APTT

Description	Activated partial thromboplastin time (aPTT or APTT) is a performance indicator measuring the efficacy of both the "intrinsic" (often referred to as the contact activation pathway) and the common coagulation pathways.
Indication	Apart from detecting abnormalities in blood clotting, it is also used to monitor the treatment effects with heparin and reported as a ratio calculated as APTT / Mean Normal APTT.
Additional Info	The APTT was first described in 1953 by researchers at the University of North Carolina at Chapel Hill. Other hospitals may use different reagents, so you may get different results.
Concurrent Tests	It is used in conjunction with the prothrombin time (PT) to form a "Clotting Screen"
Interpretation	Values below 25 seconds or over 36 s are generally abnormal. Shortening of the APTT is said to have little clinical relevance. Normal PTT times require the presence of the following coagulation factors: I, II, V, VIII, IX, X, XI, & XII. Notably, deficiencies in factors VII or XIII will not be detected with the PTT test. Prolonged APTT may indicate: use of heparin (or ontamination of the sample) antiphospholipid antibody (especially lupus anticoagulant, which paradoxically increases propensity to thrombosis) coagulation factor deficiency (e.g. haemophilia) To distinguish the above causes, mixing tests are performed, in which the patient's plasma is mixed (initially at a 50:50 dilution) with normal plasma. If the abnormality does not disappear, the sample is said to contain an "inhibitor" (either heparin, antiphospholipid antibodies or coagulation factor specific inhibitors), while if it does correct a factor deficiency is more likely. Deficiencies of factors VIII, IX, XI and XII and rarely von Willebrand factor (if causing a low factor VIII level) may lead to a prolonged aPTT correcting on mixing studies.
Collection Conditions	Samples must be correctly filled as the ratio of anticoagulant to blood is crucial for accurate test results. Samples will be rejected by the laboratory if they are under or over filled. Samples should arrive in the laboratory within 4 hours of blood draw.
Frequency Of Testing	Depends upon condition and or therapy
Clinical AdviceContact	