

Overview**Useful For**

Evaluating patients with suspected autoimmune encephalitis and autoimmune epilepsy using spinal fluid specimens

Method Name

Cell-Binding Assay (CBA)

NY State Available

Yes

Specimen**Specimen Type**

CSF

Specimen Required

Container/Tube: Sterile vial

Preferred: Collection vial number 1

Acceptable: Any collection vial

Specimen Volume: 1 mL

Forms

[If not ordering electronically, complete, print, and send a Neurology Specialty Testing Client Test Request \(T732\)](#) with the specimen.

Specimen Minimum Volume

0.4 mL

Reject Due To

Gross hemolysis	Reject
Gross lipemia	Reject
Gross icterus	Reject

Specimen Stability Information

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

Clinical & Interpretive

Clinical Information

Gamma-amino butyric acid type A (GABA-A) receptor autoantibodies are highly predictive of GABA-A receptor autoimmune encephalitis. Patients who are seropositive for GABA-A receptor encephalitis have characteristic clinical-radiologic presentations including frequent seizures and multifocal lesions in the white matter. The majority of patients are treatable with immunotherapy.

Reference Values

Negative

Interpretation

Seropositivity for gamma-amino butyric acid type A receptor autoantibodies supports the clinical diagnosis of autoimmune encephalitis with neurological presentations including seizures and multifocal lesions in the white matter. A search for thymoma cancer and a trial of immunotherapy should be considered.

Cautions

Negative results do not exclude the diagnosis of autoimmune encephalitis. Only 2% of autoimmune encephalitis cases are associated with autoantibodies against gamma-amino butyric acid type A receptor.

Clinical Reference

1. O'Connor K, Waters P, Komorowski L, et al. GABA receptor autoimmunity: A multicenter experience. *Neurol Neuroimmunol Neuroinflamm*. 2019;6(3):e552. doi:10.1212/NXI.0000000000000552
2. Spatola M, Petit-Pedrol M, Simabukuro MM, et al. Investigations in GABA receptor antibody-associated encephalitis. *Neurology*. 2017; 88(11):1012-1020. doi:10.1212/WNL.0000000000003713
3. Waters P, Irani S. GABA-A receptor antibodies and their clinical associations. *Neurology*. 2017;88:1010-1011
4. Petit-Pedrol M, Armangue T, Peng X, et al. Encephalitis with refractory seizures, status epilepticus, and antibodies to the GABA receptor: a case series, characterization of the antigen, and analysis of the effects of antibodies. *Lancet Neurol*. 2014;13(3):276-286

Performance

Method Description

Patient specimen is applied to a composite slide containing transfected and nontransfected EU90 cells. After incubation and washing, fluorescein-conjugated goat-antihuman IgG is applied to detect the presence of patient IgG binding. (Package insert: IIFT: Neurology Mosaics, Instructions for the indirect immunofluorescence test. EUROIMMUN,

FA_112d-1_A_UK_C13, 02/25/2019**PDF Report**

No

Day(s) Performed

Monday through Sunday

Report Available

5 to 10 days

Specimen Retention Time

2 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

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

86255

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
GBACC	GABA-A-R Ab CBA, CSF	103715-9
Result ID	Test Result Name	Result LOINC® Value
620231	GABA-A-R Ab CBA, CSF	103715-9