

ALDO+PA

High Performance Screening for Primary Aldosteronism

Undiagnosed, Untreated

The challenge of Hypertension Screening

Hypertension often goes undetected and secondary forms like primary aldosteronism (PA) frequently remain undiagnosed due to a low screening rate of only 1-2%. Traditional ELISA-based diagnostic tests suffer from variability and drug interference, leaving clinicians to manage hypertension using a trial-and-error approach, often without identifying the underlying molecular causes.

Consequences:

- Delayed blood pressure control
- Patient frustration & unnecessary side effects
- Inappropriate/wrong medication
- Increased risk of cardiovascular complications (stroke & heart failure)

Our Solution

Early & precise screening with ALDO+PA

Our innovative ALDO+PA test directly measures Angiotensin I, Angiotensin II, and Aldosterone in human blood serum using mass spectrometry calculating the **Aldosterone-to-Angiotensin II Ratio** to detect primary aldosteronism.

Patient Benefits

- **Early, Accurate Diagnosis** – Screening for primary aldosteronism without the need to discontinue medication
- **Guideline-compatible** – Aligns with ESH hypertension screening recommendations
- **Improved Patient Outcomes** – Reduces risks of stroke, heart failure, and cardiovascular complications through early and correct treatment
- **Insights on anti-hypertensive drug efficacy** and specific renal functions

How to get tested with ALDO+PA

1

Sample Collection

A blood serum sample is taken either at the doctor's office or directly at one of the 9 locations of labors.at.

2

Advanced Analysis

The sample is analyzed using state-of-the-art mass spectrometry (LC-MS/MS) ensuring the highest diagnostic accuracy.

3

Results

Screening status for primary aldosteronism based on clinically validated cut-offs. Provided directly to the patient or referring physician.

Turnaround Time: max. 14 days

Costs: 183,20 EUR

Patients qualifying for ALDO+ testing:

- Resistant /uncontrolled hypertension
- Grade 2 or Grade 3 hypertension
- Hypokalemia / Low-normal potassium levels
- Atrial fibrillation
- Obstructive Sleep Apnea (OSA)
- Adrenal incidentaloma
- Family history of primary aldosteronism (PA) or early stroke
- Hypertension in people under 40 years

Quick facts for doctors:

- Reliable blood test using mass spectrometry
- Accurate Measurement of Angiotensin I, Angiotensin II, and Aldosterone, Interpretation of AA2-Ratio
- Guideline-compatible PA-Screening
- Insights on anti-hypertensive drug efficacy and specific renal functions
- Simple: Blood sample analyzed by labors.at
- **No need to discontinue medication**