



UNC
HEALTH CARE

MEMORANDUM #139

TO: UNC Hospitals Attending Physicians, Housestaff, Nursing Coordinators,
Department Heads and Supervisors

FROM: *JS* John L. Schmitz, Ph.D., Assoc. Director, Clinical Microbiology/Immunology Laboratories
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SUBJECT: **Anti-Mitochondrial A**

DATE: September 28, 2012

Effective October 5, 2012, the Clinical Immunology Laboratory will offer Anti-Mitochondrial Antibody (AMA) testing. AMAs are detected in up to 95% of patients with Primary Billiary Cirrhosis.

AMA testing is performed with an ELISA based assay using affinity purified recombinant MIT3 antigen. The MIT3 antigen contains immunodominant portions of the pyruvate dehydrogenase complex (PDC-E2), the branched-chain 2-oxo-acid dehydrogenase complex (BCOADC-E2), and the 2-oxo glutarate dehydrogenase complex (OGDC-E2). The ELISA assay used is a qualitative test that generates results in arbitrary units.

The results of the AMA test will be reported as "Negative", "Equivocal" or "Positive" based on the following:

Negative	≤ 20 Units
Equivocal	20.1 – 24.9 Units
Positive	≥ 25 Units

A negative result indicates no antibody or antibody levels below the detection limit of the assay. Equivocal results should prompt the collection and retesting of a new sample at a later time. A positive result indicates the presence of antibody to the MIT3 antigen. The level of antibody cannot be correlated to an endpoint titer as this is a qualitative test.

To order, browse for "Mitochondrial Ab" in A2K/SMS.

Please contact the Immunology Laboratory at 966-4058 or Dr. John Schmitz at 966-8453 with any questions.