

■ ELISA/ACT Biotechnologies LLC ■

LRA by ELISA/ACT® CLINICAL PEARLS UPDATE#14

Systemic Lupus Erythematosus (SLE)

December 8, 2003

Dear Colleague:

Systemic Lupus Erythematosus (SLE) and related syndromes affects 1-8 million Americans according to the NIH and Centers for Disease Control. Successful comprehensive management using LRA by ELISA/ACT® tests and treatment plans are illustrated in the attached abstract reports. Attached is a clinical update newsletter that details how this advanced approach can be applied in your practice with beneficial results.

Functional, *ex vivo* lymphocyte response assays (LRA by ELISA/ACT) offer the most advanced tests available for determination of the individual's responses to the widest available range of substances tested by any lab in the world.

We are grateful for the opportunities to be of service to you and your patients.

Sincerely,

***Russ Jaffe, MD, Ph.D., CCN, NACB
Lab Director***

Kong PL, Odegard JM, Bouzahzah F, Choi JY, Eardley LD, Zielinski CE, Craft JE. Intrinsic T cell defects in systemic autoimmunity. *Ann N Y Acad Sci* 2003;987:60-67.

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Systemic lupus erythematosus (SLE) is an autoimmune disease characterized by loss of T cell tolerance to nuclear antigens. Studies in mice and humans have demonstrated that T cells from individuals with lupus are abnormal. Here, we review the known T cell defects in lupus and their possible biochemical nature, genetic causes, and significance for lupus pathogenesis.

On balance, what these studies show is that Systemic Lupus Erythematosus (SLE) is multifactorial. All of these components are included in the LRA by ELISA/ACT tests and treatment guide. Better outcomes are the results. Relief from the immune reactive oxidative stress by substituting for immunoreactive items plus patient specific antioxidant supplements and alkaline way diet work together to reduce risk and enhance the chances of sustainable remission in people with 'lupus'.

Yasutomo K. Pathological lymphocyte activation by defective clearance of self-ligands in systemic lupus erythematosus. *Rheumatology (Oxford)* 2003;42(2):214-222.

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Systemic lupus erythematosus (SLE) is one of the autoimmune diseases extensively studied by immunologists and physicians. The main focus regarding SLE pathophysiology has been placed on abnormal cell surface receptor function on lymphocytes. However, recent studies have revealed that defective clearance of apoptotic cells causes self-antigen accumulation, which could trigger the activation of autoreactive lymphocytes. Thus, here we review current findings about the association of the defective clearance of autoantigens and SLE, focusing on mutations in the DNase I locus and their relationship to SLE.

The functional, comprehensive, patient-specific approaches incorporated into the LRA by ELISA/ACT tests and treatment guide provide an advanced approach that builds upon the research done on the mechanisms of lupus.

Note: We believe the comprehensive optional treatment guide included with LRA by ELISA/ACT tests, if requested, provides the best current therapy for sustained remissions in Systemic Lupus Erythematosus (SLE) and related autoimmune syndromes.

