of highly pathogenic porcine reproductive and respiratory syndrome virus by a fluorescent probe-based isothermal recombinase polymerase amplification assay. *Virus Genes* 2016, 52(6):883-886.

93. Bonney LC, Watson RJ, Afrough B, Mullojonova M, Dzhuraeva V, Tishkova F, Hewson R: A recombinase polymerase amplification assay for rapid detection of Crimean-Congo Haemorrhagic fever Virus infection. *PLoS Negl Trop Dis* 2017, 11(10):e0006013.

94. Tomar PS, Kumar S, Patel S, Kumar JS: Development and Evaluation of Real-Time Reverse Transcription Recombinase Polymerase Amplification Assay for Rapid and Sensitive Detection of West Nile Virus in Human Clinical Samples. *Frontiers in cellular and infection microbiology* 2020, 10:619071.

95. Lutz S, Weber P, Focke M, Faltin B, Hoffmann J, Müller C, Mark D, Roth G, Munday P, Armes N *et al*. Microfluidic lab-on-a-foil for nucleic acid analysis based on isothermal recombinase polymerase amplification (RPA). *Lab Chip* 2010, 10(7):887-893.

96. Renner LD, Zan J, Hu LI, Martinez M, Resto PJ, Siegel AC, Torres C, Hall SB, Slezak TR, Nguyen TH *et al*. Detection of ESKAPE Bacterial Pathogens at the Point of Care Using Isothermal DNA-Based Assays in a Portable Degas-Actuated Microfluidic Diagnostic Assay Platform. *Appl Environ Microbiol* 2017, 83(4).

97. El Wahed AA, Patel P, Maier M, Pietsch C, Ruster D, Bohlken-Fascher S, Kissenkotter J, Behrmann O, Frimpong M, Diagne MM *et al*. Suitcase Lab for Rapid Detection of SARS-CoV-2 Based on Recombinase Polymerase Amplification Assay. *Anal Chem* 2021, 93(4):2627-2634.

98. Zanolli LM, Spoto G: Isothermal amplification methods for the detection of nucleic acids in microfluidic devices. *Biosensors (Basel)* 2013,

3(1):18-43.

99. Abudayyeh OO, Gootenberg JS, Konermann S, Joung J, Slaymaker IM, Cox DB, Shmakov S, Makarova KS, Semenova E, Minakhin L *et al*: C2c2 is a single-component programmable RNA-guided RNA-targeting CRISPR effector. *Science* 2016, 353(6299):aaf5573.

100. Myhrvold C, Freije CA, Gootenberg JS, Abudayyeh OO, Metsky HC, Durbin AF, Kellner MJ, Tan AL, Paul LM, Parham LA *et al*: Field-deployable viral diagnostics using CRISPR-Cas13. *Science* 2018, 360(6387):444-448.

101. Chen JS, Ma E, Harrington LB, Da Costa M, Tian X, Palefsky JM, Doudna JA: CRISPR-Cas12a target binding unleashes indiscriminate single-stranded DNase activity. *Science* 2018, 360(6387):436-439.

102. Li SY, Cheng QX, Wang JM, Li XY, Zhang ZL, Gao S, Cao RB, Zhao GP, Wang J: CRISPR-Cas12a-assisted nucleic acid detection. *Cell Discov* 2018, 4:20.

103. Fu X, Shi Y, Peng F, Zhou M, Yin Y, Tan Y, Chen M, Yin X, Ke G, Zhang XB: Exploring the Trans-Cleavage Activity of CRISPR/Cas12a on Gold Nanoparticles for Stable and Sensitive Biosensing. *Anal Chem* 2021, 93(11):4967-4974.

104. Fozouni P, Son S, Díaz de León Derby M, Knott GJ, Gray CN, D'Ambrosio MV, Zhao C, Switz NA, Kumar GR, Stephens SI *et al*: Amplification-free detection of SARS-CoV-2 with CRISPR-Cas13a and mobile phone microscopy. *Cell* 2021, 184(2):323-333.e329.

105. Ding X, Yin K, Li Z, Lalla RV, Ballesteros E, Sfeir MM, Liu C: Ultrasensitive and visual detection of SARS-CoV-2 using all-in-one dual CRISPR-Cas12a assay. *Nature communications* 2020, 11(1):4711-4711.

106. Chen Y, Shi Y, Chen Y, Yang Z, Wu H, Zhou Z, Li J, Ping J, He L, Shen H *et al*: Contamination-free visual detection of SARS-CoV-2 with CRISPR/Cas12a: A promising method in the point-of-care detection. *Biosens Bioelectron* 2020, 169:112642.

107. Wang B, Wang R, Wang D, Wu J, Li J, Wang J, Liu H, Wang Y: Cas12aVDet: A CRISPR/Cas12a-Based Platform for Rapid and Visual Nucleic Acid Detection. *Anal Chem* 2019, 91(19):12156-12161.

108. Jirawannaporn S, Limothai U, Tachaboon S, Dinhuzen J, Kiatamornrak P, Chaisuriyong W, Bhumitrakul J, Mayuramart O, Payungporn S, Srisawat N: Rapid and sensitive point-of-care detection of *Leptospira* by RPA-CRISPR/Cas12a targeting lipL32. *PLoS Negl Trop Dis* 2022, 16(1):e0010112.

109. An B, Zhang H, Su X, Guo Y, Wu T, Ge Y, Zhu F, Cui L: Rapid and Sensitive Detection of *Salmonella* spp. Using CRISPR-Cas13a Combined With

Recombinase Polymerase Amplification. *Front Microbiol* 2021, 12:732426.

110. Liu Y, Xu H, Liu C, Peng L, Khan H, Cui L, Huang R, Wu C, Shen S, Wang S *et al*. CRISPR-Cas13a Nanomachine Based Simple Technology for Avian Influenza A (H7N9) Virus On-Site Detection. *J Biomed Nanotechnol* 2019, 15(4):790-798.

111. Ren M, Mei H, Zhou J, Zhou M, Han H, Zhao L: Early diagnosis of rabies virus infection by RPA-CRISPR techniques in a rat model. *Arch Virol* 2021, 166(4):1083-1092.

112. Lau HY, Wu H, Wee EJ, Trau M, Wang Y, Botella JR: Specific and Sensitive Isothermal Electrochemical Biosensor for Plant Pathogen DNA Detection with Colloidal Gold Nanoparticles as Probes. *Scientific reports* 2017, 7:38896.

113. Ng BY, Xiao W, West NP, Wee EJ, Wang Y, Trau M: Rapid, Single-Cell Electrochemical Detection of Mycobacterium tuberculosis Using Colloidal Gold Nanoparticles. *Anal Chem* 2015, 87(20):10613-10618.

114. Kim HE, Schuck A, Lee SH, Lee Y, Kang M, Kim YS: Sensitive electrochemical biosensor combined with isothermal amplification for point-of-care COVID-19 tests. *Biosens Bioelectron* 2021, 182:113168.

115. Leonardo S, Toldrà A, Campàs M: Biosensors Based on Isothermal DNA Amplification for Bacterial Detection in Food Safety and Environmental Monitoring. *Sensors (Basel)* 2021, 21(2).

116. Wee EJ, Lau HY, Botella JR, Trau M: Re-purposing bridging flocculation for on-site, rapid, qualitative DNA detection in resource-poor settings. *Chemical communications* 2015, 51(27):5828-5831.

117. Ng B, Wee E, West NP, Trau M: Rapid DNA detection of Mycobacterium tuberculosis-towards single cell sensitivity in point-of-care diagnosis. *Scientific reports* 2015, 5:15027.

118. Kober C, Niessner R, Seidel M: Quantification of viable and non-viable Legionella spp. by heterogeneous asymmetric recombinase polymerase amplification (haRPA) on a flow-based chemiluminescence microarray. *Biosens Bioelectron* 2018, 100:49-55.

119. Kunze A, Dilcher M, Abd El Wahed A, Hufert F, Niessner R, Seidel M: On-Chip Isothermal Nucleic Acid Amplification on Flow-Based Chemiluminescence Microarray Analysis Platform for the Detection of Viruses and Bacteria. *Anal Chem* 2016, 88(1):898-905.

120. Shin Y, Perera AP, Tang WY, Fu DL, Liu Q, Sheng JK, Gu Z, Lee TY,

Barkham T, Kyoung Park M: A rapid amplification/detection assay for analysis of *Mycobacterium tuberculosis* using an isothermal and silicon bio-phonic sensor complex. *Biosens Bioelectron* 2015, 68:390-396.

121. Sabaté Del Río J, Steylaerts T, Henry OYF, Bienstman P, Stakenborg T, Van Roy W, O'Sullivan CK: Real-time and label-free ring-resonator monitoring of solid-phase recombinase polymerase amplification. *Biosens Bioelectron* 2015, 73:130-137.

122. Xiong D, Dai W, Gong J, Li G, Liu N, Wu W, Pan J, Chen C, Jiao Y, Deng H *et al*: Rapid detection of SARS-CoV-2 with CRISPR-Cas12a. *PLoS Biol* 2020, 18(12):e3000978.

123. Wu F, Zhao S, Yu B, Chen YM, Wang W, Song ZG, Hu Y, Tao ZW, Tian JH, Pei YY *et al*: A new coronavirus associated with human respiratory disease in China. *Nature* 2020, 579(7798):265-269.

124. Han D, Li R, Han Y, Zhang R, Li J: COVID-19: Insight into the asymptomatic SARS-CoV-2 infection and transmission. *International journal of biological sciences* 2020, 16(15):2803-2811.

125. Behrmann O, Bachmann I, Spiegel M, Schramm M, Abd El Wahed A, Dobler G, Dame G, Hufert FT: Rapid Detection of SARS-CoV-2 by Low Volume Real-Time Single Tube Reverse Transcription Recombinase Polymerase Amplification Using an Exo Probe with an Internally Linked Quencher (Exo-IQ). *Clin Chem* 2020, 66(8):1047-1054.

126. Huang Z, Tian D, Liu Y, Lin Z, Lyon CJ, Lai W, Fusco D, Drouin A, Yin X, Hu T *et al*: Ultra-sensitive and high-throughput CRISPR-powered COVID-19 diagnosis. *Biosensors & bioelectronics* 2020, 164:112316.

127. Zhang WS, Pan J, Li F, Zhu M, Xu M, Zhu H, Yu Y, Su G: Reverse Transcription Recombinase Polymerase Amplification Coupled with CRISPR-Cas12a for Facile and Highly Sensitive Colorimetric SARS-CoV-2 Detection. *Anal Chem* 2021, 93(8):4126-4133.

128. Xiong E, Jiang L, Tian T, Hu M, Yue H, Huang M, Lin W, Jiang Y, Zhu D, Zhou X: Simultaneous Dual-Gene Diagnosis of SARS-CoV-2 Based on CRISPR/Cas9-Mediated Lateral Flow Assay. *Angewandte Chemie* 2021, 60(10):5307-5315.

129. Mayuramart O, Nimsamer P, Rattanaburi S, Chantaravisoot N, Khongnomnan K, Chansaenroj J, Puenpa J, Suntronwong N, Vichaiwattana P, Poovorawan Y *et al*: Detection of severe acute respiratory syndrome coronavirus 2 and influenza viruses based on CRISPR-Cas12a. *Exp Biol Med (Maywood)* 2021,

246(4):400-405.

130. Sun Y, Yu L, Liu C, Ye S, Chen W, Li D, Huang W: One-tube SARS-CoV-2 detection platform based on RT-RPA and CRISPR/Cas12a. *J Transl Med* 2021, 19(1):74.

131. Yin K, Ding X, Li Z, Sfeir MM, Ballesteros E, Liu C: Autonomous lab-on-paper for multiplexed, CRISPR-based diagnostics of SARS-CoV-2. *Lab Chip* 2021, 21(14):2730-2737.

132. Talwar CS, Park KH, Ahn WC, Kim YS, Kwon OS, Yong D, Kang T, Woo E: Detection of Infectious Viruses Using CRISPR-Cas12-Based Assay. *Biosensors (Basel)* 2021, 11(9).

133. Marsic T, Ali Z, Tehseen M, Mahas A, Hamdan S, Mahfouz M: Vigilant: An Engineered VirD2-Cas9 Complex for Lateral Flow Assay-Based Detection of SARS-CoV2. *Nano Lett* 2021, 21(8):3596-3603.

134. Arizti-Sanz J, Freije CA, Stanton AC, Petros BA, Boehm CK, Siddiqui S, Shaw BM, Adams G, Kosoko-Thoroddsen TF, Kembell ME *et al*. Streamlined inactivation, amplification, and Cas13-based detection of SARS-CoV-2. *Nat Commun* 2020, 11(1):5921.

135. Tian T, Qiu Z, Jiang Y, Zhu D, Zhou X: Exploiting the orthogonal CRISPR-Cas12a/Cas13a trans-cleavage for dual-gene virus detection using a handheld device. *Biosens Bioelectron* 2022, 196:113701.

136. Wang P, Ma C, Zhang X, Chen L, Yi L, Liu X, Lu Q, Cao Y, Gao S: A Ligation/Recombinase Polymerase Amplification Assay for Rapid Detection of SARS-CoV-2. *Frontiers in cellular and infection microbiology* 2021, 11:680728.

137. Choi MH, Lee J, Seo YJ: Combined recombinase polymerase amplification/rkDNA-graphene oxide probing system for detection of SARS-CoV-2. *Anal Chim Acta* 2021, 1158:338390.