

What is an autoimmune disorder?

Our immune system makes antibodies that help our bodies fight off infections or diseases. In a normal person, these antibodies recognize and attack disease-causing agents (for example, viruses) present in the body.

If the immune system gets confused, the antibodies will begin to attack various parts of our bodies. For example, when the antibodies attack our bodies, they can cause diseases, such as, rheumatoid arthritis, lupus or Antiphospholipid Antibody Syndrome (APS). APS is an autoimmune disorder where antibodies affect normal blood clotting and increase the risk of blood clots and miscarriages.

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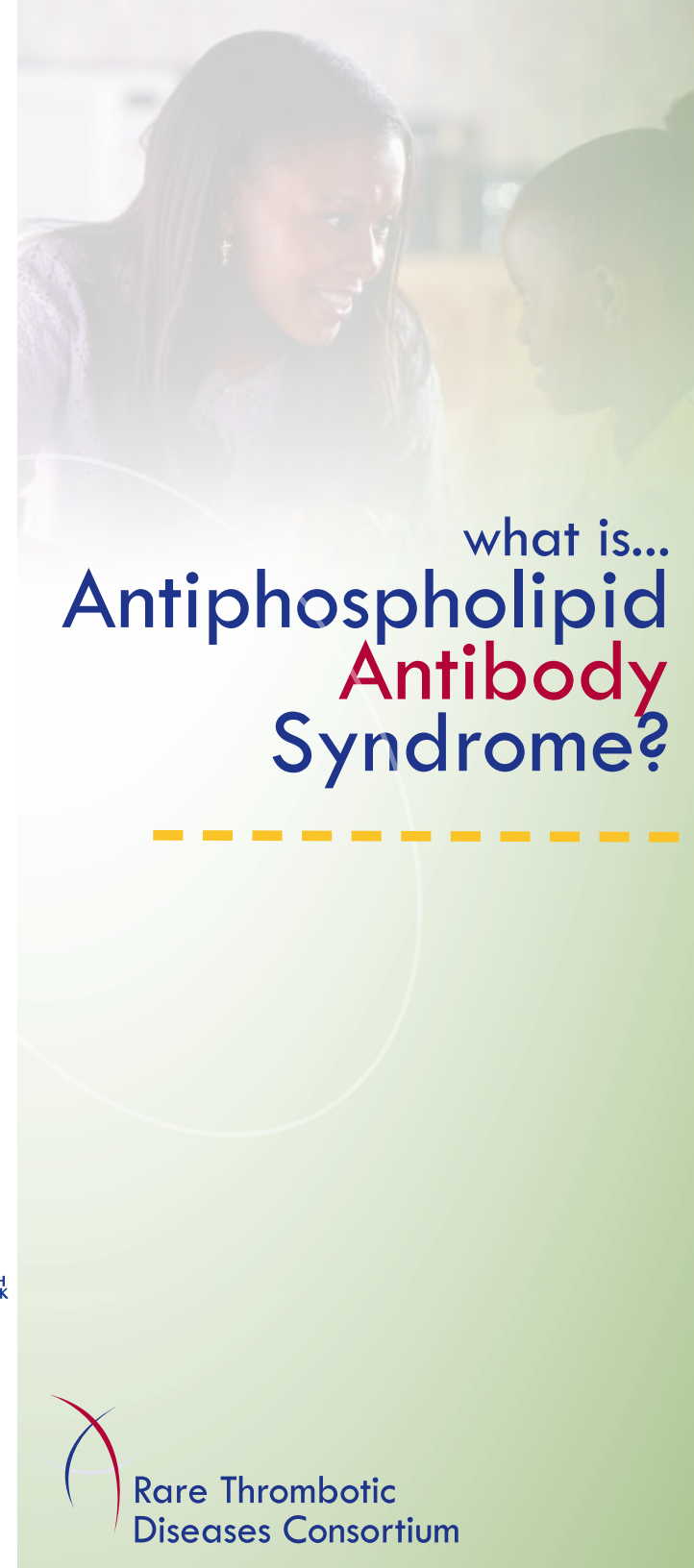
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what is... Antiphospholipid Antibody Syndrome?

 Rare Thrombotic
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Antiphospholipid Antibody Syndrome

What is an Antibody?

Antibodies are small molecules that are found in the blood that help us to fight off infections. For example, when you are vaccinated against the flu, your body makes antibodies that are specific to the flu, then if you come into contact with the flu your body already has antibodies ready to fight off the infection so that you don't get sick.

What are antiphospholipid antibodies?

These are a particular type of antibody that attack the phospholipids that are found in your blood and typically help your body's normal blood clotting mechanisms.

What is a lupus anticoagulant?

A lupus anticoagulant is a specific type of antiphospholipid antibody that attacks our body's phospholipids that normally help with clotting. It is detected by a special test that measures the amount of lupus anticoagulant antibodies in a person's blood by testing the blood's ability to clot. The name is not accurate however, as most patients with lupus anticoagulants do NOT have lupus and they do not have an increased risk of bleeding (as might be expected in a patient who is anticoagulated).

What is an anticardiolipin antibody?

An anticardiolipin antibody is another specific type of antiphospholipid antibody that is measured using a special test called an ELISA.

How did I get these antibodies?

In most cases, we do not know why a patient develops these antibodies. In some patients, the antibodies follow an infection. In some patients there appears to be an inherited risk for developing the antibodies, with several family members having antiphospholipid antibodies or other autoimmune disorders. However, we do not know enough about the genetics of this disorder to recommend screening of asymptomatic family members.

What kind of problems can occur in patients with Antiphospholipid Antibody Syndrome (APS)?

Patients with antiphospholipid antibodies can have problems with blood clots in the big veins in their legs or arms (deep venous thrombosis, or DVT) or in their lungs (pulmonary embolism, or PE).

A patient with a blood clot in the lung would notice a sudden onset of shortness of breath. Patients with APS can also have problems with blood clots in their arteries, such as strokes or heart attacks (myocardial infarction, or MI). These patients can also develop blood clots at a young age, such as in their 30's, 40's and 50's.

Patients with antiphospholipid antibodies can also have difficulties with pregnancy. There can be problems with getting pregnant as well as problems with miscarriages. It is thought that blood clots may develop in the placenta, which can lead to losing the pregnancy.

Other problems that can occur in patients with APS include heart valve problems, low blood counts, and blood clots in the little veins ('superficial thrombophlebitis').

What kinds of treatments are available for APS?

For patients with APS who have had a blood clot, either in a vein (DVT or PE) or in an artery (stroke or heart attack), the current recommended therapy is for anticoagulation ('blood thinners', such as heparin and warfarin). These patients are at high risk for developing more blood clots and may need to stay on anticoagulation therapy for a prolonged period of time.

For patients with antiphospholipid antibodies who have had problems with miscarriages, the currently recommended therapy is for the patient to take aspirin and heparin during the course of pregnancy. Heparin must be given as a shot under the skin twice a day. Newer heparins, called 'low molecular weight heparins' may also be used in some patients. These patients need to be carefully monitored during the course of their pregnancy.

For patients with aPL who have had no problems, no treatment is currently recommended. Some patients are told to take an aspirin a day, but current studies disagree on whether this will prevent a blood clot from occurring.

