



From ANA to ENA: daily practice in the Netherlands

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Harmonisation of Testing Algorithms

Questionnaire

Categories:

- Organisation (n=4),
- ANA testing (n=14),
- Anti-dsDNA ab testing (n=8),
- Anti-ENA ab testing (n=15),
- ANA/ENA algorithm (n=16).



Response

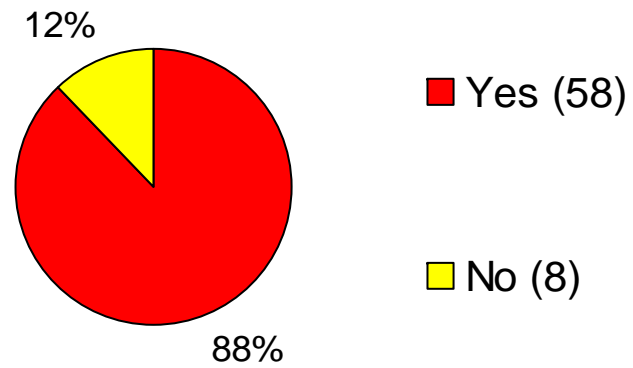
Send out to 81 laboratories:

- Dutch diagnostic laboratories (n=76),
- Foreign diagnostic laboratories (n=2),
- Diagnostic compagnies (n=3),

→66 questionnaires were returned from the Dutch diagnostic laboratories (87%)

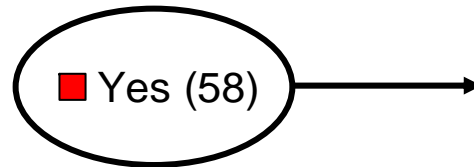
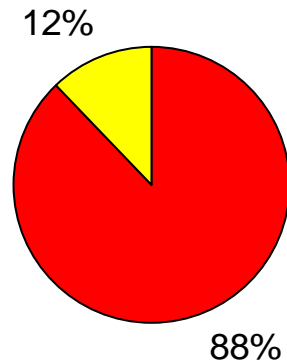
ANA testing

ANA testing



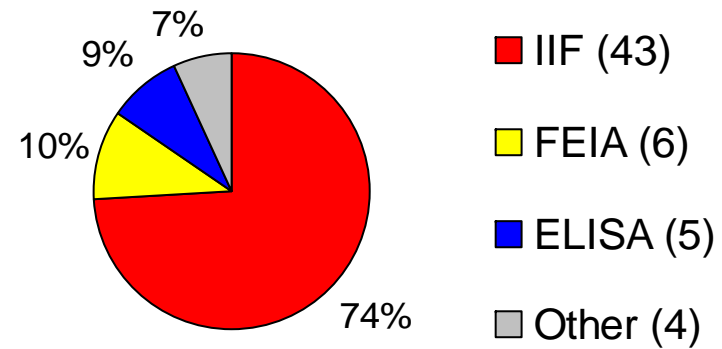
ANA methods

ANA testing



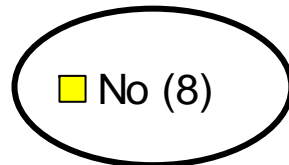
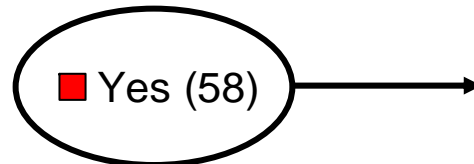
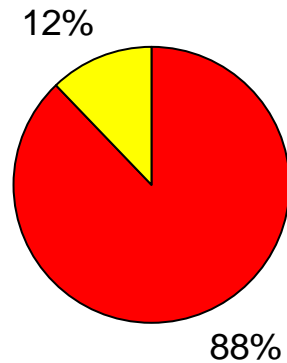
No (8)

ANA Methods



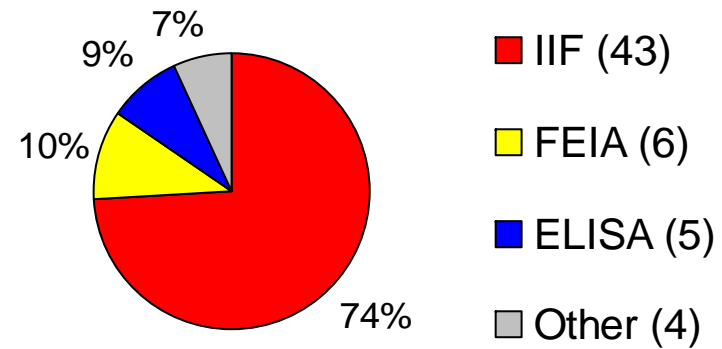
ANA methods

ANA testing



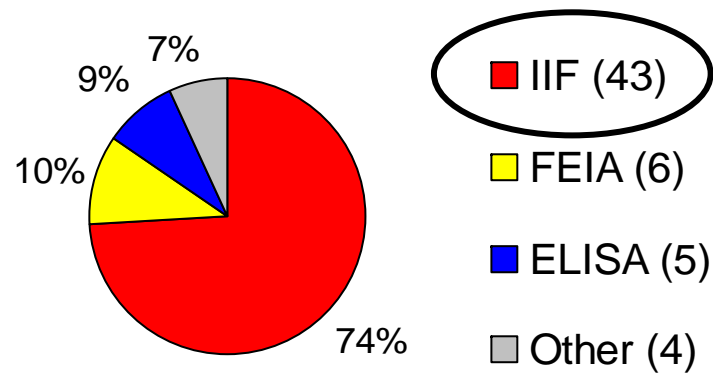
All these labs perform the FEIA ENA screen

ANA Methods

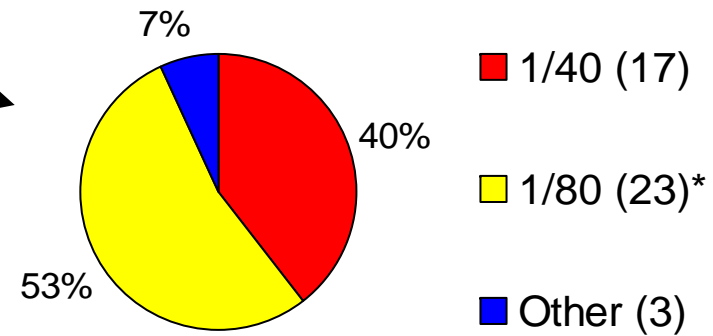


ANA testing

ANA Methods

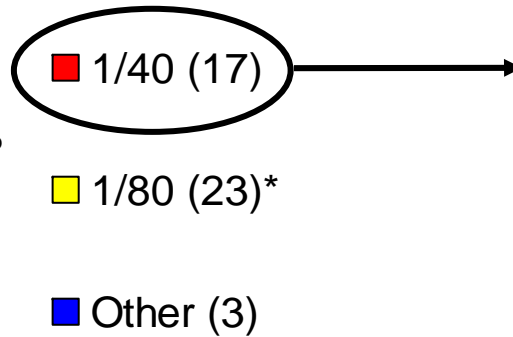
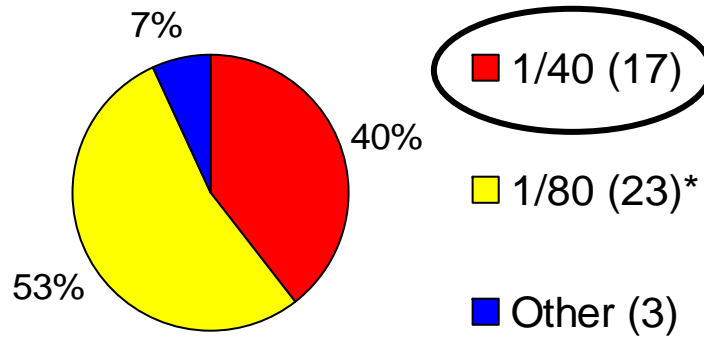


ANA Screen titer

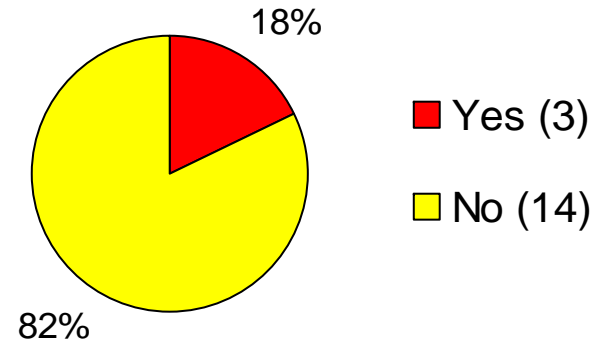


ANA titration

ANA Screen titer

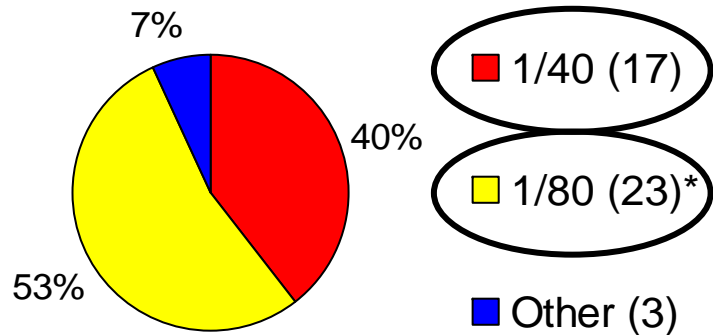


ANA Titration

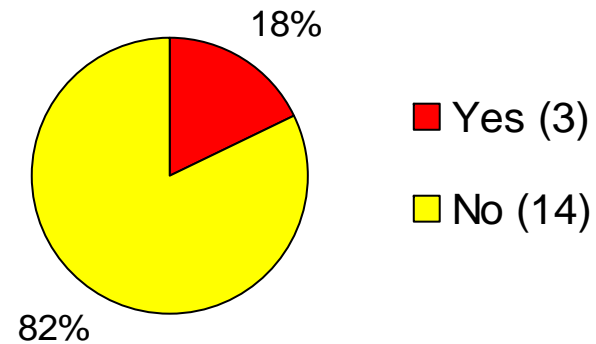


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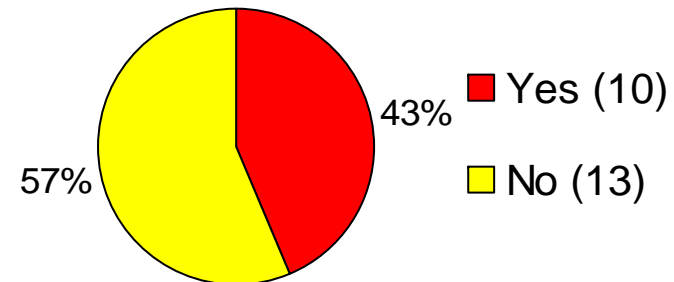
ANA Screen titer



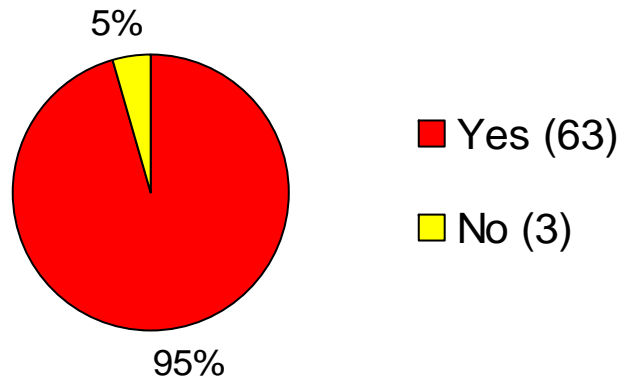
ANA Titration



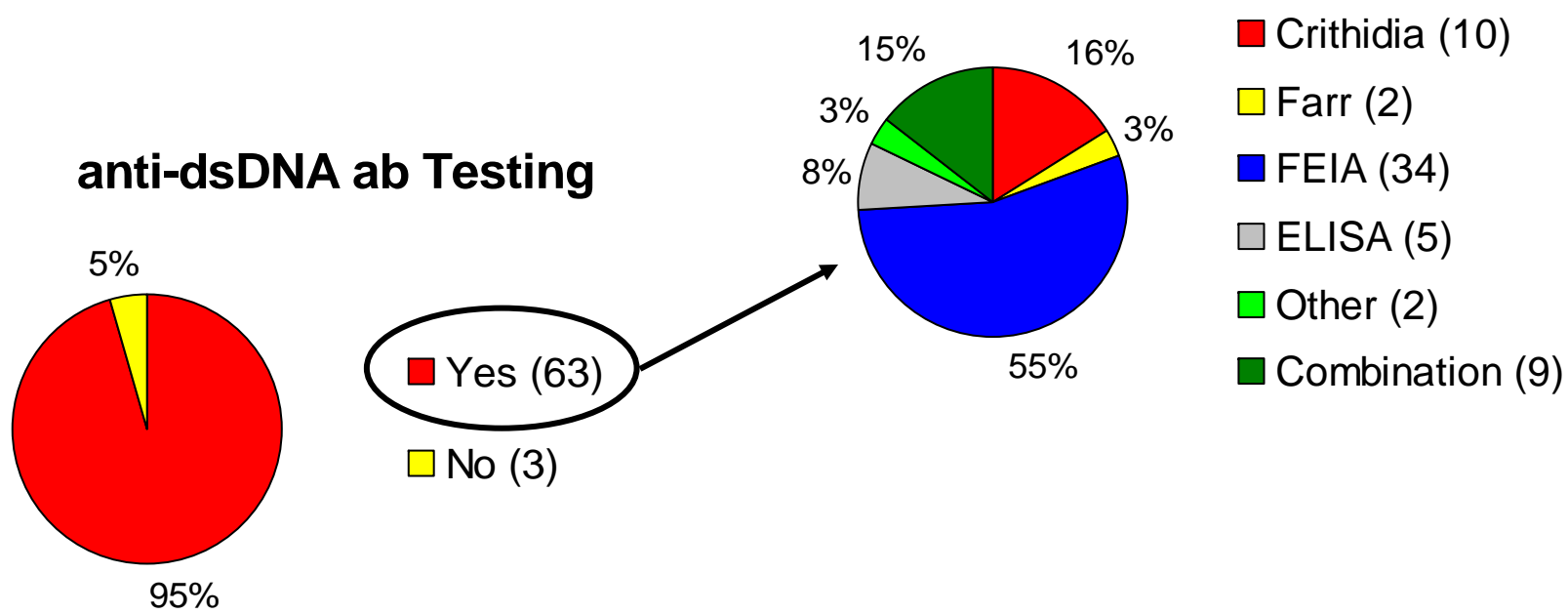
ANA Titration



anti-dsDNA ab Testing

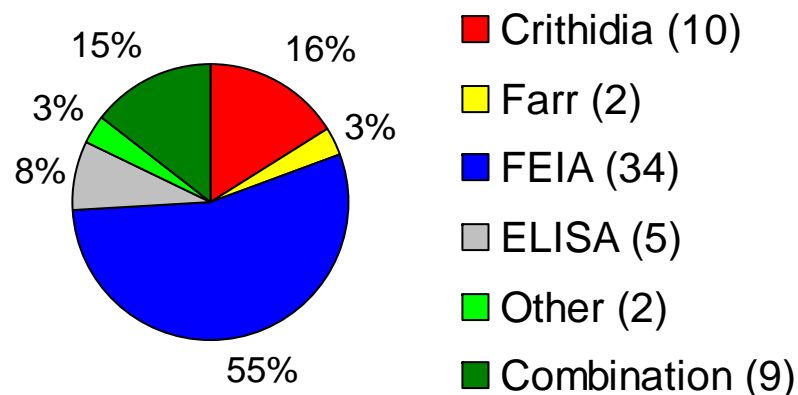
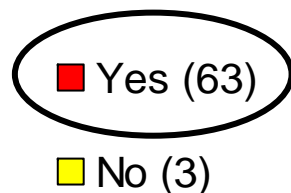
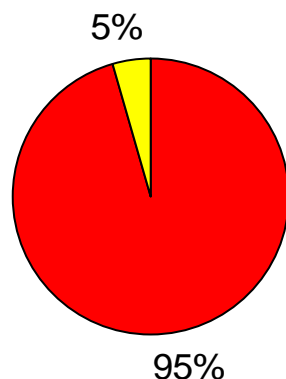


Method for detection

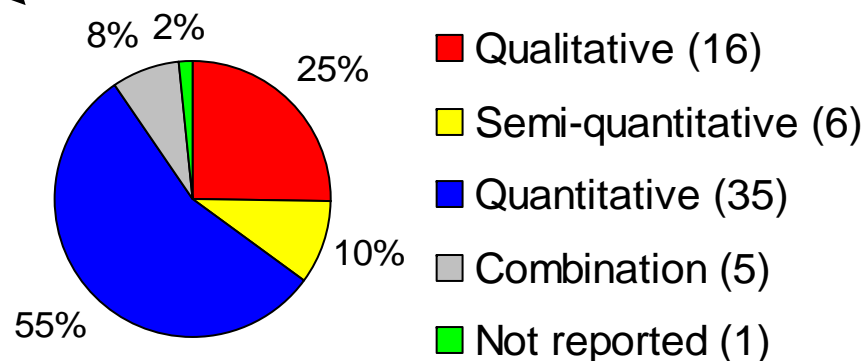


Method for detection

anti-dsDNA ab Testing

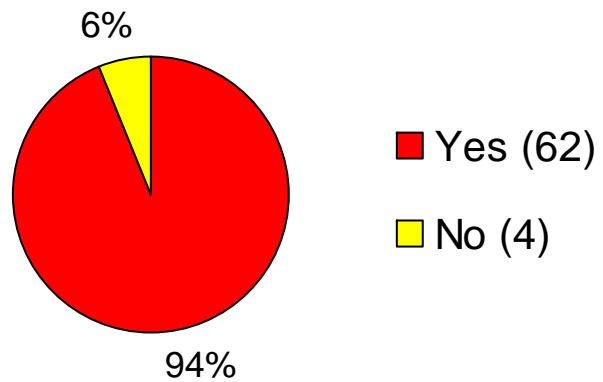


anti-dsDNA ab Report

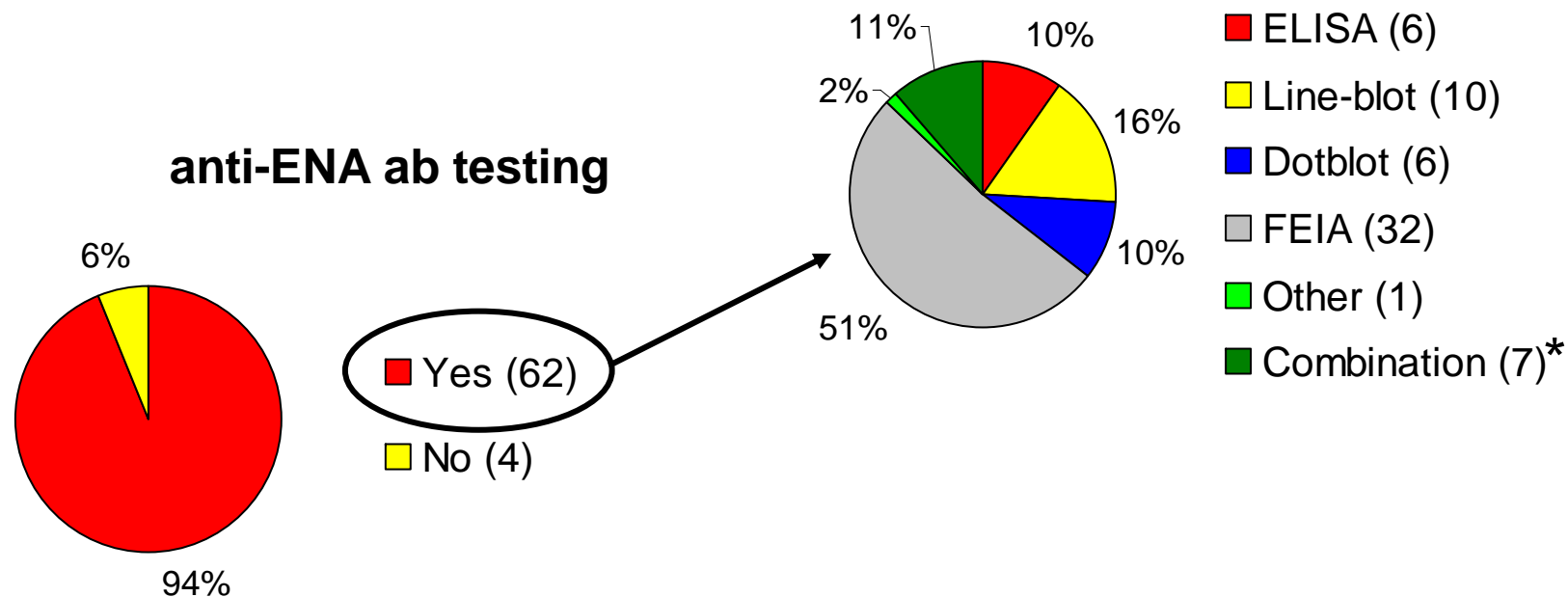


Anti-ENA ab testing

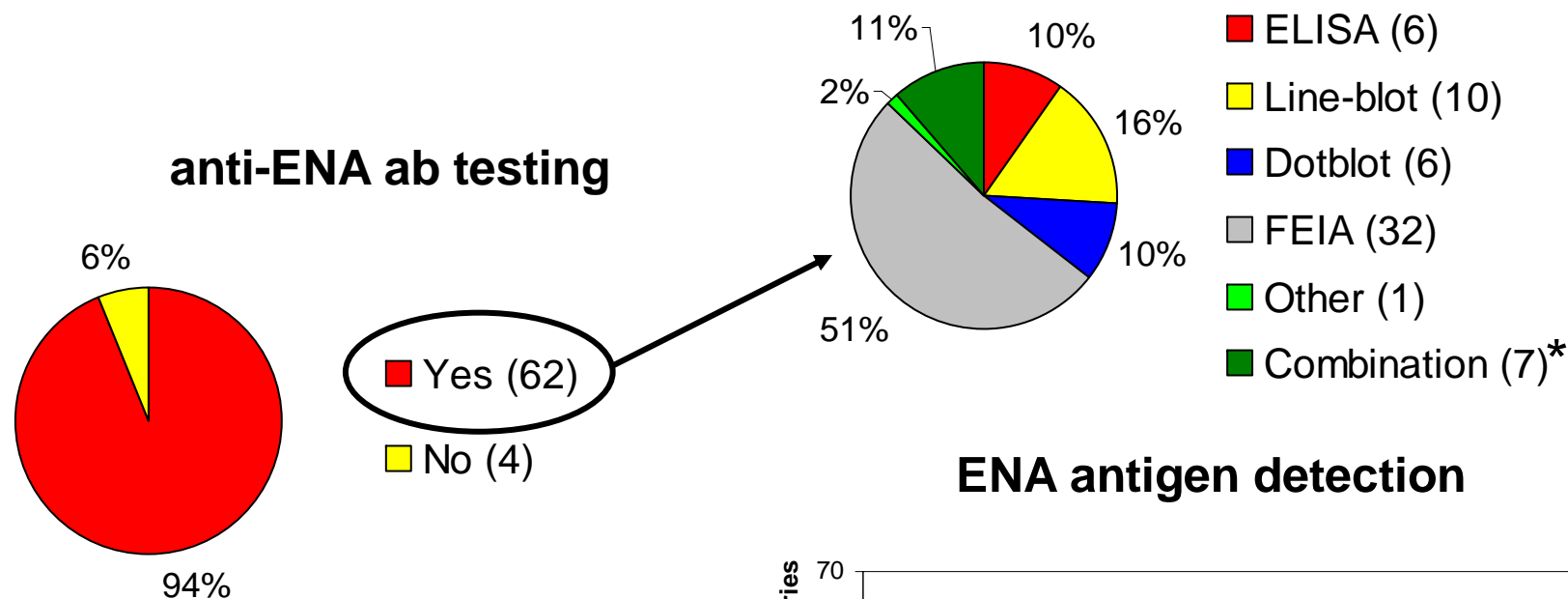
anti-ENA ab testing



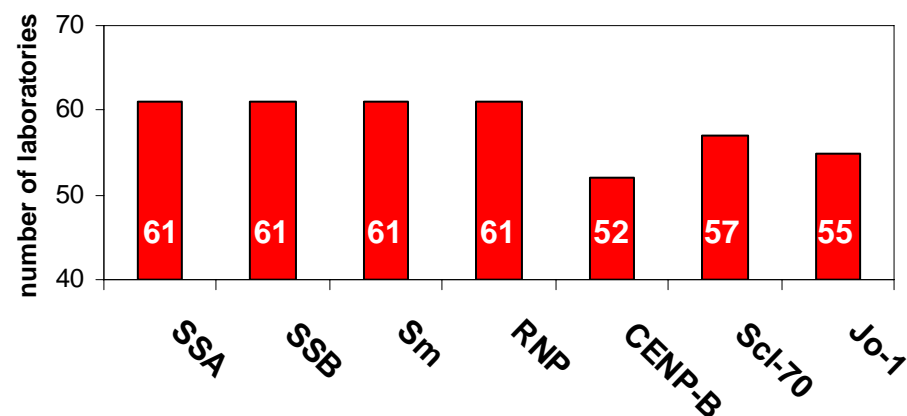
Method for detection



Method for detection

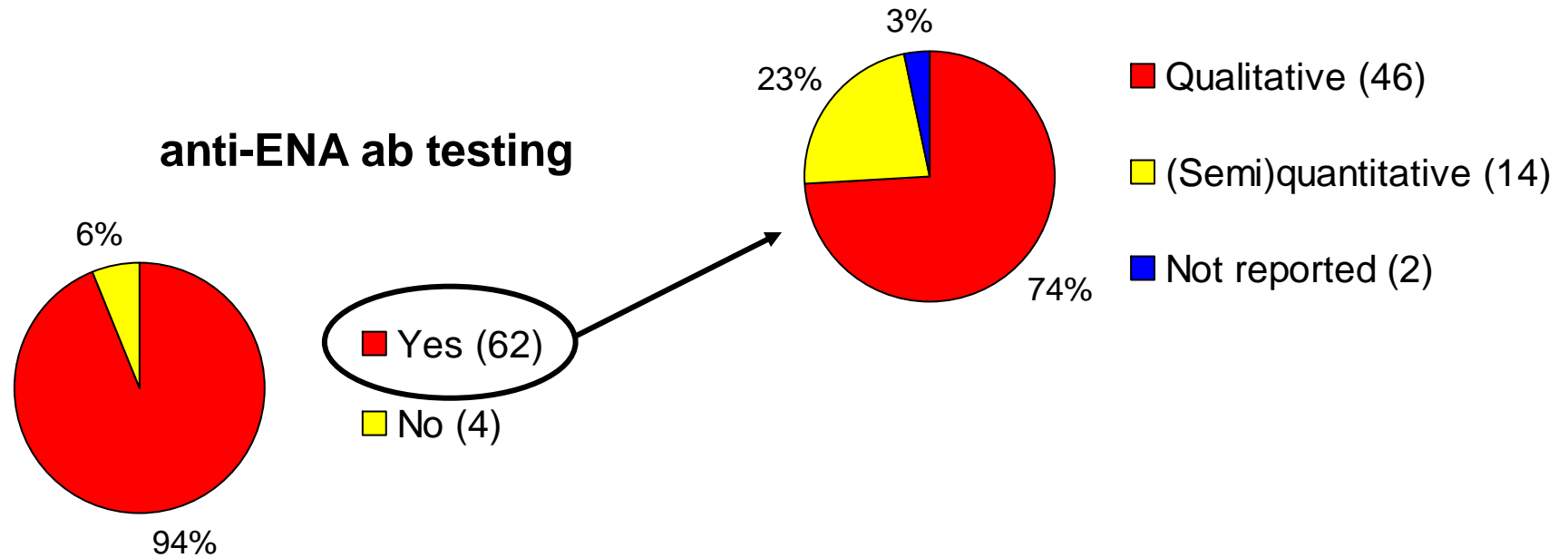


ENA antigen detection

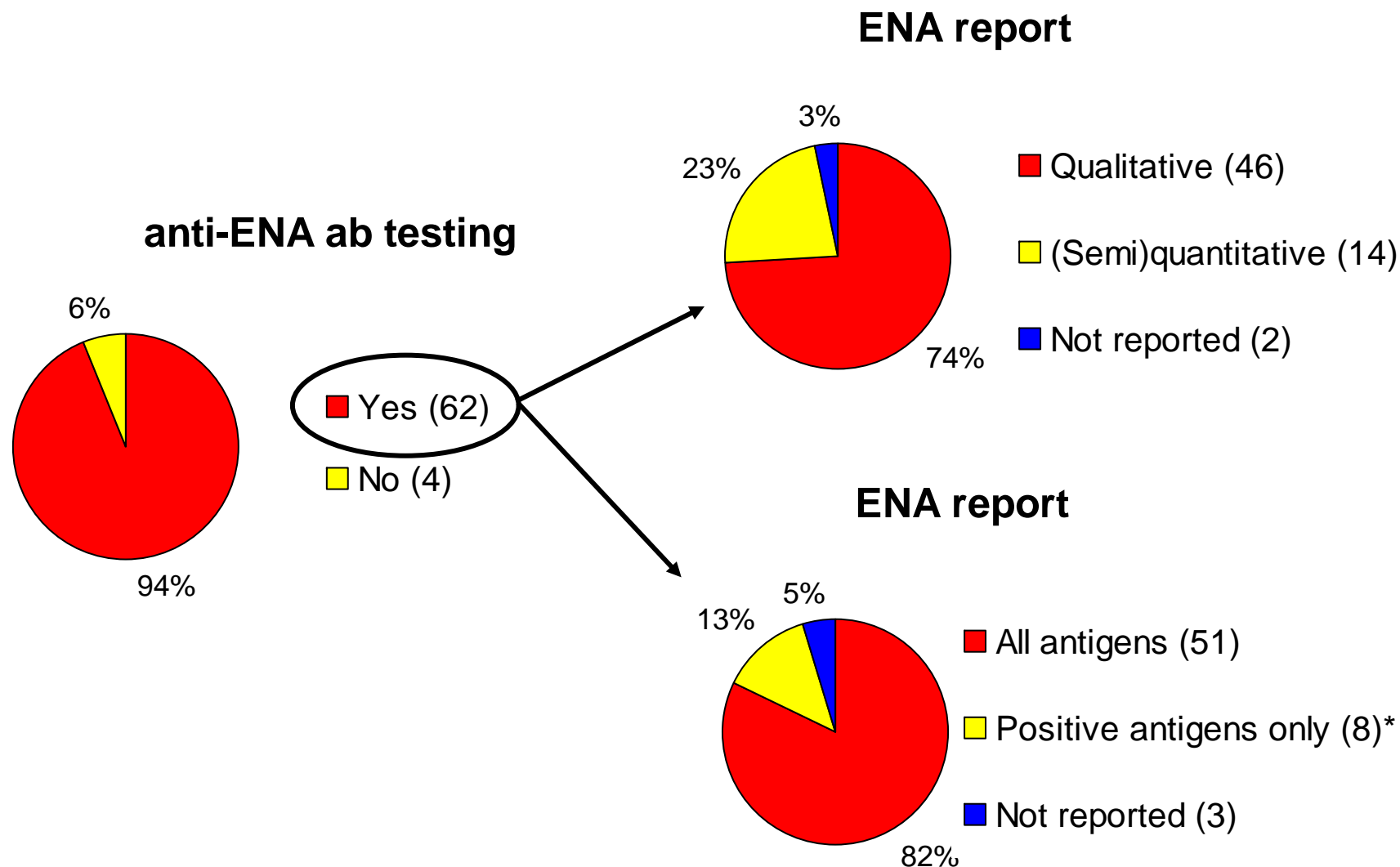


Anti-ENA ab report

ENA report



Anti-ENA ab report





15 Recommendations

Dutch EASI team



1. ANA testing should be part of autoantibody detection in systemic autoimmune diseases.
2. ANA tests based on a (restricted) mixture of defined antigens should not be referred to as ANA test.
3. Positive ANA IIF results should be reported in a semi-quantitative way (fluorescence intensity or titration).
4. Reading the ANA IIF pattern is recommended; report to clinician is optional.
5. The method used for anti-dsDNA antibodies should be communicated to the clinician.



15 Recommendations Dutch EASI team



6. Results of anti-dsDNA antibody tests should be reported quantitatively.
7. The 7 “standard” ENA (SSA, SSB, Sm, RNP, CENP-B, Scl-70, and Jo-1) should all be typed.
8. Results of the 7 “standard” ENA should all be reported separately, preferentially in a qualitative way.
9. Anti-SSA60 and anti-Ro52 antibodies should be distinguished and reported separately.
10. In case of suspicion of CHB/NL the presence of anti-Ro52 antibodies should be tested.



15 Recommendations

Dutch EASI team



11. Detection of anti-Sm antibodies should be SmD specific, but may be reported as anti-Sm.
12. The anti-dsDNA antibody test should be available as a rapid test.
13. An homogenous ANA (IIF) result during the diagnostic work-up should be followed by an anti-dsDNA ab test.
14. A positive ANA test result during the diagnostic work-up should be followed by an anti-ENA ab test.
15. Clinical suspicion of myositis, CHB/NL, or Sjögren's syndrome always requires anti-ENA ab detection.



Acknowledgements



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