

BChealth C-PEPTIDE & B-CELL ANTIBODY TEST Precise treatment with precise diagnosis





CLASSIFY YOUR DIABETES TYPE

Different types of diabetes have similar clinical characteristics. At present, doctors mostly use the stepwise elimination method to distinguish the patient's diabetes type and determine a treatment plan. Unfortunately, this method is time-consuming and has low efficiency. Failure to correctly classify the type of diabetes causes many patients to miss the optimal timeframe for treatment. Doctors can use our test to accurately identify the patient's type of diabetes and decide on treatment options.

TIDM = Type 1 Diabetes Mellitus LADA = Latent Autoimmune Diabetes of Adulthood

T2DM = Type 2 Diabetes Mellitus MODY = Maturity-onset diabetes of

the young ^ MODY TIDM LADA T2DM

Cause of disease

Interaction between innate and acquired factors

Genetic factor

Time of

During adolescence

During adulthood

At any time

Typically before 25 years old

Treatment

Mainly insulin

Use of insulin dependent on endogenous insulin level and clinical state

Mainly oral medication during early stages

Dependent on the specific gene mutation

Who should get tested:



diabetes



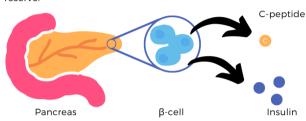


People who are about to features do not suggest change their treatment a definitive classification (For example insulin/SGLT2i)

02 C-PEPTIDE AND INSULIN

C-peptide as an indicator of insulin reserve

The beta cells in the pancreas secrete insulin to control blood sugar levels in our bodies. Therefore, a lack of B-cells and abnormal B-cell function can lead to insulin insufficiency. resulting in diabetes. C peptide is a fragment of the precursor insulin peptide (proinsulin). C-peptide is more stable than insulin, therefore it is a more suitable measure of insulin reserve.

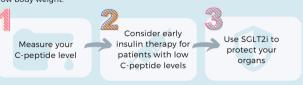


Insulin Resistance

When blood sugar enters the bloodstream, the pancreas releases insulin, allowing the cells to take up take up sugar from the blood. However, insulin resistance cause cells to lose their sensitivity to insulin, which prevents blood sugar from entering the cells. Insulin resistance can increase the risk of dyslipidemia, hypertension, and type 2 diabetes.

About SGLT2i (Sodjum-glucose co-transporter-2 inhibitor)

SGLT2i is used for lowering blood glucose and can protect the kidney and heart. However, patients with low C peptide reflecting insufficient insulin reserve cannot use glucose effectively. In these patients, the use of SGLT2i may precipitate ketosis due to excessive fat burning, especially during acute illness or stress. Before starting SGLT2i, it is worth excluding insulin insufficiency especially in patients with long disease duration poor glycemic control and/or low body weight.



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 2. Plosentock. J. & Fernannin. E. (2015). Euglycemic Diabetic Keto

[†] Some oral medications have a significant effect on specific gene mutations

[^]For more information, please refer to the Monogenic Diabetes Test - MD35.

03 GEMVCARE TEST

According to a jointly published report by two reputable diabetes organizations, the American Diabetes Association and the European Association for Study of Diabetes, it is recommended to test patients for C peptide and islet cell antibodies for diabetes classification. An International Experts Group also recommended C-peptide and islet cell antibody tests as a method for diagnosis and management of latent autoimmune diabetes in adults (LADA).

The test includes:



C-peptide

- · Indication of insulin secretion in your body
- People with severe insulin deficiency need insulin injections



Homeostatic Model Assessment for Insulin Resistance (HOMA-IR)

 Reflects the body's sensitivity to insulin, which helps determine the treatment approach and medication options



β-cell Autoantibodies

- Destroys β-cells, associated to type 1 diabetes and LADA
- Includes: Anti-glutamic acid decarboxylase (Anti-GAD) antibody.
 Anti-islet tyrosine phosphatase 2 (Anti-IA2) antibody

Interpretation of your test results: 3

| | | TIDM | LADA | T2DM | MODY | |
|--|--|---------------------------|--------------------|----------------|-------------------------|--|
| | C-peptide levels | Low | Gradual decline | Low to high | Low to normal | |
| | | | | | | |
| | Islet cells antibodies | Positive | Positive | Negative | Negative | |
| | | | | | | |
| | Insulin Resistance | Negative | Negative | Positive | Negative | |
| | | | | | | |
| | % of adult patients with diabetes ⁴ | 1-2% | 6-8% | 90% | 1-3% | |
| | | | | | | |
| | Genetic impact on the | Increase risk of diabetes | | | Directly cause onset of | |

Note: Patients with diabetes often have multiple biomarkers related to his/her diabetes. #Please visit our website for other genetic testing services.

Sources

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94 SERVICE FLOW

STEP

Specimen collection*:

- C-peptide test requires 3ml of EDTA anticoagulant blood (fasting or after glucose stimulation by glucagon or after meal)
- 2. **β-cells antibodies test** requires 3ml of coagulant blood

STEP 2

The specimen will be delivered directly to our testing centre



STEP 3

Your health report will be completed in 14 working days



STEP 4

The report will be explained to you by your healthcare provider



05 ABOUT US

GemVCare - committed to helping the public prevent chronic diseases and improving the health of patients.

With professional genetic testing technology for chronic diseases, medical professionals can customize precise treatments and management models according to your personal genetic profile and health conditions so that you can live your best life.

OUR PARTNERS

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