

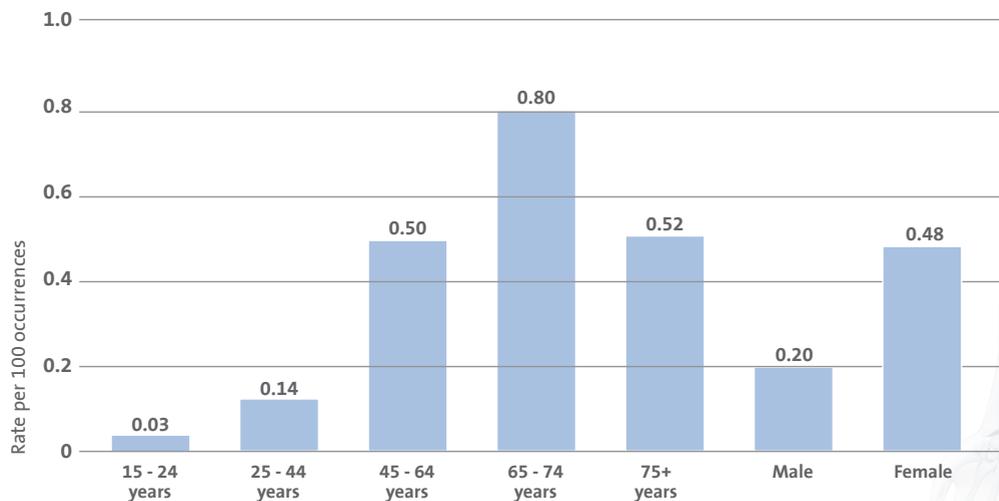
Rheumatoid Arthritis

Autoantibodies provoking permanent joint damage

What is Rheumatoid Arthritis?

Rheumatoid Arthritis, short RA, is a chronic, progressive, systemic autoimmune disease characterized by persistent joint inflammation. If left untreated, the disease leads to systemic complications, irreversible joint damage and invalidity. For effective treatment, an early diagnosis of RA is essential. Serologic markers can detect early-stage RA, thereby contributing to an improved outcome of RA therapy and reduction of the severity of joint damage.

Age and sex-specific rates of rheumatoid arthritis*



Adapted from Charles et al.²

* Some patients present several associated manifestations.

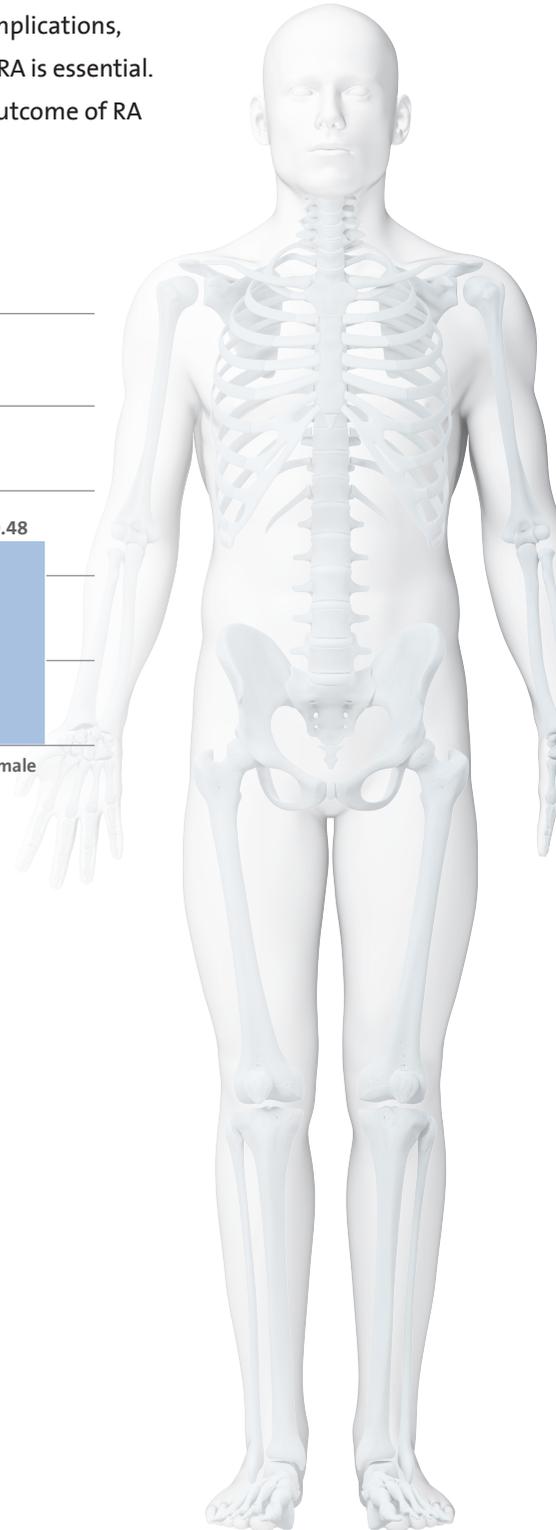
Joint affected by rheumatoid arthritis

Inflamed joint

High potential of rheumatoid arthritis



- > Inflammation of the bone and joint capsule
- > Cartilage erosion
- > Bone erosion



Rheumatoid Arthritis

How are autoantibodies used for diagnostics?

While diagnostics of RA relies on the 2010 published classification criteria by the American College for Rheumatology (ACR) / European Alliance of Associations for Rheumatology (EULAR), it is still important to note that patients in a preclinical state are already seropositive.

This means that autoantibodies including rheumatoid factor (RF) and anti-citrullinated protein (ACPA) can already be detected.

ACR / EULAR rheumatoid arthritis classification criteria⁷

Joint involvement	Points	Serology	Points
1 large joint	-	Negative RF and negative ACPA	-
2 - 10 large joints	●	Low-positive RF or low-positive ACPA	●●
1 - 3 small joints	●●	High-positive RF or high-positive ACPA	●●●
4 - 10 small joints	●●●		
> 10 joints	●●●●●		

Duration of symptoms	Points	Acute-phase reactants	Points
< 6 weeks	-	Normal CRP and normal ESR	-
> 6 weeks	●	Abnormal CRP or abnormal ESR	●

A patient with a score of 6 or more points is considered positive.

Rheumatoid factor is not specific for RA and may be present in patients with other diseases, such as hepatitis C, and in healthy older persons. An ACPA antibody is more specific for RA and may play a role in disease pathogenesis. It is noteworthy that around 50 to 80 percent of persons with RA have rheumatoid factor, anti-citrullinated protein antibody, or both. Patients with RA may have a positive antinuclear antibody test result, and the test is especially of prognostic importance in juvenile forms of this disease.

Ordering information

Name	Unit/Size	Format	REF
ARTHRITIS-LIA	24 tests	IgG / RF-IgM	ITC94000
RF IgM	96 Tests	IgG	ITC60003
RA33-ANTIBODIES	96 tests	IgG	ITC60015
CCP-ANTIBODIES	96 tests	IgG	ITC60021
HumaTex RF	100 Tests	Complete kit	40053
HumaTex RF	100 Tests	Latex reagent	40050

References

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