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| **PR3 Antibodies** |
| **Synonyms** |  | Serine proteinase 3 |
| **Clinical Indication** |  | Patients presenting with:* Glomerulonephritis, especially rapidly progressive glomerulonephritis
* Pulmonary haemorrhage, especially pulmonary renal syndrome
* Cutaneous vasculitis with systemic features
* Multiple lung nodules
* Chronic destructive disease of the upper airways
* Long-standing sinusitis or otitis
* Subglottic tracheal stenoses
* Mononeuritis multiplex or other peripheral neuropathy
* Retro-orbital mass
* Scleritis

Please note: All samples found to be ANCA IIF positive or to have an interfering ANA will be tested for the presence of MPO and PR3 antibodies.  |
| **Part of Profile / See Also** |  | ANCA positive samples have a pattern reported and have MPO and PR3 antibodies measured |
| **Request Form** |  | Combined Pathology manual Blood form or ICE request |
| **Availability / Frequency of Analysis** |  | Reflex test added by laboratory in response to positive ANCA Assay performed daily Monday to Friday |
| **Turnaround Time** |  | Tests are performed on the next routine working day after receipt of the sample. |
| **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** |  | 2 ml |
| **Container** |  |  Yellow top (SST) tubeOr  Paediatric Yellow top (SST) tube  |
| **Reference Range & Units** |  | Negative: <2.0 U/mLEquivocal: 2.0-3.0 U/mlPositive: >3.0 U/ml |
| **Interferences** |  | Heavily haemolysed or lipaemic samples are not suitable.  |
| **Interpretation & Clinical** **Decision Value (if applicable)** |  | The assay should not be considered diagnostic and a definitive diagnosis should not be based on the results of this assay alone.PR3 directed c-ANCA is present in 80-90% of granulomatosis with polyangiitis (GPA, Wegener’s granulomatosis), 20-40% of microscopic polyangiitis, 20-40% of pauci-immune crescentic glomerulonephritis and 35% of eosinophilic granulomatosis with polyangiitis (EGPS, Churg-Strauss syndrome). |
| **References** |  | https://labtestsonline.org.uk |
| **Test code** |  | MPPR |
| **Lab Handling** |  | Aliquot and store at 4°C. |