



Epidermal Transglutaminase (etG/tTG3) Antibody, IgA by ELISA

LABORATORIES

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

Client: [REDACTED]
Physician: [REDACTED]

ARUP Test Code: 2010902
Collection Date: 05/02/2019
Received in lab: 05/06/2019
Completion Date: 05/13/2019

Test Information

METHOD

IgA epidermal transglutaminase (also known as transglutaminase 3) antibodies in serum determined by enzyme linked immunosorbent assay (ELISA). (anti-heTG IgA ELISA, ALPCO Immunoassays). See Compliance Statements B & D: www.aruplab.com/CS.

USE

Aid in the diagnosis of dermatitis herpetiformis, monitoring of disease activity, and response to gluten-free diet therapy.

CONSIDERATIONS

Consider testing for celiac disease, including IgA and IgG tissue transglutaminase ELISA levels, IgA and IgG endomysial antibodies by indirect immunofluorescence and total serum IgA level.

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: 19-123-400683
[REDACTED]



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immunodermatology.uofmedicine.org

Department of Dermatology
Immunodermatology Laboratory

IMMUNODERMATOLOGY REPORT

Patient: [REDACTED]	Accession number: [REDACTED]
Medical Record Number: [REDACTED]	Procurement Date: 5/2/2019
Gender: F DOB: [REDACTED] Age: [REDACTED]	Received Date: 5/6/2019
Physician(s): [REDACTED]	Clinic Location: [REDACTED]
	Phone: [REDACTED]
	Fax: [REDACTED]

Specimen(s) :

1. Serum specimen

Clinical/Diagnostic Information:

Presumptive diagnosis is dermatitis herpetiformis versus bullous pemphigoid.

DIAGNOSTIC INTERPRETATION

Consistent with dermatitis herpetiformis

(See Results and Comments including further testing recommendation)

RESULTS

Enzyme Linked Immunosorbent Assay (ELISA)

Epidermal Transglutaminase IgA Antibodies

IgA epidermal transglutaminase antibodies: 25 units (H)

Reference Range:

Positive (H) = Greater than 22 units
Indeterminate = 16-22 units
Negative = Less than 16 units

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

COMMENTS

Specific

These ELISA results, demonstrating an increased IgA epidermal transglutaminase (eTG or transglutaminase type 3,

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Patient: [REDACTED]
ARUP Accession: 19-123-400683

IMMUNODERMATOLOGY REPORT

Patient: [REDACTED]

Accession number: [REDACTED]

MRN:

TG3) antibody level, support the diagnosis of dermatitis herpetiformis, likely with active celiac disease. Concurrent Pemphigoid Antibody Panel testing demonstrates negative/normal findings for IgG, including IgG4, and IgA basement membrane zone antibodies (separate report with additional comments). To note, IgA or IgG endomysial antibody reactivity is not detected in the indirect immunofluorescence testing on monkey esophagus substrate for basement membrane zone antibodies in the concurrent testing, which does not provide support for the diagnosis of celiac disease with or without associated dermatitis herpetiformis. The ELISA testing was repeated with similar findings in each assay.

Clinical correlation is needed, including assessment of serum IgA endomysial antibodies and IgA tissue transglutaminase antibodies (tTG or transglutaminase type 2, or TG2). Testing for celiac disease antibodies may be accomplished by request for ARUP test number 2008114 (Celiac Disease Reflexive Cascade), contact ARUP Client Services, 1-800-242-2787 option 2 for assistance. Correlation with direct immunofluorescence on a biopsy specimen and/or treatment status also is needed.

Patients with dermatitis herpetiformis can have an antibody profile specific for epidermal transglutaminase with higher avidity than to tissue transglutaminase, and IgA epidermal transglutaminase antibodies correlate with disease activity in individual patients. Monitoring antibody profiles by indirect immunofluorescence and antibody levels by ELISA may be helpful in assessing disease expression and activity, including as related to gluten ingestion.

If it would be helpful to discuss this patient's case with the findings in this report, contact ARUP Client Services at 1-800-242-2787 option 2 and ask to speak with the Immunodermatology Laboratory at the University of Utah regarding patient results.

General

Epidermal transglutaminase (transglutaminase type 3 or TG3) is a dominant antigen to which IgA antibodies develop in dermatitis herpetiformis. IgA epidermal transglutaminase antibodies are pathogenic in dermatitis herpetiformis, and increased levels are distinctly characteristic of the disease. Most patients with dermatitis herpetiformis have gluten sensitivity with celiac disease and characteristic positive IgA endomysial antibodies and increased IgA tissue transglutaminase (transglutaminase type 2 or TG2), but patients with dermatitis herpetiformis have an antibody profile specific for epidermal transglutaminase with higher

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Patient:



Accession
number:



MRN:

avidity than to tissue transglutaminase. Therefore, an increased IgA epidermal transglutaminase antibody level supports the diagnosis of dermatitis herpetiformis.

TESTING METHODS

Enzyme Linked Immunosorbent Assay (ELISA)

IgA epidermal transglutaminase antibodies in serum determined by ELISA (ALPCO Immunoassays). This test was developed and its performance characteristics determined by the Immunodermatology Laboratory at the University of Utah. It has not been cleared or approved by the U.S. Food and Drug Administration.

[One ELISA repeated for results verification]

 MD

Immunodermatologist



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Patient: 
ARUP Accession: 19-123-400683


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Tracy I. George, MD, Chief Medical Officer

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