

VDRL

General:

With VDRL testing, antibodies are made visible through cardiolipin aggregation. Cardiolipin is a phospholipid and is sometimes released as endogenous antigen (auto-antigen) during certain infections, such as lues. The reaction is not lues-specific. The reaction is positive in the second phase of a primary syphilis (regional lymphadenitis). It can be false negative in the tertiary stage.

An isolated positive result does not confirm a lues infection. Temporary or persisting positive non-specific results are observed in autoimmune disorders, acute and chronic infections, collagenosis, neoplasms, in pregnancy, with different medicines and drugs. VDRL always reacts positive in infections with treponema species (*T. pertenuis*/Framboesia, *T. carateum*/ Pinta.) VDRL is suitable only for therapy monitoring during lues treatment.

The following tests are available:

- **VDRL in blood, qualitative/quantitative**

Indication: Activity marker, course monitoring

Material: 1 ml serum

Stability: 7 days at 2 to 8°C

TAT: same day, FML

Method: AGGL

Units: Qualitative, Titer

Ref.- range: negative

- **VDRL in CSF, quantitative**

Material: 0.3 ml CSF

TAT: 5 -7 days*

Method: PA

Units: Titer

Ref.- range: see report

For complete list of laboratory test offered at Freiburg Medical Laboratory, please visit <http://www.fml-dubai.com/parameter-listings/>