Novel serological markers for inflammatory bowel disease (IBD) **improve sensitivity and specificity** to aid in differential diagnosis and provide valuable prognostic information about disease behavior.

**Clinical Application**
- Five-marker IBD profile identifies and differentiates patients with ulcerative colitis (UC) and Crohn’s disease (CD)
- Reported up to 97% specificity in differentiating UC from CD\(^1,2,3\)
- Reported up to 70% sensitivity in identifying patients with UC\(^4,5\)
- Reported up to 85.5% sensitivity in identifying patients with CD using multiple markers\(^6\)
- 56.4% sensitivity in identifying CD patients who are anti-*Saccharomyces cerevisiae* antibody (ASCA) negative\(^6\)
- Three prognostic levels for CD severity are provided, allowing for improved treatment decisions
- Test combination formulated to be appropriate and cost-effective for patients

**Scientific Expertise**
- Profile developed with only those markers that have been established in published research and are clinically relevant
- Crohn’s disease risk levels and prognostic information validated in adults and children
- Interpretive reports include suggestive disease form and risk stratification for CD patients
- Expansive test options for IBD and related digestive disorders
- Expert MD and PhD consultation available

**Superior Service**
- Comprehensive laboratory services for the gastroenterology specialist
- Broad network of managed care health plans
- Flexible connectivity options for test ordering and reporting
- Patient service centers available nationwide
- Local account representation

**Highly sensitive IBD profile for identifying patients with ulcerative colitis or Crohn’s disease**
Inflammatory Bowel Disease
Expanded Profile

<table>
<thead>
<tr>
<th>Five-marker Profile</th>
<th>Ulcerative Colitis</th>
<th>Crohn’s Disease</th>
<th>Crohn’s with High Risk of Aggressive Disease</th>
<th>Crohn’s with Very High Risk of Aggressive Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>pANCA</td>
<td>Positive (+)</td>
<td>Negative (-)</td>
<td>Negative (-) or positive (+)</td>
<td>Negative (-) or positive (+)</td>
</tr>
<tr>
<td>gASCA IgG*</td>
<td>Negative (-)</td>
<td>Positive (+)</td>
<td>Two positive (+) markers</td>
<td>Three or more positive (+) markers</td>
</tr>
<tr>
<td>ALCA IgG</td>
<td>Negative (-)</td>
<td>Positive (+)</td>
<td>High risk</td>
<td>Very high risk</td>
</tr>
<tr>
<td>ACCA IgA</td>
<td>Negative (-)</td>
<td>Positive (+)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AMCA IgG</td>
<td>Negative (-)</td>
<td>Positive (+)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Note:** Risk levels for aggressive Crohn’s disease behavior are based on published studies that included markers tested with prospective patient outcomes of disease complexity and/or surgery.2,7,8

*ASCAs IgA was not included in the profile, as studies have shown there is little to no increase in clinical sensitivity or specificity for Crohn’s disease when used in conjunction with gASCA IgG, ALCA IgG, ACCA IgA, and AMCA IgG.9

**Inflammatory Bowel Disease Expanded Profile**

**Test Includes** Antichitobioside carbohydrate antibodies (ACCA); antilaminaribioside carbohydrate antibodies (ALCA); antimannobioside carbohydrate antibodies (AMCA); anti-**Saccharomyces cerevisiae** antibodies (gASCA); atypical perinuclear antineutrophil cytoplasmic antibody (pANCA)

**Specimen** 1.0 mL serum in red-top or gel barrier tube

**Methodology** Enzyme immunoassay (EIA) for ACCA, ALCA, AMCA, gASCA; indirect fluorescent antibody (IFA) for atypical pANCA

**References**


Please contact your local account representative for more information or visit [www.labcorp.com](http://www.labcorp.com).