

## **Test Definition: SP5TS**

Septin-5 Antibody, Tissue Immunofluorescence Titer, Serum

#### Overview

#### **Useful For**

Detecting septin-5 IgG in serum specimens

Reporting an end titer result from serum specimens

#### Testing Algorithm

If the indirect immunofluorescence pattern suggests septin-5, then septin-5 antibody cell-binding assay and this test will be performed at an additional charge.

#### Method Name

Only orderable as a reflex. For more information see MDS2 / Movement Disorder, Autoimmune/Paraneoplastic Evaluation, Serum.

Indirect Immunofluorescence Assay (IFA)

### NY State Available

Yes

#### Specimen

### Specimen Type

Serum

#### **Specimen Required**

Only orderable as a reflex. For more information see MDS2 / Movement Disorder, Autoimmune/Paraneoplastic Evaluation, Serum.

#### **Collection Container/Tube:**

Preferred: Red top
Acceptable: Serum gel
Submission Container/Tube: Plastic vial
Specimen Volume: 1 mL
Collection Instructions: Centrifuge and aliquot serum into a plastic vial.

#### Specimen Minimum Volume

See Specimen Required

#### **Reject Due To**



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Gross	Reject
hemolysis	
Gross lipemia	Reject
Gross icterus	Reject

#### **Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	28 days	
	Ambient	72 hours	
	Frozen	28 days	

#### Clinical & Interpretive

#### **Clinical Information**

Septin-5 IgG is a biomarker of a rapidly progressive, but treatable, form of autoimmune cerebellar ataxia. Patients present with subacute onset of cerebellar ataxia with prominent eye movement symptoms (oscillopsia or vertigo). Improvement may occur after immunotherapy.

#### **Reference Values**

Only orderable as a reflex. For more information see MDS2 / Movement Disorder, Autoimmune/Paraneoplastic Evaluation, Serum.

<1:240

#### Interpretation

Seropositivity for septin antibodies by indirect immunofluorescence is consistent with a diagnosis of autoimmune disease of the central nervous system. Cell-binding assay testing for septin-5 IgG is required to confirm the diagnosis.

#### Cautions

Negative results for septin antibodies do not exclude neurological autoimmunity or cancer.

#### **Clinical Reference**

1. Honorat JA, Lopez-Chiriboga AS, Kryzer TJ, et al: Autoimmune septin-5 cerebellar ataxia. Neurol Neuroimmunol Neuroinflamm. 2018 Jul 9;5(5):e474

2. Honorat JA, Miske R, Scharf M, et al: 416. Neuronal septin autoimmunity: Differentiated serological profiles and clinical findings. Ann Neurol. 2020 Oct;88(Suppl 25):S55. Abstract

#### Performance



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#### **Method Description**

The patient's specimen is tested by a standardized immunofluorescence assay that uses a composite frozen section of mouse cerebellum, kidney, and gut tissues. After incubation with the specimen and washing, fluorescein-conjugated goat-antihuman IgG is applied. Neuron-specific autoantibodies are identified by their characteristic fluorescence staining patterns. Specimens that are scored positive for any neuronal nuclear or cytoplasmic autoantibody are titrated. Interference by coexisting non-neuron-specific autoantibodies can usually be eliminated by serologic absorption.(Honorat JA, Komorowski L, Josephs KA, et al. IgLON5 antibody: Neurological accompaniments and outcomes in 20 patients. Neurol Neuroimmunol Neuroinflamm. 2017;4[5]:e385. Published 2017 Jul 18. doi:10.1212/NXI.00000000000385)

PDF Report

Day(s) Performed Monday through Sunday

**Report Available** 5 to 10 days

Specimen Retention Time 28 days

**Performing Laboratory Location** Mayo Clinic Laboratories - Rochester Main Campus

#### Fees & Codes

#### Fees

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

#### **Test Classification**

This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. It has not been cleared or approved by the US Food and Drug Administration.

#### **CPT Code Information**

86256

#### LOINC<sup>®</sup> Information

Test ID	Test Order Name	Order LOINC <sup>®</sup> Value
SP5TS	Septin-5 IFA Titer, S	101458-8



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Result ID	Test Result Name	Result LOINC <sup>®</sup> Value
616113	Septin-5 IFA Titer, S	101458-8