

Autoantibodies in diseases of inner ear (AIED)




Morbus Menière

home

Cogan's syndrome I

Rapidly progressing hearing loss

Literature

- Diagnostic marker with pathogenetic significance
 - Diagnostic marker for indicated disease
 - Colored circles indicate markers for primary screening
 - Indicative autoantibody
 - Occasionally associated autoantibodies with marker function for other diseases
 - Autoantibodies, which may be found randomly associated but without disease specificity and without any diagnostic significance for the disease mentioned.
- ▶ Cited **literature** is marked with red numbers and linked with the authors given at the end of the document. By clicking the hand symbol () one returns to the top of the table.
- ▶ **Autoantibodies** cited in the following tables are linked with their respective descriptions.
- ▶ The indicated values of **sensitivity** and **specificity** crucially depend on the respective test methods, on genetic and ethno-geographical variables and on the selection of tested patient and control populations, which is reflected by the considerable variations of the indicated data. Therefore the given figures may be regarded as an approximate guide for the selection of adequate tests for a given clinical situation. For this reason also qualitative estimates such as “low”, “medium” or “high” were used.

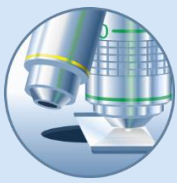


Autoantibodies in diseases of inner ear (AIED)



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Autoantibodies	Sens [%]	Spec [%]	Disease associations
● Raf-1 (proto-oncogene)	unknown	unknown	1

[Index of diseases](#) [Abbreviations](#)

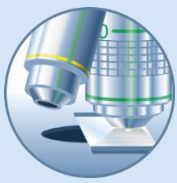


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Cogan's syndrome I			
Autoantibodies	Sens [%]	Spec [%]	Disease associations
● DEP-1	unknown	unknown	

[Index of diseases](#) [Abbreviations](#)



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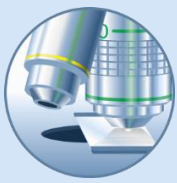


Rapidly progressing hearing loss

Autoantibodies	Sens [%]	Spec [%]	Disease associations
● KHRI-3 / CTL2	unknown	unknown	1, 2, 3, 4

[Index of diseases](#)

[Abbreviations](#)



Autoantibodies in diseases of inner ear (AIED)

Hearing loss

- 1 Nair TS, Kozma KE, Hoefling NL, Kommareddi PK, Ueda Y, Gong TW, Lomax MI, Lansford CD, Telian SA, Satar B, Arts HA, El-Kashlan HK, Berryhill WE, Raphael Y, Carey TE: Identification and characterization of choline transporter-like protein 2, an inner ear glycoprotein of 68 and 72 kDa that is the target of antibody-induced hearing loss. *J Neurosci* (2004); 24(7): 1.772 - 1.779 (PMID: [14973250](#)).
- 2 Nair TS, Prieskorn DM, Miller JM, Dolan DF, Raphael Y, Carey TE: KHRI-3 monoclonal antibody-induced damage to the inner ear: antibody staining of nascent scars. *Hear Res* (1999); 129(1-2): 50-60 (PMID: [10190751](#)).
- 3 Disher MJ, Ramakrishnan A, Nair TS, Miller JM, Telian SA, Arts HA, Sataloff RT, Altschuler RA, Raphael Y, Carey TE: Human autoantibodies and monoclonal antibody KHRI-3 bind to a phylogenetically conserved inner-ear-supporting cell antigen. *Ann N Y Acad Sci* (1997); 830: 253 - 265 (PMID: [9616684](#)).
- 4 Nair TS, Prieskorn DM, Miller JM, Mori A, Gray J, Carey TE: In vivo binding and hearing loss after intracochlear infusion of KHRI-3 antibody. *Hear Res* (1997); 107(1-2): 93 - 101 (PMID: [9165350](#)).

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- 1 Cheng KC, Matsuoka H, Lee KM, Kim N, Krug MS, Kwon SS, Mora M, Yoo TJ: Proto-oncogene Raf-1 as an autoantigen in Meniere's disease. *Ann Otol Rhinol Laryngol* (2000); 109(12 Pt 1): 1.093 - 1.098 (PMID: [11130817](#)).