Test Definition: MA2ES

Ma2 Antibody by ELISA, Serum

Overview

Useful For
Evaluating patients with suspected paraneoplastic encephalitides using serum specimens

Method Name
Enzyme-Linked Immunosorbent Assay (ELISA)

NY State Available
Yes

Specimen

Specimen Type
Serum

Necessary Information
Provide the following information:
1. Relevant clinical information
2. Ordering healthcare professional's name, phone number, mailing address, and email address

Specimen Required
Supplies: Sarstedt Aliquot Tube, 5 mL (T914)
Collection Container/Tube:
Preferred: Red top
Acceptable: Serum gel
Submission Container/Tube: Plastic vial
Specimen Volume: 1 mL Serum
Collection Instructions: Centrifuge and aliquot serum into a plastic vial.

Specimen Minimum Volume
Serum: 1 mL

Reject Due To

Gross hemolysis	Reject
Gross lipemia	Reject
Gross icterus	Reject

Specimen Stability Information

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

Clinical & Interpretive

Clinical Information

Ma2 antibodies are IgG biomarkers found in patients with paraneoplastic encephalitis (limbic encephalitis or brainstem encephalitis) or cerebellar ataxia. Antibodies (Ab) to Ma antigens can be found directed at Ma2 alone, or both Ma1 and Ma2, but never Ma1 alone. The accompanying neurological disorders (encephalitis, dementia, brainstem encephalitis, cerebellar ataxia) are usually severe. The cancer associations are either testicular germinoma (Ma2 Ab positive only) or diverse (Ma1 and Ma2 Ab positive). Neurological improvement upon treatment of cancer or immunotherapy is more commonly encountered in those seropositive for Ma2 only than when compared to Ma1 and Ma2 together.

Reference Values

Negative

Interpretation

Seropositivity for Ma2 antibody is consistent with a diagnosis of an autoimmune central nervous system disorder (encephalopathy, dementia, seizure disorder, brainstem encephalitis or cerebellar ataxia). A paraneoplastic basis should be considered and include seminoma (testicular or extra-testicular).

Cautions

A negative Ma2 antibody test result does not exclude autoimmune neurological disease or cancer.

Clinical Reference

1. Voltz R, Gultekin SH, Rosenfeld MR, et al. A serologic marker of paraneoplastic limbic and brain-stem encephalitis in patients with testicular cancer. N Engl J Med. 1999;340(23):1788-1795. doi:10.1056/NEJM199906103402303
2. Rosenfeld MR, Eichen JG, Wade DF, Posner JB, Dalmau J. Molecular and clinical diversity in paraneoplastic immunity to Ma proteins. Ann Neurol. 2001;50(3):339-348
3. Dalmau J, Graus F, Villarejo A, et al. Clinical analysis of anti-Ma2-associated encephalitis. Brain. 2004;127(Pt 8):1831-1844. doi:10.1093/brain/awh203
4. Schuller M, Jenne D, Voltz R. The human PNMA family: novel neuronal proteins implicated in paraneoplastic neurological disease. J Neuroimmunol. 2005;169(1-2):172-176. doi:10.1016/j.jneuroim.2005.08.019
5. Hoffmann LA, Jarius S, Pellkofer HL, et al. Anti-Ma and anti-Ta associated paraneoplastic neurological syndromes: 22 newly diagnosed patients and review of previous cases. J Neurol Neurosurg Psychiatry. 2008;79(7):767-773. doi:10.1136/jnnp.2007.118588
6. Kunchok A, McKeon A. Opsoclonus in anti-Ma2 brain-stem encephalitis. N Engl J Med. 2020;383(13):e84. doi:10.1056/NEJMicm1914516
7. Adams C, McKeon A, Silber MH, Kumar R. Narcolepsy, REM sleep behavior disorder, and supranuclear gaze palsy associated with Ma1 and Ma2 antibodies and tonsillar carcinoma. Arch Neurol. 2011;68(4):521-524. doi:10.1001/archneurol.2011.56

Performance

Method Description

Ma2 antibodies are directed against their corresponding intracellular protein (PNMA2). The Ma2 autoantibody enzyme-linked immunosorbent assay (ELISA) is based on the principle of indirect ELISA that employs the ability of Ma2 autoantibodies to bind to antigenic protein (PNMA2) coated on the well surface of an ELISA plate. Detection of this bound antibody is accomplished using an anti-human secondary antibody that specifically recognizes the Fc region of the bound autoantibody. The secondary antibody is conjugated with alkaline phosphatase that enzymatically hydrolyzes a substrate molecule to produce an end-product with a yellow color measurable at a wavelength of 405 nm. Controls and diluted samples are added in duplicate to coated plate wells and incubated for 2 hours, then washed extensively before adding the conjugated secondary antibody for an additional hour. After aspiration and washing, p-nitrophenyl phosphate substrate is added to each well and incubated for an additional hour before absorbance is measured at 405 nm.(Unpublished Mayo method)

PDF Report

No

Day(s) Performed

Tuesday, Friday

Report Available

3 to 5 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

83516

Test Definition: MA2ES

Ma2 Antibody by ELISA, Serum

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
MA2ES	Ma2 Ab ELISA, S	101868-8

Result ID	Test Result Name	Result LOINC® Value
605970	Ma2 Ab ELISA, S	101868-8