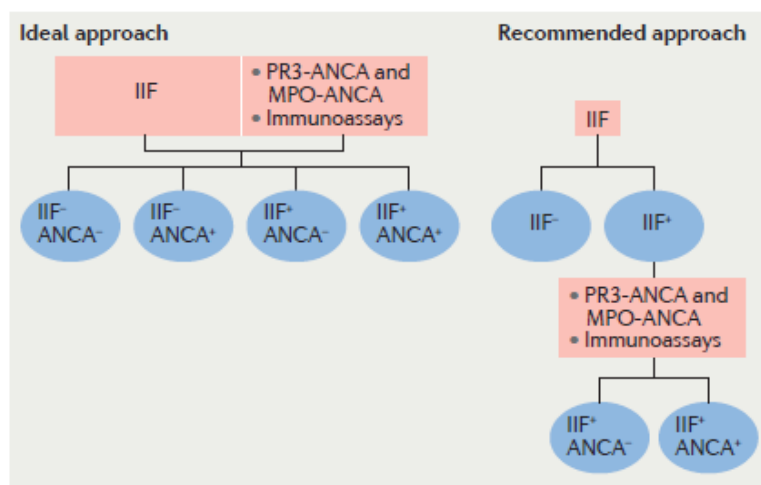


POSITION PAPER

Revised 2017 international consensus on testing of ANCAs in granulomatosis with polyangiitis and microscopic polyangiitis

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a 1999 consensus



b 2017 consensus

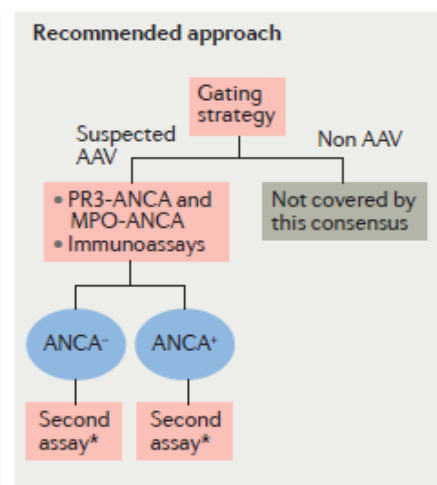


Figure 3 | Visual representation of the 1999 recommendations and revised 2017 recommendations. a) In the 1999 consensus document, the recommended approach for anti-neutrophil cytoplasmic antibody (ANCA) detection was to screen for ANCA by indirect immunofluorescence (IIF) and to test for proteinase 3 (PR3)-ANCAs and myeloperoxidase (MPO)-ANCAs in IIF-positive samples; the ideal approach was to perform IIF and immunoassay on all samples. b) In the 2017 consensus, the use of high-quality immunoassays is recommended as the preferred first screening method for ANCA detection in patients suspected of having the ANCA-associated vasculitides granulomatosis with polyangiitis (GPA) and microscopic polyangiitis (MPA). ANCA detection for non-ANCA-associated vasculitis conditions is not included in this consensus. *A second PR3-MPO-ANCA or IIF can be considered for negative results in patients with a high clinical suspicion (to increase sensitivity) or in case of low antibody levels (to increase specificity). Take antibody level into account.