Test Definition: ALUPI

Lupus Anticoagulant Profile, Technical Interpretation

Overview

Useful For

Technical interpretation of testing to confirm or exclude the presence of lupus anticoagulant (LAC)

Distinguishing LAC from specific coagulation factor inhibitors and nonspecific inhibitors

Investigating a prolonged activated thromboplastin time, especially when combined with other coagulation studies

This test is **not useful** for the detection of antiphospholipid antibodies that do not affect coagulation tests. We recommend separate testing for serum phospholipid (cardiolipin) antibodies.

Method Name

Only orderable as part of a profile. For more information see ALUPP / Lupus Anticoagulant Profile, Plasma.

Technical Interpretation

NY State Available

Yes

Specimen

Specimen Type

Plasma Na Cit

Specimen Required

Only orderable as part of a profile. For more information see ALUPP / Lupus Anticoagulant Profile, Plasma.

Reject Due To

Gross hemolysis	Reject
Gross lipemia	Reject
Gross icterus	Reject

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Plasma Na Cit	Frozen	14 days	

Clinical & Interpretive

Clinical Information

Lupus anticoagulant (LAC) is an antibody to negatively charged phospholipid that interferes with phospholipid-dependent coagulation tests.

LAC is found in, but not limited to, patients with systemic lupus erythematosus; LAC is associated with other autoimmune disorders and collagen vascular disease, occurs in response to medications or certain infections (eg, respiratory tract infections in children), and in individuals with no obvious underlying disease.

LAC has been associated with arterial and venous thrombosis and fetal loss. Individuals with thrombocytopenia or factor II deficiency associated with LAC may be at risk for bleeding.

Reference Values

Only orderable as part of a profile. For more information see ALUPP / Lupus Anticoagulant Profile, Plasma.

An interpretive report will be provided.

Interpretation

When testing is complete, if the prothrombin time, activated partial thromboplastin time, and dilute Russell's viper venom time fall within clinically normal ranges, an interpretive comment will be provided noting no evidence of a lupus anticoagulant.

Cautions

Patient should not be receiving warfarin or heparin. If the patient is currently on warfarin or heparin, this should be noted, treatment with heparin causes false-positive results of in vitro coagulation testing for lupus anticoagulant. Coumadin treatment may impair ability to detect the more subtle varieties of lupus-like anticoagulants.

Clinical Reference

1. Arnout J, Vermylen J. Current status and implications of autoimmune antiphospholipid antibodies in relation to thrombotic disease. J Thromb Haemost 2003;1(5):931-942
2. Levin JS, Branch DW, Rauch J. The antiphospholipid syndrome. New Engl J Med 2002;346(10):752-763
3. Proven A, Bartlett RP, Moder KG, et al. Clinical importance of positive tests for lupus anticoagulant and anticardiolipin antibodies. Mayo Clin Proc 2004;79(4):467-475

Performance

Method Description

If the prothrombin time, activated partial thromboplastin time, and dilute Russell viper venom time are normal, a computer-generated interpretive comment will be provided indicating no evidence of a lupus anticoagulant.

PDF Report

No

Day(s) Performed
Monday through Friday

Report Available
3 to 5 days

Specimen Retention Time
7 days

Performing Laboratory Location
Mayo Clinic Laboratories - Rochester Main Campus

Fees & Codes

Fees
- Authorized users can sign in to Test Prices for detailed fee information.
- Clients without access to Test Prices can contact Customer Service 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact Customer Service.

Test Classification
Not Applicable

CPT Code Information
85390

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
ALUPI	Lupus Anticoagulant Tech Interp	75882-1

Result ID	Test Result Name	Result LOINC® Value
ALUPI	Lupus Anticoagulant Tech Interp	75882-1