

台中榮民總醫院
內部過敏免疫風濕科

此處刷卡用

A P S

健保榮民	健保員工	健 保	健保員眷	民 眾	
姓名			病房	床位	年齡
					病歷號

PRELIMINARY CLASSIFICATION CRITERIA FOR ANTIPHOSPHOLIPID ANTIBODY SYNDROME (APS)

Clinical

- () **Vascular thrombosis** One or more episodes of:
1. Arterial thrombosis, *or*
 2. Venous thrombosis, *or*
 3. Small vessel thrombosis, in any tissue or organ, confirmed by imaging or Doppler studies or histopathologic studies. For histopathologic confirmation, thrombosis should be present without significant evidence of inflammation in the vessel wall.
- () **Pregnancy morbidity** One or more:
1. Unexplained deaths of a morphologically normal fetus at or after the 10th week of gestation with fetal morphology documented by ultrasound or by direct examination of the fetus, *or*
 2. Premature birth of a morphologically normal neonate at or before the 34th week of gestation because of severe preeclampsia, eclampsia, or severe placental insufficiency, *or*
 3. Three or more unexplained consecutive miscarriages with anatomic, genetic, or hormonal causes excluded.

Laboratory

- () **Anticardiolipin antibody (aCL)** Immunoglobulin G (IgG) and/or IgM isotype present in medium or high titer on two or more occasions, 6 weeks or more apart, *and*
1. Measured by a standardized ELISA for β_2 glycoprotein I-dependent anticardiolipin antibody
 2. Abnormality present in plasma on two or more occasions, 6 weeks or more apart, *and*
 3. Detected according to the guidelines of the International Society on Thrombosis and Hemostasis Scientific Subcommittee on Lupus Anticoagulants/phospholipid-dependent antibodies in the following steps:
 1. Demonstration of a prolonged phospholipid-dependent coagulation screening test (e.g., activated partial thromboplastin time, kaolin clotting time, dilute Russell viper venom time, dilute prothrombin time)
 2. Failure to correct the prolonged screening test by mixing with normal platelet poor plasma
 3. Shortening or correction of the prolonged screening test by the addition of excess phospholipids
 4. Exclusion of other coagulopathies as clinically indicated (e.g., factor VIII inhibitor, heparin)

Adapted from Wilson WA, Gharavi AE, Koike T, et al: International consensus statement on preliminary classification criteria for antiphospholipid syndrome: Report of an international workshop. Arthritis Rheum 42:1309, 1999.