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Your Reference: Lab Reference: 525953231-C-I925
Laboratory: SNP
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Name of Test: S-Rheumatology
Requested: 19/11/2024 Collected: 20/11/2024 Reported: 21/11/2024
13:23

Clinical notes: lnmp day 6 fertility

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Rheumatology Studies

Rheumatoid Factor (RF) Latex	<15	(<30)	IU/mL
CCP Abs	<1	(<5)	U/mL
HLA B27 (Flow Cytometry)	* Positive				

Comments on Lab Id: 525953231

80% of rheumatoid arthritis patients have a positive RF, usually in high titre. Positive results, usually in low titre, are also found in patients with chronic or viral infections, liver diseases, hypergammaglobulinaemia, connective tissue diseases, ankylosing spondylitis (10%), and normal people (1-5%, incidence increases with age).

CCP antibodies when combined with RF, give a sensitivity of around 85% for the detection of early rheumatoid arthritis. Please note as of 14/4/2020 the RF reference interval has changed from <15 to <30 IU/mL

Cyclic citrullinated peptide (CCP) antibodies may be positive in some sero negative RA patients and appear earlier than RF in RA. CCP antibodies may predict more erosive disease and are a marker of disease severity. CCP antibodies may be present in some chronic infections eg HIV, HCV and in those conditions are not associated with arthritis. CCP antibodies have not been associated with Cryoglobulinaemia. Testing for CCP antibodies is performed using Abbott CMIA. An elevated CCP can be found in a significant number of patients with rheumatoid arthritis who have a negative RF. CCP antibodies may be detected in about 50-60% of patients with early RA (3-6 months after the beginning of symptoms).

HLA B27 is present in 10% of the normal population and does not by itself indicate that the patient has an autoimmune disease. HLA B27 is present in 90% of patients with ankylosing spondylitis and also occurs in patients with reactive arthritis, psoriatic arthritis, anterior uveitis and spondylarthritides associated with inflammatory bowel disease. Flow cytometry does not detect HLA B2706 or B27 Null alleles. These HLA alleles are not associated with ankylosing spondylitis or iritis. Testing performed on peripheral blood.