

## ADVANCE DIAGNOSTICS CENTRE

## C1-C2/17A, NEAR NIHARIKA TALKIES KORBA- 495677 PH-09228333 MOBILE-9300888178

NAME : MRS NISHAT PARVEEN 35 Years / Female Reg No. : 12611

Ref. By : SELF Reg. Date : 31/05/2022 07:16PM

Address : AMAN NAGAR DARRI, KORBA Collected At : MedZone Center

## INVESTIGATION REPORT

## **CLINICAL BIOCHEMISTRY**

TEST RESULT UNIT BIOLOGICAL REF RANGE TEST METHOD

Anti Thyroperoxidase Antibody

Sample Type : SERUM

Anti Thyroperoxidase Antibody : 5.00 IU/mL Negative : < 60 Chemiluminescenc

Positive :>60

Thyroid-specific peroxidase (TPO) is present on the microsomes of thyrocytes and is expressed at its apical cell surface. In synergy with thyroglobulin (Tg) this enzyme has an essential function in the iodination of L-tyrosine and the chemical coupling of the resulting mono- and di-iodotyrosine to form the thyroid hormones T4, T3 and rT3. TPO is a potential autoantigen. Elevated serum titers of antibodies to TPO are found in several forms of thyroiditis caused by autoimmunity. The still fregently found term "microsomal antibody" originates from the time when TPO had not yet been identified as an antigen in autoimmunity caused by microsomes. In the clinical sense the two terms anti-TPO and microsomal antibody can be used synonymously; there are differences, however, with regard to the test methods. High anti-TPO titers are found in up to 90% of patients with chronic Hashimoto's thyroiditis. In Graves' disease, 70% of the patients have an elevated titer. Although the sensitivity of the procedure can be increased by simultaneously determining other thyroid antibodies (anti-Tg, TSH-receptor antibody - TRAb), a negative finding does not rule out the possibility of an autoimmune disease. The magnitude of the antibody titer does not correlate with the clinical activity of the disease. Initially elevated titers can become negative after lengthy periods of illness or during remission. If antibodies re-appear following remission, then a relapse is probable. Whereas the usual tests employ unpurified microsomes as an antigen preparation, the anti-TPO tests use a purified peroxidase. The two procedures are of comparable performance in terms of clinical sensitivity, but better lot-to-lot consistency and higher clinical specificity can be expected from anti-TPO tests due to the higher quality of the antigen used. Recombinant antigen and polyclonal anti-TPO antibodies are used in the Roche Cobas e411 anti-TPO assay.

метнор: One-step sandwich and competitive FEIA

INSTRUMENT: TOSHO AIA-360 JAPAN

--- End Of Report ---

Sample Registered On : 31/05/2022 07:16PM

Sample Received On : 01/06/2022 12:17PM Home Collection

Report Released On : 01/06/2022 12:17PM

Sample Barcode: Checked By:duwash

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Dr. VANDANA CHANDANI