

Gliadin (Deamidated) Antibody (IgG)

CPT Code: 86258

Order Code: 11212

ABN Requirement: No

Specimen: Serum

Volume: 1.0 mL

Minimum Volume: 0.5 mL

Container: Gel-barrier tube (SST)

Collection:

1. Collect and label sample according to standard protocols.
2. Gently invert tube 5 times immediately after draw. Do not shake.
3. Let tube stand in a vertical position to allow blood to clot 30 minutes.
4. Centrifuge for 10 minutes.

Transport: Store serum at 2°C to 8°C after collection and ship the same day per packaging instructions included with the provided shipping box.

Stability:

Ambient (15-25°C): 7 days

Refrigerated (2-8°C): 14 days

Frozen (-20°C): 30 days

Causes for Rejection: Specimens other than serum; improper labeling; samples not stored properly; samples older than stability limits; gross hemolysis; gross lipemia

Methodology: Immunoassay (IA)

Turn Around Time: 3 to 5 days

Reference Range:

| | |
|------------|-----------------------|
| <15.0 U/mL | Antibody Not Detected |
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| | |
|------------|-------------------|
| ≥15.0 U/mL | Antibody Detected |
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Clinical Significance: Detection of antibodies to gliadin, one of the major protein components of gluten, is a sensitive assay useful in diagnosing celiac disease. However, gliadin antibodies may be found in individuals without celiac disease; thus, gliadin antibody assays are less specific than assays measuring antibodies to endomysium and transglutaminase. Recent work has revealed that gliadin-reactive antibodies from celiac patients bind to a very limited number of specific epitopes on the gliadin molecule. Further, deamidation of gliadin results in enhanced binding of gliadin antibodies. Based on this information, assays using deamidated gliadin peptides bearing the celiac-specific epitopes have much higher diagnostic accuracy for celiac disease when compared to standard gliadin antibody assays.

The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.