

Overview

Useful For

Evaluating patients with suspected autoimmune encephalitis and autoimmune epilepsy using serum specimens

Method Name

Cell-Binding Assay (CBA)

NY State Available

Yes

Specimen

Specimen Type

Serum

Specimen Required

**Supplies:** Sarstedt Aliquot Tube, 5 mL (T914)

**Collection Container/Tube:**

**Preferred:** Red top

**Acceptable:** Serum gel

**Submission Container/Tube:** Plastic vial

**Specimen Volume:** 0.3 mL

**Collection Instructions:** Centrifuge and aliquot serum into a plastic vial.

Forms

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

Specimen Minimum Volume

0.25 mL

Reject Due To

Gross hemolysis	Reject
Gross lipemia	Reject
Gross icterus	Reject

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Serum	Ambient	72 hours	
	Refrigerated (preferred)	28 days	
	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. 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. GABAA 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 GABAA 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 GABAA 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

28 days

Performing Laboratory Location

Rochester

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
GBACS	GABA-A-R Ab CBA, S	101874-6

Result ID	Test Result Name	Result LOINC® Value
620232	GABA-A-R Ab CBA, S	101874-6