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## Ssb lab test

Extractable Nuclear Antigens (ENAs) and Autoimmune Disorders: A Comprehensive Overview The immune system mistakenly attacks healthy tissues when producing autoantibodies to extractable nuclear antigens (ENAs). The ENA panel detects these autoantibodies in blood samples to diagnose autoimmune disorders. There are over 100 different soluble nuclear and cytoplasmic antigens, which include six main proteins: Ro, La, Sm, RNP, Scl-70, and Jo1. These proteins are part of spliceosome or nucleosome complexes and associate with additional RNA and proteins, making them difficult to purify and quantify. The ENA panel helps diagnose and distinguish between autoimmune disorders, as well as monitor disease progression. ### Signs and Symptoms Autoimmune disorder signs and symptoms are highly variable and can affect multiple body areas. These may include: Fever Persistent fatigue Muscle pain Joint swelling or pain Skin rash Hair loss or scalp hair loss Sensitivity to ultraviolet light Raynaud phenomenon Protein in the urine (proteinuria) Neurologic symptoms such as seizures, depression, and psychoses Hemolytic anemia (low red blood cell count) or leukopenia (low white blood cell count) ### Anti-ENA Test Results The anti-ENA test supports a diagnosis of autoimmune disorders. Positive results are seen in: Anti-RNP: 95-100% of mixed connective tissue disease (MCTD) cases Anti-Sm: 30% of those with lupus Anti-SS-A (Ro): 75% of those with Sjögren syndrome Anti-SS-B (La): 60% of those with Sjögren syndrome Anti-Scl-70: 60% of those with scleroderma Anti-Jo-1: 30% of those with polymyositis ### References Extractable Nuclear Antigens (ENAs) and Autoimmune Disorders: Diagnosis and Treatment Anticorps dirigés contre les antigènes nucléaires extractibles (ENA) sont des autoanticorps produits lorsque le système immunitaire attaque par erreur les tissus du corps. Le panneau ENA détecte ces autoanticorps dans le sang pour aider à diagnostiquer les troubles auto-immuns. Les antigènes nucléaires extractibles (ENA) sont plus de 100 antigènes solubles nucléaires et cytoplasmiques différents, connus sous le nom d'« extractibles » car ils peuvent être supprimés des noyaux cellulaires à l'aide d'une solution saline. Ils représentent six protéines principales : Ro, La, Sm, RNP, Scl-70 et Jo1. La plupart des ENA font partie de complexes de spliceosome ou de nucléosome et sont un type de petit ribonucléoprotéine nucléaire (snRNPs). Le panneau ENA est commandé lorsque une personne présente des signes et des symptômes qui pourraient être dus à un trouble auto-immun et à un test ANA positif. Les résultats du test peuvent aider à diagnostiquer et à distinguer les troubles auto-immuns, ainsi qu'à surveiller la progression de la maladie auto-immune. Les anticorps anti-RNP, anti-Sm, anti-SS-A (Ro), anti-SS-B (La), anti-Scl-70 et anti-Jo-1 sont quelques-uns des autoanticorps qui peuvent être détectés par le panneau ENA. Chacun de ces autoanticorps est associé à des troubles auto-immuns spécifiques, tels que la maladie de Sjögren, le lupus ou la sclérodermie. Le test ENA est généralement effectué sur un échantillon de sang prélevé d'une veine du bras et ne nécessite pas de préparation particulière. Les résultats du test peuvent aider les professionnels de la santé à diagnostiquer et à traiter les troubles auto-immuns de manière efficace. Il est important de noter que le contenu de cet article est à titre informatif uniquement et qu'il convient de consulter des professionnels de la santé qualifiés pour obtenir des conseils médicaux, un diagnostic ou un traitement. Sjögren's syndrome is an autoimmune disorder where the body mistakenly attacks its own glands that produce moisture, such as tear and salivary glands. This chronic, inflammatory disease can progress to a more complex condition affecting other parts of the body, like joints, skin, kidneys, lungs, and the nervous system. Women are nine times more likely than men to develop Sjögren's syndrome, especially those over 40. The cause of Sjögren's syndrome is not known but may be a combination of genetic and environmental factors. A possible trigger could be a bacterial or viral infection in people who are already predisposed to the disorder. Symptoms can vary greatly from person to person and change over time, making diagnosis challenging. Common symptoms include dry eyes, mouth, skin, and respiratory issues. According to estimates, between 1-4 million people in the United States have Sjögren's syndrome. Women are more likely than men to be affected, with women over 40 being the majority of those afflicted. Testing for Sjögren's syndrome involves looking at symptoms and performing various tests, including blood work and biopsies. The presence of anti-SSA antibodies is often found in people with Sjögren's syndrome but can also appear in lupus patients. Lupus Erythematosus patients with secondary Sjögren's syndrome typically lack anti-SSA and SS-B antibodies. When these antibodies are present in lupus patients, it's often in those without antinuclear antibodies (ANA), suggesting a different subset of the disease. The presence of both anti-SSA and SS-B is associated with older age, HLA-DR3, and lower likelihood of anti-DNA antibodies. Conversely, absence of anti-La/SSB but presence of anti-SSA is linked to younger age, HLA-DR2, severe renal manifestations, and higher likelihood of anti-DNA antibodies. Sjögren's Syndrome has two associated antibodies: SS-A (Ro) and SS-B. These are found in 15% and 60-90% of patients with Sjögren's Syndrome respectively, and 30-40% of lupus patients, indicating specific subsets within each disease. Treatment for Sjögren's syndrome mainly focuses on symptom relief, preventing complications like infections, and dental diseases. Most treatments do not completely eliminate the symptoms of dryness. Clinical references include studies on serum rheumatologic tests, primary Sjögren's syndrome diagnosis and treatment, biomarkers for Sjögren's Syndrome, epidemiology, and genetic associations with autoimmune responses in Sjögren's Syndrome. A disclaimer notes that the information provided is not intended to replace a relationship with a healthcare professional or serve as medical advice. The turnaround time for certain tests can vary depending on confirmatory or reflex tests required. The ENA panel is used to help diagnose and monitor autoimmune disorders by detecting autoantibodies in the blood. These antibodies are produced when the immune system mistakenly attacks the body's own tissues. The panel tests for specific autoantibodies, including Anti-RNP Negative result seen in 95-100% of mixed connective tissue disease (MCTD) cases; may also be positive with lupus and scleroderma Anti-Sm Positive result seen in 30% of those with lupus; very specific antibody marker for this disease Anti-SS-A (Ro) Positive result seen in 75% of those with Sjögren syndrome; may also be positive with lupus and scleroderma Anti-SS-B (La) Positive result seen in 60% of those with Sjögren syndrome; may also be positive with lupus and scleroderma; rarely present without anti-SS-A Anti-Scl-70 Positive result seen in 60% of those with scleroderma; highly specific antibody marker for this disease Anti-Jo-1 Positive result seen in 30% of those with polymyositis; may be positive with pulmonary fibrosis This test is typically ordered when a person has symptoms that suggest an autoimmune disorder and has a positive ANA (antinuclear antibody) test. The signs and symptoms of autoimmune disorders can vary widely, but common ones include fever, fatigue, muscle pain, joint swelling, skin rash, hair loss, and sensitivity to ultraviolet light. The ENA panel is used to help diagnose and distinguish between various autoimmune disorders, including lupus, scleroderma, and Sjögren syndrome. It can also be used to monitor the progression of these diseases over time. Anti-SSB, SSB (La), Anti-Sjögren Syndrome B, and other antibodies are used to help diagnose and distinguish between autoimmune disorders. These tests also monitor the progression of autoimmune disease when antinuclear antibody (ANA) tests come back positive and symptoms suggest an autoimmune disorder is present. The ENA panel is ordered for individuals who show signs and symptoms that could be due to an autoimmune disorder, such as fever, fatigue, muscle pain, joint swelling, skin rash, hair loss, or sensitivity to ultraviolet light. The panel may also include tests for anti-RNPA, Anti-Sm, Anti-SS-A (Ro), Anti-SS-B (La), Anti-Scl-70, and Anti-Jo-1. A positive result in these antibody tests can support a diagnosis of autoimmune disorders such as mixed connective tissue disease, lupus, scleroderma, Sjögren syndrome, polymyositis, and pulmonary fibrosis.