

## **CADTH Reference List**

# Antinuclear Antibody Testing for Autoimmune Disorders

November 2022



Authors: Lindsay Ritchie, Sharon Bailey

Cite As: Antinuclear Antibody Testing for Autoimmune Disorders. (CADTH reference list). Ottawa: CADTH; 2022 Nov.

**Disclaimer:** The information in this document is intended to help Canadian health care decision-makers, health care professionals, health systems leaders, and policy-makers make well-informed decisions and thereby improve the quality of health care services. While patients and others may access this document, the document is made available for informational purposes only and no representations or warranties are made with respect to its fitness for any particular purpose. The information in this document should not be used as a substitute for professional medical advice or as a substitute for the application of clinical judgment in respect of the care of a particular patient or other professional judgment in any decision-making process. The Canadian Agency for Drugs and Technologies in Health (CADTH) does not endorse any information, drugs, therapies, treatments, products, processes, or services.

While care has been taken to ensure that the information prepared by CADTH in this document is accurate, complete, and up to date as at the applicable date the material was first published by CADTH, CADTH does not make any guarantees to that effect. CADTH does not guarantee and is not responsible for the quality, currency, propriety, accuracy, or reasonableness of any statements, information, or conclusions contained in any third-party materials used in preparing this document. The views and opinions of third parties published in this document do not necessarily state or reflect those of CADTH.

CADTH is not responsible for any errors, omissions, injury, loss, or damage arising from or relating to the use (or misuse) of any information, statements, or conclusions contained in or implied by the contents of this document or any of the source materials.

This document may contain links to third-party websites. CADTH does not have control over the content of such sites. Use of third-party sites is governed by the third-party website owners' own terms and conditions set out for such sites. CADTH does not make any guarantee with respect to any information contained on such third-party sites and CADTH is not responsible for any injury, loss, or damage suffered as a result of using such third-party sites. CADTH has no responsibility for the collection, use, and disclosure of personal information by third-party sites.

Subject to the aforementioned limitations, the views expressed herein do not necessarily reflect the views of Health Canada, Canada's provincial or territorial governments, other CADTH funders, or any third-party supplier of information.

This document is prepared and intended for use in the context of the Canadian health care system. The use of this document outside of Canada is done so at the user's own risk.

This disclaimer and any questions or matters of any nature arising from or relating to the content or use (or misuse) of this document will be governed by and interpreted in accordance with the laws of the Province of Ontario and the laws of Canada applicable therein, and all proceedings shall be subject to the exclusive jurisdiction of the courts of the Province of Ontario, Canada.

The copyright and other intellectual property rights in this document are owned by CADTH and its licensors. These rights are protected by the Canadian *Copyright Act* and other national and international laws and agreements. Users are permitted to make copies of this document for non-commercial purposes only, provided it is not modified when reproduced and appropriate credit is given to CADTH and its licensors.

About CADTH: CADTH is an independent, not-for-profit organization responsible for providing Canada's health care decision-makers with objective evidence to help make informed decisions about the optimal use of drugs, medical devices, diagnostics, and procedures in our health care system.

Funding: CADTH receives funding from Canada's federal, provincial, and territorial governments, with the exception of Quebec.

Questions or requests for information about this report can be directed to requests@cadth.ca

## CADTH

## Key Messages

- We found 1 non-randomized study about the clinical utility of antinuclear antibody testing for the diagnosis of systemic or organ-specific autoimmune disease.
- We found 2 evidence-based guidelines describing antinuclear antibody testing for the diagnosis of systemic or organ-specific autoimmune disease.

## **Research Questions**

- 1. What is the clinical utility of antinuclear antibody testing for the diagnosis of systemic or organ-specific autoimmune disease?
- 2. What are the evidence-based guidelines describing antinuclear antibody testing for the diagnosis of systemic or organ-specific autoimmune disease?

## Methods

#### **Literature Search Methods**

A limited literature search was conducted by an information specialist on key resources including MEDLINE, the Cochrane Database of Systematic Reviews, the international HTA database, the websites of Canadian and major international health technology agencies, as well as a focused internet search. The search strategy comprised both controlled vocabulary, such as the National Library of Medicine's MeSH (Medical Subject Headings), and keywords. The main search concept was antinuclear antibodies testing. CADTH-developed search filters were applied to limit retrieval to health technology assessments, systematic reviews, meta-analyses, network meta-analyses, any types of clinical trials or observational studies, or guidelines. Comments, newspaper articles, editorials, and letters were excluded. Where possible, retrieval was limited to the human population. The search was also limited to English-language documents published between January 1, 2012 and October 27, 2022. Internet links were provided, where available.

### **Selection Criteria**

One reviewer screened literature search results (titles and abstracts) and selected publications according to the inclusion criteria presented in <u>Table 1</u>. Full texts of study publications were not reviewed. Open access full-text versions of evidence-based guidelines were reviewed when available.

## Results

One non-randomized study<sup>1</sup> was identified regarding the clinical utility of antinuclear antibody testing for the diagnosis of systemic or organ-specific autoimmune disease. Two evidence-based guidelines<sup>2,3</sup> describing antinuclear antibody testing for the diagnosis of systemic



### Table 1: Selection Criteria

Criteria	Description
Population	People with suspected systemic or organ-specific autoimmune disease
Intervention	Antinuclear antibody testing using any method
Comparator	Q1: No screening
	Q2: Not applicable
Outcomes	Q1: Clinical utility (e.g., time to treatment, morbidity, incidence of disease, mortality, quality of life)
	Q2: Evidence-based recommendations and/or guidance
Study designs	Health technology assessments, systematic reviews, randomized controlled trials, non-randomized studies, evidence-based guidelines

or organ-specific autoimmune disease were identified. No relevant health technology assessments, systematic reviews, or randomized controlled trials were identified.

Additional references of potential interest that did not meet the inclusion criteria are provided in <u>Appendix 1</u>.



## References

#### Health Technology Assessments

No literature identified.

#### Systematic Reviews

No literature identified.

#### **Randomized Controlled Trials**

No literature identified.

#### Non-Randomized Studies

1. Ferrari R. Evaluation of the Canadian Rheumatology Association Choosing Wisely recommendation concerning anti-nuclear antibody (ANA) testing. *Clin Rheumatol.* 2015;34(9):1551-6. PubMed

#### **Guidelines and Recommendations**

- Trevisani VFM, Pasoto SG, Fernandes M, et al. Recommendations from the Brazilian Society of Rheumatology for the diagnosis of Sjogren's syndrome (Part I): Glandular manifestations (systematic review). Adv Rheumatol. 2019;59(1):58. <u>PubMed</u> See Recommendation 15 on page 10
- Pain CE, Constantin T, Toplak N, et al. Raynaud's syndrome in children: Systematic review and development of recommendations for assessment and monitoring. *Clin Exp Rheumatol.* 2016;34 Suppl 100(5):200-206. <u>PubMed</u> See Recommendations 2, 3, and 5-10 on page S-202

## CADTH

## **Appendix 1: References of Potential Interest**

#### **Previous CADTH Reports**

Hafizi D, Grobelna A. Antinuclear antibody testing for systemic lupus erythematosus or connective tissue disease. (CADTH Rapid response report: reference list). Ottawa (ON): CADTH; 2021: https://www.cadth.ca/antinuclear-antibody-testing-systemic-lupus-erythematosus-or-connective-tissue-disease. Accessed 2022 November 01.

Antinuclear antibody testing for systemic lupus erythematosus or connective tissue disease: Clinical effectiveness and guidelines. (CADTH Rapid response report: summary of abstracts). Ottawa (ON): CADTH; 2015: <a href="https://www.cadth.ca/antinuclear-antibody-testing-systemic-lupus-erythematosus-or-connective-tissue-disease-clinical">https://www.cadth.ca/antinuclear-antibody-testing-systemic-lupus-erythematosus-or-connective-tissue-disease-clinical.</a> Accessed 2022 November 01.

#### Systematic Reviews

#### Unclear Comparator

Wong KO, Bond K, Homik J, et al. Antinuclear antibody, rheumatoid factor, and cyclic-citrullinated peptide tests for evaluating musculoskeletal complaints in children. (Comparative effectiveness review no. 50). Rockville (MD): Agency for Healthcare Research and Quality; 2012: PubMed

#### Non-Randomized Studies

#### No Comparator

Spies MC, Gutjahr-Holland JA, Bertouch JV, Sammel AM. Prevalence of neuropsychiatric lupus in psychosis patients who have tested positive for antinuclear antibodies. *Arthritis Care Res (Hoboken)*. 2022;74(3):427-432. PubMed

Haslak F, Yildiz M, Altun I, et al. Anti-nuclear antibody testing in children: How much is really necessary?. Pediatr Int. 2021;63(9):1020-1025. PubMed

Koubi M, Rossi P, Arcani R, et al. Relevance of systematic anti-nuclear antibodies testing after obstetrical complications. J Reprod Immunol. 2021;148:103437. PubMed

Ghrairi N, Aouadi S, Elhechmi YZ, Ben Saad S, Ben Ali I, Yalaoui S. Antinuclear antibodies in interstitial lung disease: Prevalence and clinical significance. *Tunis Med*. 2019;97(11):1240-1245. PubMed

Mantovani C, Louzada-Junior P, Nunes EA, de Figueiredo FP, Oliveira GR, Del-Ben CM. Antinuclear antibodies testing as a routine screening for systemic lupus erythematosus in patients presenting first-episode psychosis. *Early Interv Psychiatry*. 2012;6(3):322-5. PubMed

#### Alternative Comparator - Complement Activation Products

O'Malley T, Xie F, Su Y, et al. Complement activation products vs standard ANA testing: Treatment outcomes, diagnosis, and economic impact (CAPSTONE) in systemic lupus erythematosus. J Manag Care Spec Pharm. 2022;28(9):1021-1032. PubMed

#### Guidelines and Recommendations

#### Unclear Methodology

Tesija Kuna A, Derek L, Drvar V, Kozmar A, Gugo K. Assessment of antinuclear antibodies (ANA): National recommendations on behalf of the Croatian Society of Medical Biochemistry and Laboratory Medicine. *Biochem Med (Zagreb)*. 2021;31(2):020502. PubMed

See Section 1. Preanalytical Issues: Recommendations 1 and 2 for ANA Determination Indications; Recommendation 2 for Rational Algorithm.

BC Guidelines. Antinuclear antibody (ANA) testing protocol. 2013; https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-guidelines/ana -testing. Accessed 2022 November 07. See Key Recommendations