



## Test Definition: APBTC

Adaptor Protein 3 Beta2 (AP3B2) Antibody,  
Tissue Immunofluorescence Titer, Spinal Fluid

### Overview

#### Useful For

The differential diagnosis of patients presenting with mixed cerebellar and sensory ataxia and myeloneuropathy

Reporting an end titer result from spinal fluid specimens

#### Testing Algorithm

If the indirect immunofluorescence pattern suggests AP3B2 (adaptor protein 3 beta2), then AP3B2 antibody cell-binding assay (CBA) and this test will be performed at an additional charge.

#### Method Name

Only orderable as part of a profile. For more information see:

-MAC1 / Myelopathy, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid

-MDC2 / Movement Disorder, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid

Indirect Immunofluorescence Assay (IFA)

#### NY State Available

Yes

### Specimen

#### Specimen Type

CSF

#### Specimen Required

Only orderable as part of a profile. For more information see:

-MAC1 / Myelopathy, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid

-MDC2 / Movement Disorder, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid

**Container/Tube:** Sterile vial

**Preferred:** Vial number 1

**Acceptable:** Any vial

**Specimen Volume:** 1.5 mL

#### Specimen Minimum Volume

See Specimen Required

#### Reject Due To

|                 |        |
|-----------------|--------|
| Gross hemolysis | Reject |
| Gross lipemia   | Reject |
| Gross icterus   | Reject |

## Specimen Stability Information

| Specimen Type | Temperature              | Time     | Special Container |
|---------------|--------------------------|----------|-------------------|
| CSF           | Refrigerated (preferred) | 28 days  |                   |
|               | Ambient                  | 72 hours |                   |
|               | Frozen                   | 28 days  |                   |

## Clinical & Interpretive

### Clinical Information

AP3B2 (adaptor protein 3 beta2)-IgG is a marker of an autoimmune disorder unified by gait instability as the predominant neurologic presentation. Patients present with either cerebellar, dorsal column, or sensory neuronal dysfunction. Clinical improvement following treatment has been reported. AP3B2 autoimmunity appears rare, is accompanied by ataxia (sensory or cerebellar), and is potentially treatable.

### Reference Values

Only orderable as part of a profile. For more information see:

- MAC1 / Myelopathy, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid
- MDC2 / Movement Disorder, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid

<1:2

### Interpretation

A positive result supports a diagnosis of neurological autoimmunity. Neurological phenotypes encountered include cerebellar ataxia, spinocerebellar ataxia, myelopathy, sensory neuronopathy and autonomic neuropathy. Neurological stabilization or improvement may occur with immune therapy.

### Cautions

A negative result does not exclude neurological autoimmunity or cancer.

### Clinical Reference

Honorat JA, Lopez-Chiriboga AS, Kryzer, TJ, et al: Autoimmune gait disturbance accompanying adaptor protein-3B2-IgG. *Neurology*. 2019 Sep 3;93(10):e954-e963

## Performance

**Method Description**

The patient's specimen is tested by a standardized immunofluorescence assay that uses a composite frozen section of mouse cerebellum, kidney, and gut tissues. After incubation with the specimen and washing, fluorescein-conjugated goat-antihuman IgG is applied. Neuron-specific autoantibodies are identified by their characteristic fluorescence staining patterns. Specimens that are scored positive for any neuronal nuclear or cytoplasmic autoantibody are titrated. Interference by coexisting non-neuron-specific autoantibodies can usually be eliminated by serologic absorption. (Honorat JA, Komorowski L, Josephs KA, et al. IgLON5 antibody: Neurological accompaniments and outcomes in 20 patients. *Neurol Neuroimmunol Neuroinflamm*. 2017;4(5):e385. Published 2017 Jul 18. doi:10.1212/NXI.0000000000000385)

**PDF Report**

No

**Day(s) Performed**

Monday through Sunday

**Report Available**

5 to 10 days

**Specimen Retention Time**

2 days

**Performing Laboratory Location**

Mayo Clinic Laboratories - Rochester Main Campus

**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**

86256

**LOINC® Information**

| Test ID | Test Order Name      | Order LOINC® Value |
|---------|----------------------|--------------------|
| APBTC   | AP3B2 IFA Titer, CSF | 101908-2           |

## Test Definition: APBTC

Adaptor Protein 3 Beta2 (AP3B2) Antibody,  
Tissue Immunofluorescence Titer, Spinal Fluid

| Result ID | Test Result Name     | Result LOINC® Value |
|-----------|----------------------|---------------------|
| 616110    | AP3B2 IFA Titer, CSF | 101908-2            |