

# **Lupus Anticoagulant Confirmation Reagent™**

**Catalog No. 102516** 

### Product Applications:

- Clinical Laboratories
- Pharmaceutical Laboratories
- Contract
   Research
   Organizations
   (CROs)
- Clinical Trials
- Research Laboratories
- Hemophilia Centers
- Regional Blood Centers
- Reference
   Laboratories

## Facing Unexpected or Prolonged APTT Results?

**Confirm Lupus Anticoagulant with LA-CR** 

Lupus Anticoagulant Confirmation Reagent™ (LA-CR) is a platelet phospholipid solution used to perform the platelet neutralization procedure. Use of the LA-CR test kit confirms that previous laboratory results have correctly flagged a sample as containing the lupus anticoagulant.



Net Contents: 5 x 1.0mL

- Optimized Source of Platelet Phospholipids
- Used to Perform Platelet Neutralization Procedure (PNP) Needed as Part of a Multi-Test Investigation for the Presence of the Lupus Anticoagulant

Lupus anticoagulant is the most common cause of acquired thrombophilia. The incidence of lupus anticoagulant in the general population is 1% to 2%. To be considered clinically significant, a lupus anticoagulant must be present on two occasions at least six to eight weeks apart.



Based on recommendations from the **International Society for Thrombosis and Hemostasis (ISTH)**, three criteria must be met to confirm lupus anticoagulant:

- Demonstration of prolongation of a phospholipid dependent clotting assay
- Demonstration using mixing studies or factor assays that an inhibitor is present
- Demonstration that the inhibitor is phospholipid dependent

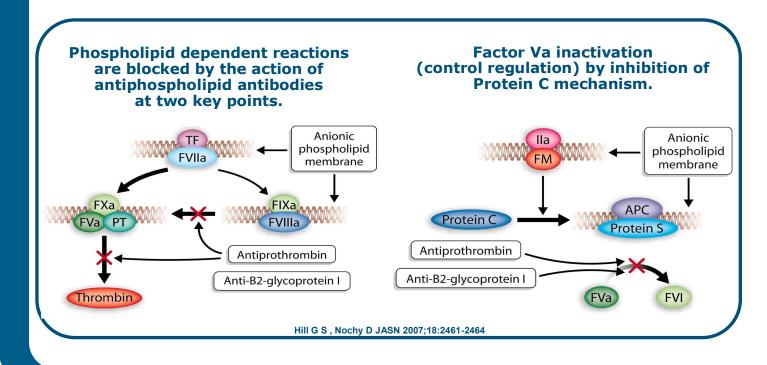


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#### Who should be screened for Lupus Anticoagulant?

- Individuals who suffer venous thrombosis, especially if idiopathic
- Individuals who suffer an arterial occlusive event (e.g. myocardial Infarction [MI] or stroke) before the age of 50 years
- Individuals greater than 50 years of age without typical risk factors for arterial occlusive disease who suffer MI or stroke
- All patients with systemic lupus erythematosus
- Women who suffer 3 or more first trimester pregnancy losses or a single unexplained fetal loss in the second or third trimester
- Women who suffer severe preeclampsia or intrauterine growth retardation without a known provoker





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