**Table 1: Diagnostic criteria for APS (2) and CAPS (4)**

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| APS | | |
| *APS is diagnosed when at least 1 clinical and 1 laboratory criteria are fulfilled.* | | |
| Clinical criteria | 1. Vascular thrombosis | ≥1 clinical episodes of arterial, venous or small vessel thrombosis in any tissue or organ |
| 1. Pregnancy morbidity | 1. ≥1 unexplained deaths of a morphologically normal fetus at or beyond the 10th week of gestation 2. ≥1 premature births of a morphologically normal neonate before the 34th week of gestation because of either eclampsia, severe pre-eclampsia, or recognized features of placental insufficiency 3. ≥3 unexplained consecutive spontaneous abortions before the 10th week of gestation, with maternal anatomic or hormonal abnormalities and paternal and maternal chromosomal causes excluded |
| Laboratory criteria | 1. Lupus anticoagulant present in plasma, on ≥2 occasions at least 12 weeks apart 2. Anticardiolipin antibody IgG and/or IgM in serum or plasma, present in medium or high titers on ≥2 occasions at least 12 weeks apart 3. Anti-Beta2 glycoprotein-1 IgG and/or IgM antibodyin serum or plasma present on ≥2 occasions at least 12 weeks apart | |
| CAPS | | |
| Criteria   1. Evidence of involvement of ≥3 organs, systems and/or tissues 2. Development of manifestations simultaneously or in less than 1 week 3. Confirmation by histopathology of small vessel occlusion in at least one organ or tissue 4. Laboratory confirmation of the presence of antiphospholipid antibodies | | |
| *Definite CAPS* | All 4 criteria | |
| *Probable CAPS* | * All 4 criteria, except for only 2 organs, systems, and/or tissue involvement * All 4 criteria, except for the absence of laboratory confirmation owing to the early death of a patient never tested for antiphospholipid antibodies before the CAPS * Criteria 1, 2, 4 * Criteria 1, 3, 4 and the development of a third event between 1 week and 1 month after presentation, despite anticoagulation | |