Soluble interleukin 2 receptor IDs
sarcoidosis in uveitis

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Soluble interleukin 2 receptor (sIL-2R) has slightly better diagnostic value than angiotensin-converting enzyme (ACE) for sarcoidosis in patients with uveitis, according to a study published online Nov. 9 in JAMA Ophthalmology.

Fahriye Groen-Hakan, M.D., from Erasmus University in the Netherlands, and colleagues conducted a cross-sectional retrospective study using data from 249 patients with uveitis, according to a study published online Nov. 9 in JAMA Ophthalmology.

Measurements of sIL-2R and ACE from serum samples were determined and compared as diagnostic biomarkers of sarcoidosis.

The researchers found that patients with sarcoidosis-associated uveitis had the highest mean serum sIL-2R and ACE levels and that patients with HLA-B27-associated and varicella-zoster-virus-associated uveitis also had elevated serum sIL-2R levels. There was a significant correlation for serum sIL-2R and ACE levels but no correlation between uveitis activity and either sIL-2R or ACE. The highest Youden index was 0.45 for sIL-2R alone, corresponding to an optimal cutoff of 4,000 pg/mL and providing sensitivity and specificity of 81 and 64 percent, respectively, alone, and 92 and 58 percent, respectively, when combined with chest radiography. At a cutoff of 6,000 pg/mL, chest radiography combined with sIL-2R yielded 77 and 73 percent sensitivity and specificity. At the standard cutoff of 68U/L, combined chest radiography and serum ACE levels resulted in 70 and 79 percent sensitivity and specificity, respectively.

"This cross-sectional study demonstrates that sIL-2R is a useful marker for diagnosing sarcoidosis in patients with uveitis and has slightly better diagnostic value than ACE," the authors write.

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