

Primary Antibody Deficiency Panel, Sequencing and Deletion/Duplication

Primary antibody deficiency (PAD) syndromes are a group of rare genetic disorders affecting antibody (immunoglobulin) production. Three categories of primary antibody deficiencies include common variable immunodeficiency (CVID), agammaglobulinemia, and hyper-IgM syndrome. Symptoms may include unusual, opportunistic, or severe infections that typically affect multiple organs/organ systems. Other signs may include sepsis, failure to thrive, splenomegaly, autoimmune conditions, and neutropenia. Agammaglobulinemia and hyper-IgM syndrome usually occur within the first 2 years of life. CVID manifests at all ages, but most often in the second and third decade. Molecular testing is used to determine the genetic etiology of PAD in affected individuals.

Genetics

Genes

See [Genes Tested](#) table for genes included in the panel.

Incidence

Estimated at 1/10,000

Inheritance

X-linked, autosomal dominant, or autosomal recessive, depending on the causative gene

Test Interpretation

Methodology

This test is performed using the following sequence of steps:

- Selected genomic regions, primarily coding exons and exon-intron boundaries, from the targeted genes are isolated from extracted genomic DNA using a probe-based hybrid capture enrichment workflow.
- Enriched DNA is sequenced by massively parallel sequencing (MPS; also known as next generation sequencing [NGS]) followed by paired-end read alignment and variant calling using a custom bioinformatics pipeline. The pipeline includes an algorithm for detection of large (single exon-level or larger) deletions and duplications.
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- Sanger sequencing is performed as necessary to fill in regions of low coverage and in certain situations, to confirm variant calls.
- Large deletion/duplication calls made using MPS are confirmed by an orthogonal exon-level microarray when sample quality and technical conditions allow.

Clinical Sensitivity

- Agammaglobulinemia, 90%¹
- Hyper-IgM syndrome, 75-80%²
- CVID, 20%³

Analytic Sensitivity

For massively parallel sequencing:

Tests to Consider

[Primary Antibody Deficiency Panel, Sequencing and Deletion/Duplication 2011156](#)

Method: Massively Parallel Sequencing/Sequencing

Determine the genetic etiology of a primary antibody deficiency in affected individuals.

[Familial Targeted Sequencing 3005867](#)

Method: Massively Parallel Sequencing

- Testing for a known familial sequence variant by sequencing gene of interest. A copy of the family member's test result documenting the familial gene variant is REQUIRED.
- To determine if the variant(s) of interest are detectable by this assay, contact an ARUP genetic counselor at 800-242-2787.

See [Related Tests](#) for initial screening tests for immunodeficiency and mutation testing for a known familial pathogenic variant.

Variant Class	Analytic Sensitivity (PPA) Estimate ^a (%) and 95% Credibility Region (%)	Analytic Specificity (NPA) (%)
SNVs	>99 (96.9-99.4)	>99.9
Deletions 1-10 bp ^b	93.8 (84.3-98.2)	>99.9
Insertions 1-10 bp ^b	94.8 (86.8-98.5)	>99.9
Exon-level ^c deletions	97.8 (90.3-99.8) [2 exons or larger] 62.5 (38.3-82.6) [single exon]	>99.9
Exon-level ^c duplications	83.3 (56.4-96.4) [3 exons or larger]	>99.9

^aGenes included on this test are a subset of a larger methods-based validation from which the PPA values are derived. These values do not apply to testing performed by multiplex ligation-dependent probe amplification (MLPA).

^bVariants greater than 10 bp may be detected, but the analytic sensitivity may be reduced.

^cIn most cases, a single exon deletion or duplication is less than 450 bp and 3 exons span a genomic region larger than 700 bp.

bp, base pairs; NPA, negative percent agreement; PPA, positive percent agreement; SNVs, single nucleotide variants

Limitations

- A negative result does not exclude a PAD syndrome.
- Diagnostic errors can occur due to rare sequence variations.
- Interpretation of this test result may be impacted if the individual has had an allogeneic stem cell transplantation.
- The following will not be evaluated:
 - Variants outside the coding regions and intron-exon boundaries of the targeted genes
 - Regulatory region variants and deep intronic variants
 - Breakpoints of large deletions/duplications
 - Deletions/duplications in *NFKBIA* and *TCF3*
 - Translocations
 - The following exons are not sequenced due to technical limitations of the assay:
 - *CXCR4* (NM_001348056, NM_001348059) exon(s) 2
 - *DCLRE1C* (NM_001350965) exon(s) 15
 - *DCLRE1C* (NM_001350966) exon(s) 13
 - *DCLRE1C* (NM_001350967) exon(s) 16
 - *PRKCD* (NM_001354676, NM_001354678) exon(s) 1
 - *XIAP* (NM_001167, NM_001204401, NM_001378590, NM_001378591, NM_001378592) exon(s) 4
- The following may not be detected:
 - Deletions/duplications/insertions of any size by massively parallel sequencing
 - Large duplications less than 3 exons in size
 - Noncoding transcripts
 - Some variants due to technical limitations in the presence of pseudogenes, repetitive, or homologous regions
 - Low-level somatic variants
 - Single exon deletions/duplications in the following exons:
 - *ADA* (NM_000022, NM_001322051) 1; *CXCR4* (NM_001348056) 2; *CXCR4* (NM_001348059) 2; *DCLRE1C* (NM_001033855) 4-9; *DCLRE1C* (NM_001033857, NM_001289077) 6-10; *DCLRE1C* (NM_001033858, NM_001289079) 7-11; *DCLRE1C* (NM_001289076, NM_001289078) 3-7; *DCLRE1C* (NM_001350965) 4-9,15; *DCLRE1C* (NM_001350966) 3-7,13; *DCLRE1C* (NM_001350967) 6-10,16; *DCLRE1C* (NM_022487) 4-8; *HELLS* (NM_018063, NM_001289067, NM_001289068, NM_001289069, NM_001289070, NM_001289072) 7; *HELLS* (NM_001289071) 8; *HELLS* (NM_001289073) 6; *IGLL* (NM_152855) 2; *IKZF1* (NM_001291846, NM_001291847) 4; *MOGS* (NM_001146158) 2; *PRKCD* (NM_001354676, NM_001354678) 1; *XIAP* (NM_001167, NM_001204401, NM_001378590, NM_001378592) 4; *XIAP* (NM_001378591) 5

Genes Tested

Gene	MIM Number	Disorder	Inheritance
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AD, autosomal dominant; AR, autosomal recessive; SCID, severe combined immunodeficiency; XL, X-linked

Gene	MIM Number	Disorder	Inheritance
<i>ADA</i>	608958	Adenosine deaminase deficiency, partial Severe combined immunodeficiency due to ADA deficiency	AR
<i>ADA2</i>	607575	Sneddon syndrome Vasculitis, autoinflammation, immunodeficiency, and hematologic defects syndrome	AR
<i>AICDA</i>	605257	Immunodeficiency with hyper-IgM, type 2	AR
<i>ATM</i>	607585	Ataxia-telangiectasia	AR
<i>ATP6AP1</i>	300197	Immunodeficiency 47	XL
<i>BLNK</i>	604515	Agammaglobulinemia	AR
<i>BTK</i>	300300	Agammaglobulinemia, X-linked 1 Isolated growth hormone deficiency, type III, with agammaglobulinemia	XL
<i>CARD11</i>	607210	Immunodeficiency 11	AR
		B-cell expansion with NFKB and T-cell energy Immunodeficiency 11B with atopic dermatitis	AD
<i>CD19</i>	107265	CVID 3	AR
<i>CD27</i>	186711	Lymphoproliferative syndrome 2	AR
<i>CD40</i>	109535	Immunodeficiency with hyper-IgM, type 3	AR
<i>CD40LG</i>	300386	Immunodeficiency, X-linked, with hyper-IgM	XL
<i>CD70</i>	602840	Lymphoproliferative syndrome 3	AR
<i>CD79A</i>	112205	Agammaglobulinemia 3	AR
<i>CD79B</i>	147245	Agammaglobulinemia 6	AR
<i>CDCA7</i>	609937	Immunodeficiency-centromeric instability-facial anomalies syndrome 3	AR
<i>CR2</i>	120650	CVID 7	AR
<i>CTLA4</i>	123890	Immune dysregulation with autoimmunity, immunodeficiency, and lymphoproliferation	AD
<i>CXCR4</i>	162643	Whim syndrome Myelokathexis, isolated	AD
<i>DCLRE1C</i>	605988	SCID, Athabascan type Omenn syndrome	AR
<i>DNMT3B</i>	602900	Immunodeficiency-centromeric instability-facial anomalies syndrome 1	AR

Gene	MIM Number	Disorder	Inheritance
<i>GATA2</i>	137295	Immunodeficiency 21 Emberger syndrome	AD
<i>HELLS</i>	603946	Immunodeficiency-centromeric instability-facial anomalies syndrome 4	AR
<i>ICOS</i>	604558	CVID 1	AR
<i>IGHM</i>	147020	Agammaglobulinemia 1	AR
<i>IGLL1</i>	146770	Agammaglobulinemia 2	AR
<i>IKZF1</i>	603023	CVID 13	AD
<i>IL21R</i>	605383	IgE, elevated level of	AD
		Immunodeficiency 56	AR
<i>KDM6A</i>	300128	Kabuki syndrome 2	XL
<i>KMT2D</i>	602113	Kabuki syndrome 1	AD
<i>LRBA</i>	606453	CVID 8 with autoimmunity	AR
<i>MOGS</i>	601336	Congenital disorder of glycosylation, type IIB	AR
<i>MS4A1</i>	112210	CVID 5	AR
<i>NBN</i>	602667	Nijmegen breakage syndrome Aplastic anemia Leukemia, acute lymphoblastic	AR
<i>NFKB1</i>	164011	CVID 12	AD
<i>NFKB2</i>	164012	CVID 10	AD
<i>NFKBIA</i>	164008	Ectodermal dysplasia and immunodeficiency 2	AD
<i>PIK3CD</i>	602839	Immunodeficiency 14A, autosomal dominant	AD
		Immunodeficiency 14B, autosomal recessive	AR
<i>PIK3CG</i>	601232	Hyper-IgM	AD
<i>PIK3R1</i>	171833	Immunodeficiency 36 SHORT syndrome	AD
<i>PLCG2</i>	600220	Autoinflammation, antibody deficiency, and immune dysregulation Familial cold autoinflammatory syndrome 3	AD
<i>PRKCD</i>	176977	Autoimmune lymphoproliferative syndrome, type III	AR

Gene	MIM Number	Disorder	Inheritance
RAC2	602049	Immunodeficiency 73A and 73B with defective neutrophil chemotaxis and leukocytosis	AD
RAG1	179615	Combined cellular and humoral immune defects with granulomas SCID, B-cell negative Omenn syndrome Alpha/beta T-cell lymphopenia with gamma/delta T-cell expansion, severe cytomegalovirus infection, and autoimmunity	AR
RAG2	179616	Combined cellular and humoral immune defects with granulomas SCID, B-cell negative Omenn syndrome	AR
RNF168	612688	RIDDLE syndrome	AR
SH2D1A	300490	Lymphoproliferative syndrome, X-linked, 1	XL
STAT3	102582	Hyper-IgE recurrent infection syndrome Autoimmune disease, multisystem, infantile-onset 1	AD
TCF3	147141	Agammaglobulinemia 8A, autosomal dominant Agammaglobulinemia 8B, autosomal recessive	AD AR
TNFRSF13B	604907	CVID 2 Immunoglobulin A deficiency	AR, AD
TRNT1	612907	Sideroblastic anemia with B-cell immunodeficiency, periodic fevers, and developmental delay Retinitis pigmentosa and erythrocytic microcytosis	AR
TTC37	614589	Trichohepatoenteric syndrome 1	AR
UNG	191525	Immunodeficiency with hyper-IgM syndrome, type 5	AR
XIAP	300079	X-linked lymphoproliferative syndrome 2	XL
ZBTB24	614064	Immunodeficiency-centromeric instability-facial anomalies syndrome 2	AR

AD, autosomal dominant; AR, autosomal recessive; SCID, severe combined immunodeficiency; XL, X-linked

References

1. Conley ME, Mathias D, Treadaway J, et al. [Mutations in btk in patients with presumed X-linked agammaglobulinemia](#). *Am J Hum Genet*. 1998;62(5):1034-1043.
2. Conley ME, Dobbs AK, Farmer DM, et al. [Primary B cell immunodeficiencies: comparisons and contrasts](#). *Annu Rev Immunol*. 2009;27:199-227.
3. de Valles-Ibáñez G, Esteve-Solé A, Piquer M, et al. [Evaluating the genetics of common variable immunodeficiency: monogenetic model and beyond](#). *Front Immunol*. 2018;9:636.

Additional Resources

Johnson J, Filipovich AH, Zhang K. [X-linked hyper IgM syndrome](#). In: Adam MP, Ardinger HH, Pagon RA, et al, editors. GeneReviews, University of Washington; 1993-2020. [Updated: Jan 2013; Accessed: Apr 2022]

Picard C, Gaspar B, Al-Herz W, et al. [International Union of Immunological Societies: 2017 Primary Immunodeficiency Diseases Committee report on inborn errors of immunity](#). *J Clin Immunol*. 2018;38(1):96-128.

Smith CIE, Berglöf A. X-linked agammaglobulinemia. In: Adam MP, Ardinger HH, Pagon RA, et al, eds. GeneReviews, University of Washington; 1993-2020. [Updated: Aug 2016; Accessed: Apr 2022]

Winkelstein JA, Marino MC, Ochs H, et al. The X-linked hyper-IgM syndrome: clinical and immunologic features of 79 patients. *Medicine (Baltimore)*. 2003;82(6):373-384.

Related Information

[Common Variable Immune Deficiency Syndromes](#)
[Immunodeficiency Evaluation for Chronic Infections in Adults and Older Children Testing Algorithm](#)
[Immunodeficiency Evaluation for Chronic Infections in Infants and Children Testing Algorithm](#)
[Inherited T-Cell Deficiency Disorders](#)
[Neutropenia](#)
[Primary Immunodeficiency Diseases - Immunoglobulin Disorders](#)
[Severe Combined Immunodeficiencies - SCID](#)

Related Tests

[Lymphocyte Subset Panel 7 - Congenital Immunodeficiencies 0095899](#)

Method: Quantitative Flow Cytometry

[B Cell Subset Analysis 3002216](#)

Method: Flow Cytometry

[Lymphocyte Antigen and Mitogen Proliferation Panel 0096056](#)

Method: Cell Culture

[Lymphocyte Proliferation, Antigen-Mitogen Panel by Flow Cytometry \(24-Hr Critical Room Temp\) 3001319](#)

Method: Cell Culture/Flow Cytometry

[Immunoglobulins \(IgA, IgG, IgM\), Quantitative 0050630](#)

Method: Quantitative Immunoturbidimetry

[Immunoglobulin G Subclasses \(1, 2, 3, 4\) 0050577](#)

Method: Quantitative Immunoturbidimetry

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