

CLINICAL SPECIFICATIONS

MYOCARDIAL PEPTIDE

Function:

Myocardial Peptides make up heart structure tissues.

Antibodies Appear:

Acute Rheumatic Fever⁶
Autoimmune Myocarditis^{1,2}
Heart Disease^{1,2,3}
Heart Trauma^{3,4,6}
Rheumatic Heart Disease⁶

Known Cross-Reactions: gliadin⁷

Clinical Significance:

Myocardial Peptides are at higher levels prior to the onset of dilated cardiomyopathy, when heart dysfunction is undetectable, and will decline as the disorder evolves.^{1,2} It is important to screen patient's symptom-free relatives to identify those at risk, to aid in diagnosis during pre-clinical period and to potentially prevent the progression to disease state by implementing preventive therapeutic protocols.² Damage to heart muscle or pericardial tissue stemming from surgery, stab wounds or acute myocardial infarctions may result in an autoimmune response to myocardial antigens.^{4,6} Circulating autoantibodies appear 2-3 weeks after the event and subsequently drop between 3-8 weeks.⁶ However, high levels of anti-myocardial antibodies have been shown to remain in cases involving a series of injuries over an extended period in which these antibodies can persist for months or years.⁶ Due to a commonality in autoimmune heart disease and Celiac disease, patients presenting with autoantibodies to heart tissue, should be assessed for Celiac disease.⁵

References:

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4. Engle, et al. The postpericardiotomy syndrome and antiheart antibodies. *Circulation*, 1974; 49:401-406.
5. Frustaci, et al. Celiac disease associated with autoimmune myocarditis. *Circulation*, 2002; 105:2611-26182.
6. Twomey and Bennett. Immunofluorescence method for detecting anti-myocardial antibodies, and its use in diagnosing heart disease. *Clin Chem*, 1975; 21(13):1903-1906 Vojdani and Tarash. Cross-reaction between gliadin and different food and tissue antigens, *Food Nutri Sci*, 2013; 4:20-32.
7. Vojdani and Tarash. Cross-reaction between gliadin and different food and tissue antigens, *Food Nutri Sci*, 2013; 4:20-32.