

LABORATORY SERVICES IMPORTANT TEST ANNOUNCEMENT

Monocyte Type I and II Interferon Signature Quantitation by Flow Cytometry

Test Code: T1A2MP Live Date: 11/15/2023

Methodology: Flow Cytometry

Performed:

- o Internal Samples can be collected Monday -- Friday and should be received no later than 3 pm on Friday for testing to be performed
- Weekend Testing: For testing to be performed over the weekend, please provide prior notice to the Diagnostic Immunology lab by emailing LabDiagnosticImmunology@nationwidechildrens.org or calling 614-722-2994
- Samples from external institutions should be collected between Monday Thursday only. If an external sample is drawn on Thursday, it should be sent with Overnight shipping to ensure that the sample is received by 3 pm on Friday
- For any urgent testing requests, please contact the Diagnostic Immunology Lab Director at 614-722-2994
- External samples must be accompanied by a completed requisition form and patient information form (to facilitate interpretation of results)

Turnaround Time: 36 hours

Specimen Required:

- Collect/Specimen Volume:
 - 3 mL purple top tube (EDTA); minimum 1 mL
 - . 3 mL green top tube (Sodium Heparin), no gel; minimum 1 mL
- o Specimen Preparation: Do not centrifuge
- Storage/Transport/Temperature: Keep at room temperature
- Stability: 72 hours
- Comments: The primary objective of this assay is to detect and quantify surrogate markers for Type I and Type II Interferon (IFN) response signatures in CD14++ (bright) monocytes. A Type I IFN response elicited by multiple Type I IFN cytokines (e.g. IFN-alpha, IFN-beta, etc.) is a key contributor to antiviral responses and overall immune regulation. A Type II IFN (IFN-gamma) response has been shown to be a critical modulator of host defense by stimulating macrophage activation, antigen presentation, activation of the Th1 immune response, and induction of proinflammatory cytokine production. A Type I IFN signature will be identified by expression of CD169 (SIGLEC-1) and a Type II IFN signature will be identified by expression of CD274 (PDL-1), on CD14++ (bright) monocytes.

This assay can be used broadly in several clinical contexts for the assessment of Type I and II IFN responses, including inborn errors of immunity (IEIs), including primary immunodeficiencies, autoinflammatory syndromes, and primary immune regulatory disorders (PIRDs), systemic lupus erythematosus (SLE), Type I interferonopathies, viral infections, among others. For example, SLE patients demonstrate a typical Type I IFN signature in this assay, while Hemophagocytic Lymphohistiocytosis (HLH) demonstrates a class Type II IFN signature in this assay. In addition to diagnostic evaluation, this assay can also be used to monitor response to treatment, including JAK inhibitors (JAKi), Type I IFN blockers (anifrolumab, sifalimumab), and anti-IFN-gamma (emapalumab) therapies.

Clinical Report: Reference intervals and a brief interpretive report on the results will be provided as part of the clinical report.

If you have any additional questions about testing for T1A2MP please refer to the **Laboratory Test Directory (Laboratory Services Test Directory | Home)** or call Client Services at 614-722-5477