



Bullous Pemphigoid Antigens (180 kDa and 230 kDa), IgG

LABORATORIES

Patient: [REDACTED]
DOB: [REDACTED] Age: [REDACTED] Gender: F
Patient Identifiers: [REDACTED]
Visit Number (FIN): [REDACTED]

Client: [REDACTED]
Physician: Not in the system NIS - Provider

ARUP Test Code: 0092566
Collection Date: 05/24/2019
Received in lab: 05/28/2019
Completion Date: 05/29/2019

Test Information

Method

Bullous Pemphigoid 180 and Bullous Pemphigoid 230 IgG serum antibody levels determined by FDA-approved enzyme linked immunosorbent assays (ELISA). (MESACUP BP180 ELISA Kit and MESACUP BP230 ELISA Kit, MBL International).

Use

Aid in the diagnosis of pemphigoid and variant forms, including bullous pemphigoid and mucous membrane (cicatrical) pemphigoid. BP180 and BP230 IgG antibody levels may be used to support a diagnosis of pemphigoid and also monitor disease activity and therapeutic response.

Considerations

Use of this test along with Epithelial Basement Membrane Zone (BMZ) Antibodies by indirect immunofluorescence (IFA) will increase sensitivity and identify patients with pemphigoid antibodies to epitopes other than those in this assay.

Patients with pemphigoid may show antibody reactivity that changes over time; therefore, periodic monitoring of disease activity (BMZ antibodies by IFA, BP 180 and BP 230 ELISAs and Pemphigoid Panel) is strongly recommended.

Repeat testing recommended for indeterminate results and/or continuing clinical consideration of the disease, persistence, and/or worsening disease activity.

For testing algorithm and additional information about immunobullous skin diseases, refer to: arupconsult.com/Topics/ImmunobullousSkinDz.

Patient Report

Patient's immunodermatology report from the University of Utah continues on following pages.



Patient: [REDACTED]
ARUP Accession: 19-144-137899



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Department of Dermatology
Immunodermatology Laboratory

IMMUNODERMATOLOGY REPORT

Patient: [redacted] **Accession number:** [redacted]
Medical Record Number: [redacted] Procurement Date: 5/24/2019
Gender: F DOB: [redacted] Age: [redacted] Received Date: 5/28/2019
Physician(s): [redacted] Clinic Location: [redacted] Phone: [redacted]
[redacted] Fax: [redacted]

Specimen(s):
1. Serum specimen
Clinical/Diagnostic Information:
No clinical information provided.

DIAGNOSTIC INTERPRETATION

Consistent with pemphigoid

(See Results and Comments including additional test recommendations)

RESULTS

Enzyme Linked Immunosorbent Assay (ELISA)

Bullous Pemphigoid (BP) 180 and 230 IgG Antibodies

IgG BP 180 antibodies: 45 units (H)

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

IgG BP 230 antibodies: 43 units (H)

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

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

COMMENTS

Billing Codes: [redacted]
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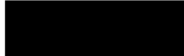
Patient: [redacted]
ARUP Accession: 19-144-137899
[redacted]

IMMUNODERMATOLOGY REPORT

Patient:



Accession
number:



MRN:

Specific

These ELISA results, demonstrating increased IgG BP 180 and IgG BP 230 antibody levels, support the diagnosis of pemphigoid. However, up to 7 percent of individuals unaffected by pemphigoid, including some with other immunobullous diseases, have increased IgG BP 180 and/or IgG BP 230 antibody levels. An additional consideration is that co-expression of IgG and IgA basement membrane zone antibodies may develop in patients with pemphigoid, which may have implications for disease severity and treatment approach.

Clinical correlation is needed, including correlation with direct immunofluorescence on a biopsy specimen and/or treatment status. To further evaluate the immunopathological profile, testing for serum IgG and IgA basement membrane zone antibodies by indirect immunofluorescence (ARUP test numbers 0092056 and 0092057) may be performed on this specimen by add-on test request through ARUP Client Services at 1-800-242-2787 option 2.

Monitoring serum antibody profiles by indirect immunofluorescence as well as antibody levels by ELISAs may be useful in assessing disease expression and activity, including response to therapy.

General

Major molecular structures in the basement membrane zone to which IgG pemphigoid antibodies bind have been identified and termed "BP 180" 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 plaque of basal cells in the epidermis. IgG BP 180 and IgG BP 230 antibody levels are in the negative range in normal individuals, and IgG BP 180 antibody levels may correlate with disease activity in pemphigoid, diminishing in response to therapy. Patients with pemphigoid may show reactivity to basement membrane zone components in addition to or other than the BP 180 and BP 230 epitopes expressed in these ELISAs.

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]

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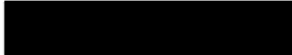


Patient

ARUP Accession: 19-144-137899

IMMUNODERMATOLOGY REPORT

Patient:



Accession
number:



MRN:

 MD

Immunodermatologist

Electronically signed 5/29/2019 6:54:00AM



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ARUP Accession: 19-144-137899


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