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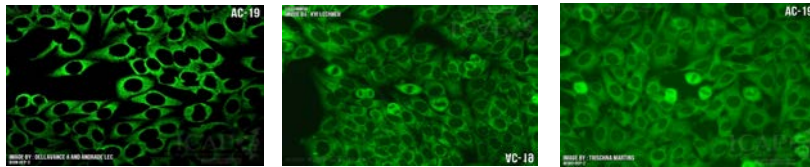
Firstly report in 1986 by Reeves *et al.*,
Name: SRP for signal recognition protein

Target antigen:

- Cytosolic RNA-protein complex involved in co-translation of newly synthesized polypeptides to the endoplasmic reticulum membrane

Screening technique: Indirect Immunofluorescence on Hep-2 cells: **optimal** but variability between laboratories

IIF patterns on HEp2- cells : Dense fine speckled cytoplasmic fluorescence



Confirmation techniques:

- **Immunoprecipitation:** gold standard sensitivity & specificity +++ but laborious
- **Line/dot blot immunoassay:** sensitivity ++
- **ELISA** (Risk of false negative with SRP54-specific ELISA (anti SRP-75))

224th ENMC International Workshop: Clinico-sero-pathological classification of Immune-mediated necrotizing myopathy (IMNM)

Anti-SRP antibodies

IMNM

Anti-HMGCR myopathy

Anti-SRP myopathy

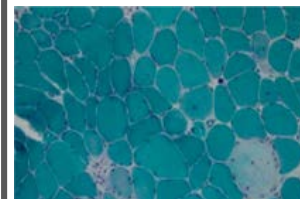
Seronegative IMNM

Anti-SRP □ Specific in IMNM

Yet, not included in the ACR/EULAR classification criteria of 2017

- **Clinical phenotype:** Muscular >> Extramuscular
Severe muscle weakness (increased risk of cardiac involvement)
Most severe muscle damage among IMNMs
- **Biology:** Correlation between serum CK levels, muscle necrosis degree and antibodies titer is not confirmed yet.
- No higher risk of cancer compared to the general population

Muscle biopsy in anti-SRP IMNM:



Myonecrosis +/-

Lymphocytic inflammation

