

Kappa Free Light Chains: Enhancing Multiple Sclerosis Diagnosis Beyond Oligoclonal Bands

Dr. Kumari Archana, Dr. Devavrata, Dr. Saurav , Dr. Naresh, Dr. Iftikar, Dr. Prashant Thakur,
Dr. Jyoti Garg, , Dr. Ashish Kumar Duggal
Department of Neurology, ABVIMS & Dr. RML Hospital

INTRODUCTION
☐ With the advent of newer diagnostic methods like automated nephelometry and automated turbidometry, Kappa Free Light Chains assays has gained popularity in diagnosing demyelinating diseases.
☐ Studies on the diagnostic value of KFLC in MS have demonstrated that it is a valid, stable against most pre-analytic influencing factors, easier and rater-independent alternative to OCBs detection.
☐ There is intrathecal KFLC synthesis like OCBs in CIS and MS patients and the sensitivity of KFLC is even better than OCBs.
☐ Here, we present a case series focussing on the diagnostic relevance of KFLC in MS.

PATIENT	1	2	3	4
Age	37 years /Male	43 years/F	28 years/F	50 y/M
Presentation	Partial cord syndrome-3 years, Bladder symptoms - 2.5years, Cerebellar syndrome- 8 months.	Partial cord syndromes in 2014 and 2020, Optic Neuritis – 2023	2024- 2 attacks, 2025 – 1 attack – all partial cord syndromes	Cerebellar and Partial cord syndrome – 2 years
Course	Progressive	Relapsing remitting	Relapsing remitting	Progressive
OCBs	Negative	Negative	Negative	Negative
KFLC index	8.15	6.81	21	34.70
Imaging				20 1522 40 10 10 10 10 10 10 10 10 10 10 10 10 10 1
OCT/VEP	WNL/WNL	WNL/WNL	WNL/WNL	Abnormal/Abnormal
DIS/DIT	Yes/Yes	Yes/Yes	Yes/Yes	Yes/Yes
Dilemma	OCBs negative with initial imaging not fulfilling MS criteria.	OCBs - negative All attacks myelitis. Only 1 T1 black hole on MRI Brain. Callososeptal sparing on MRI Brain.	OCBs negative All attacks myelitis.	The initial imaging didn't fulfill MS criteria.

RESULTS & DISCUSSION

☐ All the patients evaluated in this series had negative CSF - OCBs while all of them had positive KFLCs. ☐ KFLCs solved the dilemma of DIT in patients with negative OCBs and clinical and imaging criteria not fulfilling DIT. ☐ Thus, it helped us in diagnosing MS where OCBs couldnot. ☐ This series shows the higher sensitivity of KFLC than OCBs. ☐ Moreover, OCBs provide only a qualitative result, not quantitative whereas KFLCs provide quantitative results. ☐ Studies have shown that it also predicts disease activity, allows for risk stratification and helps in predicting disability accrual. ☐ It even predicts Radiological activity, with better sensitivity and lower specificity than OCBs.

CONCLUSION

☐ OCBs are not positive in all MS patients especially the Asian population.
☐ KFLCs help in establishing DIT like OCBs and is a good alternative.
☐ As there is no single test for MS and diagnosis of MS relies on the integration of clinical, imaging, and laboratory findings.
☐ So, the use of KFLCs with OCBs perhaps will increase the sensitivity as well as the specificity.

REFERENCES

Presslauer S, Milosavljevic D, Brücke T, Bayer P, Hübl W. Elevated levels of kappa free light chains in CSF support the diagnosis of multiple sclerosis. J Neurol. 2008 Oct;255(10):1508-14.

Monreal E, Fernández-Velasco JI,. Establishing the best combination of the kappa free light chain index and oligoclonal bands for an accurate diagnosis of multiple sclerosis. Front Immunol. 2023 Oct 25;14:1288169