Antinuclear Antibody, Rheumatoid Factor, and Cyclic Citrullinated Peptide Tests For Evaluating Musculoskeletal Complaints In Children Comparative Effectiveness Review Number 50

Antinuclear Antibody, Rheumatoid Factor, and Cyclic Citrullinated Peptide Tests For Evaluating Musculoskeletal Complaints In Children Executive Summary Background Musculoskeletal (MSK) pain is common in children and adolescents, with an estimated prevalence ranging from 2 to 50 percent. This pain can affect physical and emotional development and can result in decreased participation in school and other activities. Laboratory tests in rheumatology: A rational approach for interpreting selected tests, including rheumatoid factor, anticitrullinated peptide antibody, antinuclear antibody, and antineutrophil cytoplasmic antibody. Antinuclear antibody (ANA) titer, which occurs in 94% to 97% of MCTD patients, is often positive.

Autoimmune diseases like rheumatoid arthritis create a lot of health risks and challenges. Learn more about the signs, symptoms and treatments for rheumatoid arthritis. Vintage furniture is a great and unique addition to any home. We've put together tips on where to shop, what to look for, and how to spot a great deal. Find out more about our ad style and the correct way to spell it here. Rheumatoid factor. Rheumatoid factor (RF) is an antibody to immunoglobulins. RF is present in the serum of patients with rheumatoid arthritis (RA) and is a marker of inflammation, disease activity, and joint damage. Antinuclear antibody (ANA) is found in approximately 50% of RA patients. Antinuclear antibody (ANA) and rheumatoid factor (RF) are laboratory tests applied to identify potential autoimmunity along with basic metabolic panels.

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cross-reactive RF in sera, tests employing blocking of the antinuclear fluorescence reaction (ANF) were performed.

**Mixed Connective Tissue Disease – The Grey Area**

Her antinuclear antibody test was positive at 1:320 and her rheumatoid factor was positive. However, her anti-double-stranded DNA antibody test, nDNA (Crithidia) antibody test, and SSA/SSB antibodies were all negative. She had a mild positive IgM Cardiolipin Ab test. Rheumatology was consulted and the diagnosis of a mixed connective tissue disease (MCTD) was made.

**A 47-Year Old Woman With Rapidly Progressive - Chest**

She was referred to the rheumatology clinic with a 2-month history of progressive fatigue, malaise, and weight loss. Her antinuclear antibody test was positive at 1:320 and her rheumatoid factor was positive. However, her anti-double-stranded DNA antibody test, nDNA (Crithidia) antibody test, and SSA/SSB antibodies were all negative. She had a mild positive IgM Cardiolipin Ab test. Rheumatology was consulted and the diagnosis of a mixed connective tissue disease (MCTD) was made.

**Clinical Significance of Serum Autoantibodies in**

Antinuclear antibody was positive in 34.5% of all subjects, rheumatoid factor in 13.2%, and other specific autoantibodies were positive between 0.7%-6.8% of the cases. No significant difference in patient survival was found between the antinuclear antibody-positive and -negative groups. However, the presence of autoantibodies, especially antinuclear antibody with a titer of 1:160 (centromere pattern), was associated with a worse prognosis.

**Pediatric Rheumatology BioMed Central**

There is never a reason to request a rheumatoid factor assay as a diagnostic test on a child. Pediatric rheumatologists will, however, continue to use rheumatoid factor testing as a prognostic biomarker until better indicators of prognosis emerge. Antinuclear antibody (ANA) assays have the opposite shortcoming of RF assays: they are commonly positive in a subset of healthy individuals.

**Arthritis as an initial presentation of malignancy: a case**

Antinuclear antibody at a titer of 1:160 (centromere pat-tern). Rheumatoid factor (RF) was negative, and a routine chest radiograph was unremarkable. X-rays of the hands Fig. 1 Chest X-ray (posteroanterior erect view) with mass over the right lower lobe Fig. 2 Sagittal computed tomography scan of the thorax.

**ANAlzyeRTM ANA, IFA with Reflex Titer/Pat tern, Systemic**

Comparison with healthy controls: RF and CCP antibody were 59 99 99 99 14-3-3η RF and CCP antibody: 72 84 88 84 RF, CCP antibody, and 14-3-3η: 78 78 90 78 CCP, cyclic citrullinated peptide; RA, rheumatoid arthritis; RF, rheumatoid factor; a Early RA indicates disease history of 6 months or less. Established RA indicates disease history of >6 months. b Comparison with healthy controls.