An Italian Multicenter Study for Application of a Diagnostic Algorithm in Autoantibody Testing for Autoimmune Rheumatic Disease

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Multicenter Study for a Diagnostic Algorithm Application in Autoantibody Testing: Background

Laboratory role is important because provides useful diagnostic tools in order to improve clinical decision making in the Autoimmune Disease field

In the last years requests for these assays have grown remarkably, partially because laboratory tests inappropriate use. Reducing clinically inappropriate requests is a very important target for Health Services

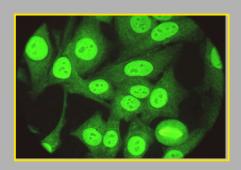
Several guidelines and diagnostic algorithms for autoantibody testing have been proposed by different Authors but there is a lack of data on the application of these diagnostic protocols

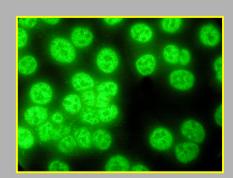
Aim of the Study

Aim of this study was to implement a guideline for reducing clinically inappropriate test requests of autoantibody testing in a broad geographic area (Parma, Modena, Piacenza, Reggio-Emilia)

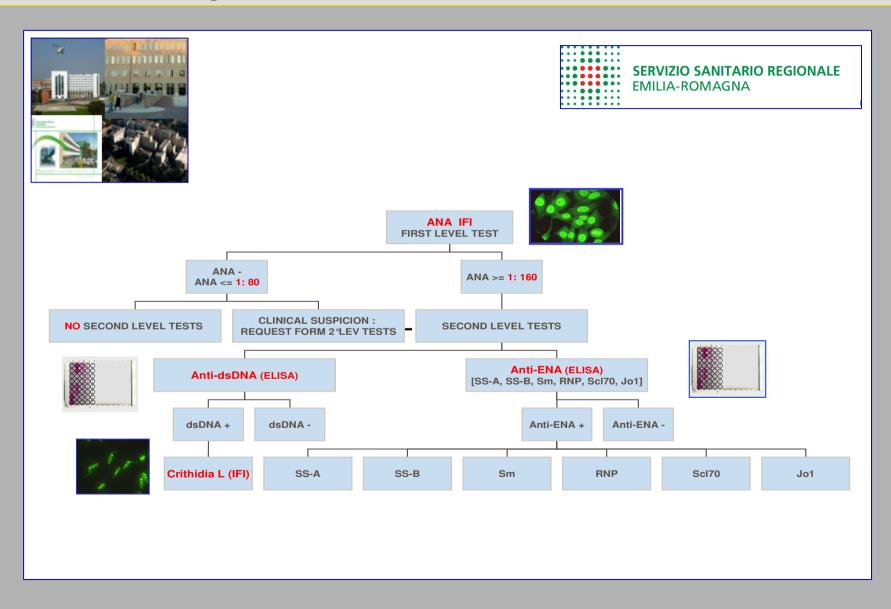
This study, started in January 2008 and concluded in December 2009, was supported by a Regional Grant.

It was an observational research aimed to compare the number of tests (ANA, anti-ENA, anti-dsDNA,) and the percentage of positive test results before and after implementation of the diagnostic algorithm.



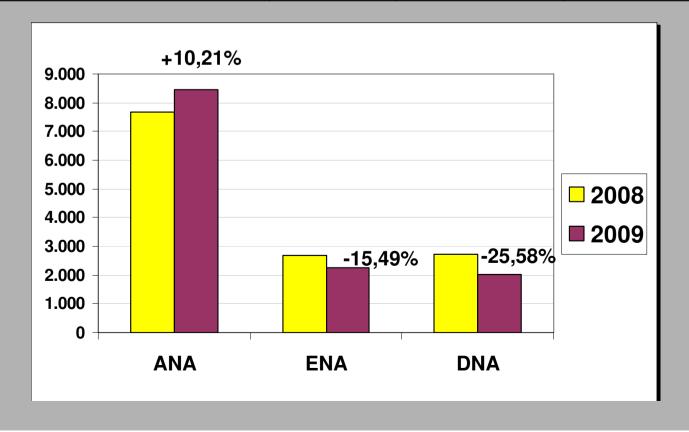


Flowchart of Diagnostic Algorithm for Autoantibodies testing in Autoimmune Rheumatic Disease



ANA, ENA, ds DNA test requests in Hospitalized Patients (Overall Centers)

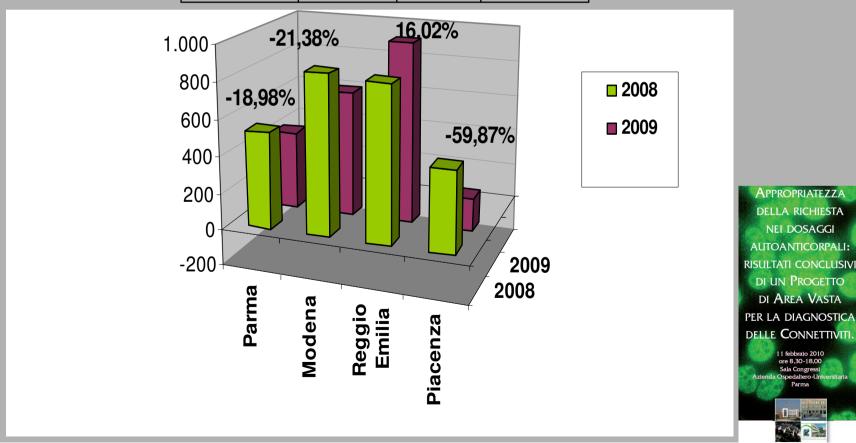
	ANA	ENA	DNA
Jan 1st - Jun 1st 2008 (test n°)	7.662	2.692	2.713
Jan 1st - Jun 1st 2009 (test n°)	8.444	2.275	2.019
	+10,21%	-15,49%	-25,58%



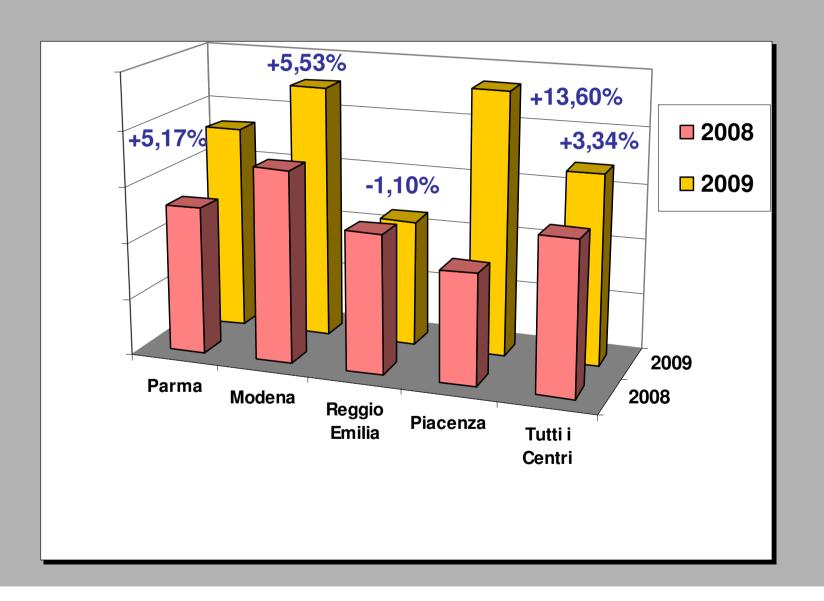


ENA test requests in Hospitalized Patients in the different Centers 2008 2009 Delta

	2000	2007	Deita
Parma	527	427	-18,98%
Modena	870	684	-21,38%
Reggio-E.	849	985	16,02%
Piacenza	446	179	-59,87%
Overal	2.692	2.275	-15,49%



% of ENA Positive in Hospitalized Patients







- The percentage of second level test positivity is increased both for ENA and dsDNA after diagnostic protocol application
- The evaluation of local and specific clinical needs increase the feasibility and the application in a wide regional area of a diagnostic protocol
- Diagnostic algorithm introduction allowed a significant decrease of second level test number
- © Guidelines validation for laboratory diagnosis of Autoimmune Rheumatic Disease can represent a tool for improving patients' outcomes and economic efficiency
- **Efficiency and effectiveness are strongly linked**



