Acetycholine Receptor Antibodies

Synonyms	ACR, AChR Ab
Clinical Indication	ACR antibodies are indicated in the investigation of suspected Myasthenia Gravis (MG) in which muscles become fatigued very easily. Muscles around the eyes are commonly affected first (2 in 3 cases), causing drooping eyelids and double vision. Muscles around neck, face and throat are commonly affected causing difficulty in swallowing, speaking and chewing. Weakness in the arms, legs and other skeletal muscles may develop. Some patients may develop difficulty breathing as the disease progresses.
Part of Profile / See Also	MUSk antibodies
Request Form	Combined Pathology manual Blood form or ICE request
Availability / Frequency of Analysis	Referred test: Analysed by Immunology, Bart's and the Royal London Hospital (8285)
Turnaround Time	2 to 3 weeks
Patient Preparation	None required
Sample Requirements	*Please note a separate sample is required when Immunology tests are requested in addition to Biochemistry tests*
Specimen Type	Serum
Volume	1 ml
Container	 Yellow top (SST) tube  Paediatric Yellow top (SST) tube
Reference Range & Units	Negative: < 0.45 nmol/L Borderline: 0.45 – 1.0 nmol/L Positive: > 1.0 nmol/L
Interferences	
Interpretation & Clinical Decision Value (if applicable)	ACR antibodies are seen in over 80% of patients with MG, and are probably responsible for most of the symptoms. They may occur in ocular myasthenia and penicillamine-induced myasthenia at a lower frequency and are not seen in healthy individuals. Some patients with MG also have a thymoma and the presence of skeletal (striated) muscle antibodies can indicate this. Muscle specific kinase antibodies can be found in approx. 50-70% of ACR antibody-negative MG.

References	https://labtestsonline.org.uk/
Test code	ACR
Lab Handling	Aliquot and store at 4°C prior to testing and at -20°C or below for up to one month after receipt.

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