Bullous Pemphigoid Antigens (180 kDa and 230 kDa), IgG
ARUP test code 0092566

Bullous Pemphigoid Antigens, IgG

See Note

IMMUNODERMATOLOGY REPORT

Specimen(s):
1. Hemolyzed serum specimen

Clinical/diagnostic information:
No clinical information provided.

DIAGNOSTIC INTERPRETATION

Normal IgG Bullous Pemphigoid Antigens, BP 180 and IgG BP 230, antibody levels by ELISAs

(See Results and Comments including with attention to the interpretation relating to hemolyzed serum specimen and additional test recommendations)

RESULTS

Enzyme Linked Immunosorbent Assay (ELISA)

Bullous Pemphigoid (BP) 180 and 230 IgG Antibodies

IgG BP 180 antibodies: 2 units

Reference Range:
Positive (H) = Greater than or equal to 9 units
Negative = Less than 9 units

IgG BP 230 antibodies: 1 unit

Reference Range:
Positive (H) = Greater than or equal to 9 units
Negative = Less than 9 units

(H = high/increased; units = units/mL serum)

COMMENTS

Specific

This specimen showed visible evidence of hemolysis upon receipt in the Immunodermatology Laboratory which could be associated with anomalous test results. Interpretation of the findings should take this potential into consideration with retesting of a non-hemolyzed serum specimen if the findings do not correspond to the clinical presentation and as recommended.

H=High, L=Low, *=Abnormal, C=Critical
Patients with pemphigoid may show reactivity to multiple
basement membrane zone components other than the BP 180 and BP
230 epitopes expressed in these ELISAs; therefore, these normal
results do not rule out a diagnosis of pemphigoid. These results
also do not rule out treated or evolving pemphigoid or other
immunobullous diseases. Clinical correlation is needed including
with direct immunofluorescence on a biopsy specimen and
treatment status.

Serum testing for IgG and IgA basement membrane zone antibodies
by indirect immunofluorescence or, more broadly, for IgG and IgA
basement membrane zone and cell surface antibodies by indirect
immunofluorescence and additional ELISAs can provide further
immunopathological/diagnostic information. To further evaluate
the immunopathological profile in this patient’s serum, repeat
and additional testing with a newly submitted, non-hemolyzed
serum specimen is recommended, including for:

- IgG Epithelial Basement Membrane Zone Antibody (ARUP
test number 0092056) and
- IgA Epithelial Basement Membrane Zone Antibody (ARUP
test number 0092057) and
- IgG Collagen Type VII antibodies by ELISA (ARUP test
number 2010905)

or

- IgG Desmoglein 1 and IgG Desmoglein 3 Antibodies (ARUP
test number 0090649) and/or
- IgG Collagen Type VII antibodies by ELISA (ARUP test
number 2010905).

Detection, patterns, and levels of diagnostic antibodies may
fluctuate with disease manifestations. Monitoring antibody
profiles by indirect immunofluorescence as well as antibody
levels by ELISAs may aid in assessing disease expression and
activity.

General

Major molecular structures in the basement membrane zone to
which IgG pemphigoid antibodies bind have been identified and
termed "BP180" for a 180 kDa bullous pemphigoid antigen and "BP
230" for a 230 kDa bullous pemphigoid antigen. BP 180 is a
transmembrane component of the basement membrane zone with
collagen-like domains. BP 230 is located in the hemidesmosomal
plaques of basal cells in the epidermis. Serum levels of IgG BP
180 and IgG BP 230 antibodies are in the negative range in
normal individuals, and serum levels of IgG BP 180 antibodies
 correlate with disease activity in some patients with
pemphigoid, diminishing in response to therapy.

TESTING METHODS

Enzyme Linked Immunosorbent Assay (ELISA)

IgG BP 180 and IgG BP 230 serum antibody levels determined by
U.S. Food and Drug Administration-approved ELISAs (Mesacup, MBL
BION).

[Two ELISAS]
EER Bullous Pemphigoid Antigens, IgG

See Note
Access ARUP Enhanced Report using the link below:
- Direct access:

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END OF CHART

H=High, L=Low, *=Abnormal, C=Critical