

# New Test Announcement



## Treponema pallidum reflexive to RPR

Effective February 16, 2011, RPR testing will be eliminated as a screening method for Syphilis. RPR testing will be replaced with a specific Treponemal Antibody test which will be performed on an automated immunoassay platform. Positive Antibody tests will then reflex to an RPR as a confirmatory method. St. Luke's laboratory is committed to a Lean, automated system, providing state of the art instrumentation and test methodologies.

### Benefits of this change include:

- Decrease in false positive results as compared to RPR testing due to the fact that the test measures antibodies specific to the organism that causes syphilis.
- Rapid Turn Around Time will better serve our patients
- Automated immunoassay will decrease the possibility of human error in performing and reporting the assay.

### Result Interpretation

A positive Treponemal antibody test suggests infection with *Treponema pallidum* at some point in the past, but does not distinguish between treated and untreated infections, due to the fact that antibody activity can remain for life. Therefore, the results of a non-Treponemal assay such as the RPR are needed to provide further information regarding the patient's disease state.

Positive RPRs will be titered to aid in diagnosis and to monitor therapy. Treatment response is indicated by a four- fold drop in titer within a six month period.

**Please note that the RPR test will no longer be orderable as a Stand-alone test.**

If you have questions, please contact Krista Warren M.D, 218-6914, Immunology Medical Director or Amber LaMourea, MT (ASCP) 218-249-5024, Immunochemistry Technical Specialist.

St. Luke's Laboratory Services web page: <http://www.slhduluth.com/hospital/laboratory-services/>