Autoimmunity

Setting the standard

EliA[™] antiphospholipid syndrome serology testing:

The clinical performance of the EliA[™] antiphospholipid (aPL) portfolio provides reliable test results that aid in the diagnosis of antiphospholipid syndrome (APS).¹⁻⁸



Up to 5% of the general population have aPL antibodies.⁹ 20% of patients with aPL antibodies have reported deep vein thrombosis, stroke (female; <45 years old), recurrent miscarriages, teenage epilepsy (idiopathic; in teenagers), and/or lupus.¹⁰

78% of patients do not receive the full panel of tests recommended upon initial suspicion of APS.¹³

APS is a systemic autoimmune disease defined by:^{11,12}

Entry criterion of at least one positive aPL antibody test within 3 years of identification of an aPL-associated clinical criterion, followed by additive weighted criteria clustered into 6 clinical domains and 2 lab domains

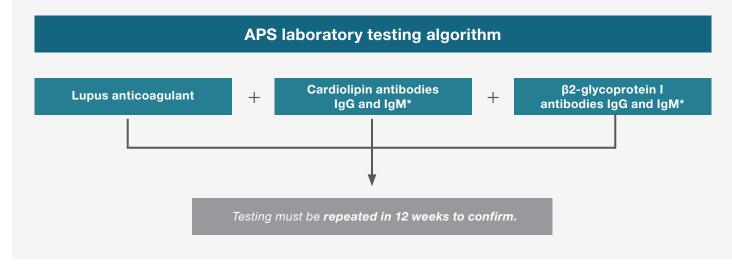
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Persistent positive tests for aPL antibodies

Consider an APS serology profile:

The diagnosis of APS is supported by the detection of aPL antibodies on two or more occasions at least 12 weeks apart. Currently, lupus anticoagulant, cardiolipin antibodies (IgM/IgG), and β 2-glycoprotein I antibodies (IgM/IgG) are considered as part of the laboratory criteria.¹⁴



*If initial tests for criteria markers (including \$2GPI IgG/IgM and CL IgG/IgM) are negative and a high suspicion of APS for a patient exists, \$2GPI IgA and CL IgA may be considered.¹⁵

If all 3 antibodies are positive, there is a 98% risk for APS¹⁶



APS interpretation considerations:

- Not every positive aPL test is clinically significant¹⁷
- Transient aPL positivity is common during infections¹⁷
- Clinical judgment is required¹⁷

Women's health considerations:

- - When APS is appropriately treated, more than 70% of pregnant women will deliver live newborns¹⁸
 - Women are disproportionately affected by APS-the male to female ratio is 1:519
- APS is typically diagnosed between the ages of 30 and 40¹⁹

Note: As with all diagnostic testing, any diagnosis or treatment plan must be made by the clinician based on test results, individual patient history, the clinician's knowledge of the patient, as well as their clinical judgment.

Official product name for APS disease serology testing mentioned in this document include EliA Cardiolipin IgA, EliA Cardiolipin IgG, EliA Cardiolipin IgM tests and EliA β2-Glycoprotein I IgA, EliA β2-Glycoprotein I IgA and EliA β2-Glycoprotein I IgM tests.

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