

HUMAN ANTI-ANIMAL ANTIBODIES: EVEN TODAY, IT IS STILL A PROBLEM IN ROUTINE PRACTICE! ILLUSTRATION WITH 4 CLINICAL CASES.

E. Cavalier (1), I. Carlisi (1), P. Delanaye (2)

Departments of (1) Clinical Chemistry and (2) Nephrology, Dialysis and Hypertension, University of Liège, CHU Sart-Tilman, Liège, Belgium.

Background. Human anti-animal antibodies (HAAA) are known as a cause of analytical interferences. This knowledge, however, tends to be lost. This can be due to less informed new generation of Clinicians or Biologists or to the industrialization of the production of the results (with huge analytical platforms) where the clinical result of an immuno-assay for a single patient has less importance than the turnaround time. We present here 4 cases to illustrate the problem.

Methods. Case 1: 60 yo. woman with calcitonin (CT) levels at 63 pg/mL, not stimuable by pentagastrin. Underwent a thyroidectomy, but CT remained elevated. Then underwent different expensive examinations (scanners, Pet-scans, scintigraphys,...). Six years later, she still presents high CT levels and is followed-up for a multiple endocrine neoplasia. Case 2: 29 yo woman with PTH levels >2000 pg/mL, without renal disease or phosphocalcic metabolism abnormalities. Case 3: 61 yo renal transplanted man with PTH levels increasing from 187 to >5000 pg/mL in 6 months. Case 4: 46 yo. stressed and tired woman which presented unexpected high levels of fasting insulin at three different occasions. She was thus hospitalized three days for exploration.

Results. All of these 4 patients presented an interference due to HAAA (anti-goat, anti-mouse or not species specific) or due to rheumatoid factor. These falsely elevated results have had different consequences, like expensive unnecessary extra-investigations and have stressed the patients.

Conclusions. HAAA still exist and cause every day medical errors. In front of an unexpected result, the dialogue Clinician-Biologist is absolutely essential.

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