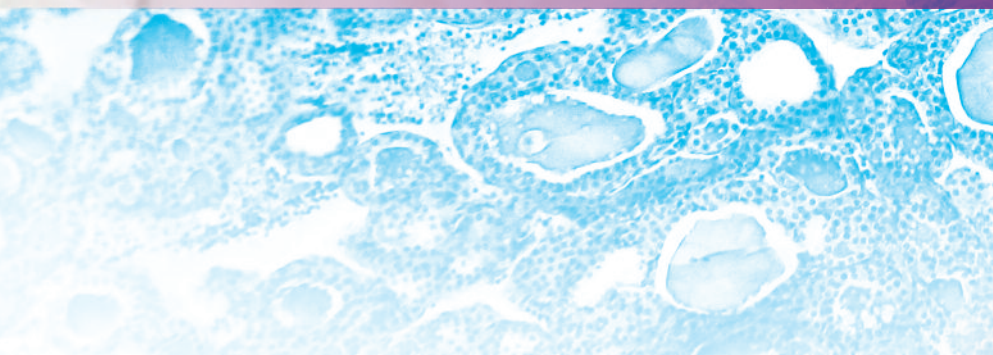


Thermo Scientific B-R-A-H-M-S Tg
Immunodiagnostic Assays



confident follow-up of thyroid cancer patients

Tg + Recovery: reliable strategies to overcome assay interferences and to increase applicable Tg results

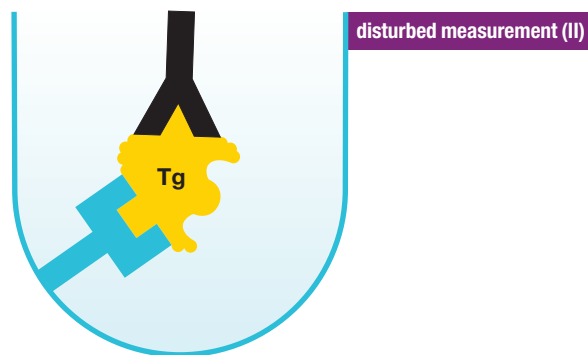
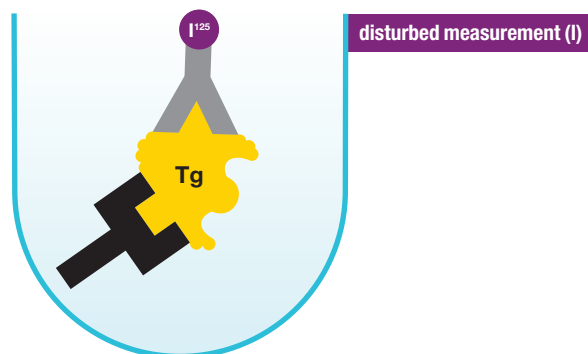
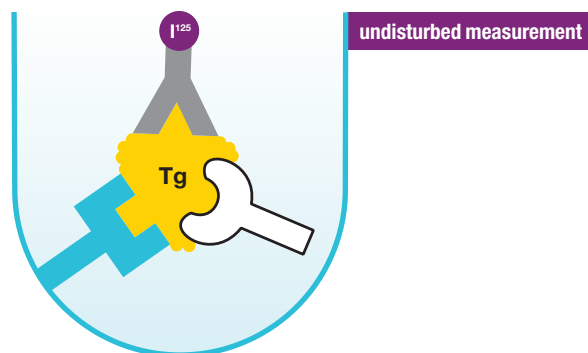
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Assay interferences

Thyroglobulin (Tg) is a highly specific tumor marker for differentiated thyroid carcinoma. Its measurement in serum represents one of the most efficient tools for early detection of tumor relapse after an effective primary therapy.

Interferences, particularly by anti-Tg autoantibodies, often give rise to false Tg results. This might occur, even with newly developed Tg assays, in spite of their improvements that have been made by the manufacturers.

This problem appears to be quite a challenge for laboratory practice. We will try to approach this phenomenon with the help of examples and will show and validate ways to resolve this problem.



Anti-Tg autoantibodies causing interferences



Anti-Tg autoantibody not causing interferences



1st assay antibody



2nd assay antibody

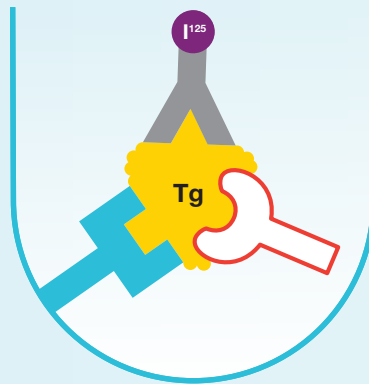


Thyroglobulin in serum

Tg antibody measurement

Patient A

with anti-Tg
antibodies
not causing
interferences

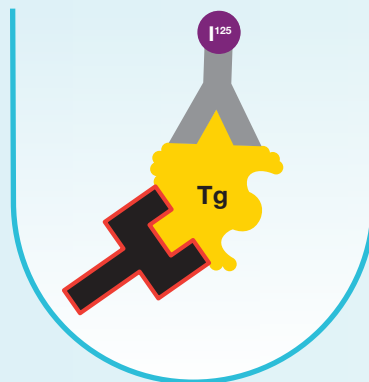


- Real Tg level: 5 ng/mL
- Tg antibodies not causing interferences: 1000 U/mL
- Measured Tg level: 5 ng/mL

Tg result will be discarded!

Patient B

with anti-Tg
antibodies causing
interferences



- Real Tg level: 5 ng/mL
- Tg antibodies causing interferences: 1000 U/mL
- Measured Tg level: 0 ng/mL

Tg result will be discarded!

Patient C

with not detectable
anti-Tg antibodies
causing
interferences

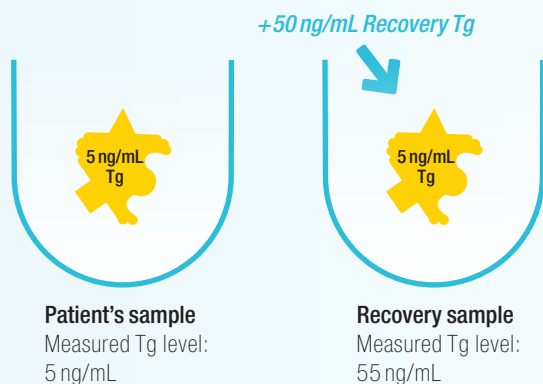


- Real Tg level: 5 ng/mL
- Tg antibodies causing interferences below detection limit
- Measured Tg level: 0 ng/mL

Tg result will be falsely considered valid!



Tg recovery test

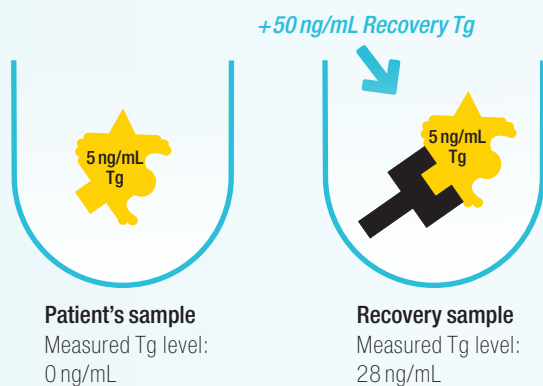


- Real Tg level: 5 ng/mL

Recovery

$$\frac{55 \text{ ng/mL} - 5 \text{ ng/mL}}{50 \text{ ng/mL}} = \frac{50}{50} \triangleq 100\%$$

Tg result is considered valid!

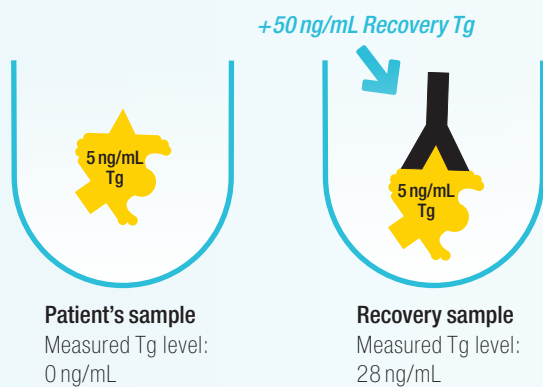


- Real Tg level: 5 ng/mL
- Tg antibodies causing interferences: 1000 U/mL

Recovery

$$\frac{28 \text{ ng/mL} - 0 \text{ ng/mL}}{50 \text{ ng/mL}} = \frac{28}{50} \triangleq 56\%$$

Tg result will be discarded!



- Real Tg level: 5 ng/mL
- Tg antibodies causing interferences below detection limit

Recovery

$$\frac{28 \text{ ng/mL} - 0 \text{ ng/mL}}{50 \text{ ng/mL}} = \frac{28}{50} \triangleq 56\%$$

Tg result will be discarded!



...and how to overcome



The validation of a measured serum Tg result by determining only anti-Tg autoantibodies involves the **risks**:

- not to consider accurate Tg results (see Patient A)
- **not to recognize invalid falsely low Tg levels as such and to consider them as valid** (see Patient C)

The measurement of Tg recovery guarantees the most efficient and effective classification of “valid” and “invalid” Tg results.

The rate of applicable Tg results increases.





Thermo Scientific B·R·A·H·M·S Tg and anti-Tg assays

B·R·A·H·M·S **Tg-pluS** RIA

B·R·A·H·M·S **Tg-pluS** LIA

B·R·A·H·M·S **Tg-S** RIA

B·R·A·H·M·S **Tg-S Recovery** RIA

B·R·A·H·M·S **hTg** KRYPTOR
(with Recovery)

B·R·A·H·M·S **anti-Tg** RIA

B·R·A·H·M·S **anti-Tg_n** RIA

B·R·A·H·M·S **anti-Tg_n** LIA

B·R·A·H·M·S **anti-Tg_n** KRYPTOR

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