



Cardiolipin Antibodies

Synonyms

Anti-cardiolipin antibodies, ACA, ACLIP, phospholipid antibodies

Clinical Indication

Suspicion of antiphospholipid syndrome (APS, Hughes syndrome). Diagnosis of APS requires a clinical history of vascular thrombosis or pregnancy morbidity, together with positive lupus anticoagulant or elevated cardiolipin antibodies (ACA) on two or more occasions 12 weeks apart.

Requests from Haematology/Coagulation clinics, obstetrics and gynaecology, Rheumatology or stroke wards/clinics will be tested to IgG and IgM antibodies to cardiolipin and beta-2-glycoprotein-1.

Requests from all other sources will be tested for IgG antibodies to cardiolipin and beta-2-glycoprotein-1. If there is strong clinical suspicion of anti-phospholipid syndrome we suggest discussion with Clinical Haematology and initially tests for the IgG antibodies. If you would like to discuss further, please contact the Immunology Consultants on 0208 725 5106.

No repeat testing within 3 months

Part of Profile / See Also

Request Form

Combined Pathology manual Blood form or ICE request

Availability / Frequency of Analysis

IgG assay is performed daily Monday – Friday
 IgM assay is performed **twice per week**

Turnaround Time

2 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

2 ml

Container



Yellow top (SST)



Paediatric Yellow top (SST)

Reference Range & Units

Cardiolipin IgG reported in GPLU/ml, IgM in MPLU/ml

Cardiolipin IgG and IgM antibodies:

Negative	0 – 9.9
Equivocal	10 – 40
Positive	>40

Interferences

Rheumatoid factor can interfere with the detection of ACA IgM. Lipaemic and haemolysed samples are not suitable for testing.

Interpretation & Clinical

Decision Value (if applicable)

The likelihood of APS is increased if both **cardiolipin** and Beta-2 GP1 are positive, but APS is possible with only **cardiolipin** positive. Positive **cardiolipin antibodies** may also be seen in other autoimmune conditions and infection, which may be cryptic, should be excluded. Positive results should be repeated after 12 weeks to check they are not transient.

References

<https://labtestsonline.org.uk/tests/cardiolipin-antibodies>

Test code

ACAG

Lab Handling

Aliquot and stored at 4°C.