



APC Resistance

Pefakit® APC-R

True risk assessment at 80% lower cost

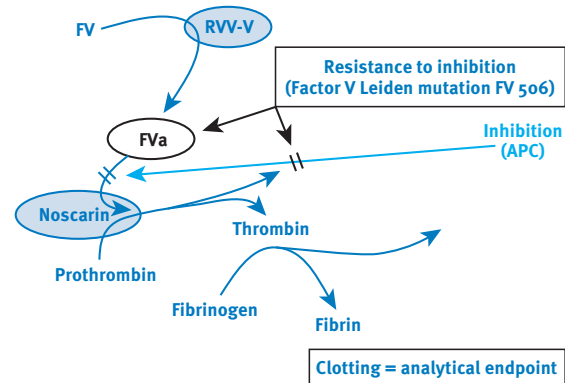
- Functional test – picks up thrombophilia risk
- More reliable and economical for clinical use than PCR
- Not influenced by Vit. K antagonists, anti-Xa NOACs and Lupus Anticoagulants
- 100% discrimination between wild-type, heterozygous and homozygous carriers
- Ready-to-use with validated adaption protocols

CE / FDA 510 (k)

Pefakit® APC-R Factor V Leiden – Prediction of increased Thrombosis Risk caused by APC-Resistance

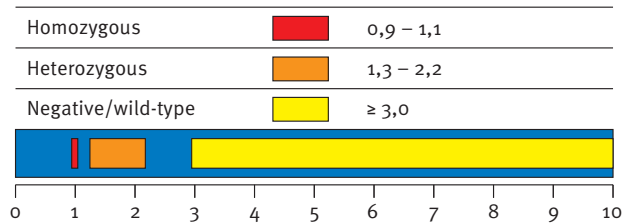
- **100% Sensitive to FV Mutations**

Two snake-venom proteins acting on the prothrombinase complex make the test highly sensitive to resistance of FVa to inhibition by APC (1)



- **Complete discrimination**

Wild-type, heterozygous and homozygous carriers are characterized by fully separated ranges of clotting time ratios (2)



- **Highly Specific**

No influence by Rivaroxaban, Lupus anticoagulants, Protein C, Protein S, UFH and LMWH (</= 2 micrograms/ml), ATIII, Fibrinogen and abnormal conditions of PT, FVIII, FX, TFPI or D-Dimer (1, 2)

- **Clinically relevant results at reduced Cost**

Functional activated protein C resistance testing reliably predicts an increased clinical risk of thrombosis (3). When used as screening test in combination with selective confirmatory testing, unnecessary molecular analysis can be reduced by 80% without compromising diagnostic accuracy (4)

- **Normal and Heterozygous Controls available**

- **Validated Protocols and Target Ranges provided for All Major Instruments**

Information for Ordering

502-01 Pefakit® APC-R FV Leiden
 3 x for 2 ml R1 +APC Reagent
 3 x for 2 ml R2 –APC Reagent
 3 x for 4 ml R3 PTA Reagent
 3 x for 2 ml R4 Dilution Plasma

502-21 Pefakit® APC-R FV Leiden Controls
 3 x for 1 ml C1 FV-L Neg Control
 3 x for 1 ml C2 FV-L Het Control

References

- (1) Wilmer et al. (2004), AmJClinPathol;122:836-842
- (2) Schöni et al. (2007), ThrombRes;119:17-26
- (3) Prüller et al. (2014), N.Engl.J.Med. 371;7:685-686
- (4) Herskovits et al.(2013), AmJClinPathol;140:379-386

DSM Nutritional Products Ltd

Branch Pentapharm

Dornacherstrasse 112 | CH-4147 Aesch | Switzerland

www.pentapharm.com

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