LABORATORY REPORT

Redcliffe labs

Patient Name	: **Mr MR.DUMMY**		
DOB/Age/Gender	: 23 Y/Male	Sample Collected	: Apr 26, 2024, 01:00 PM
Patient ID / UHID	: 8052830/RCL7249038	Report Date	: May 24, 2024, 06:52 PM.
Referred By	: Dr. X	Barcode No	: SI484432
Sample Type	: Serum	Report Status	: Final Report

Test Description	Value(s)	Unit(s)	Reference Range

Tissue Transglutaminase IgG Antibody (tTg IgG)

TTG-IgG (Tissue Transglutaminase) *(Serum,EIA)*	10.3	AU/ml	Negative: < 12.0 Equivocal: 12.0-17.9 Positive: >= 18.0

Interpretation:

RESULT IN AU/mL	REMARKS
< 12.0	Negative
12.0-17.9	Equivocal
≥ 18.0	Positive

Note:

1. Test to be performed before eliminating gluten from the diet.
2. Presence of immune complexes or other immunoglobulin aggregates may cause an increased level of non-specific binding leading to false positive results.
3. Negative tTG IgG result in an untreated patient does not rule out gluten-sensitive enteropathy as the patient may be IgA positive or have no antibody to tTG.
4. All results should be used in conjunction with clinical findings and other serological tests.
5. A useful test for exclusion of Celiac disease is HLA - DNA testing for the presence of DQ2 (DQB1*02, DQA1*05) and DQ8 (DQB1*03, DQA1*03). Celiac disease can be excluded in 90% cases if all these alleles are negative.

Comments:

Gluten-sensitive enteropathy or celiac disease is characterized by atrophy of the small intestinal villi leading to a so-called flat mucosa. It is caused by a pathological intolerance to Gliadin, the alcohol-soluble fraction of gluten in wheat, rye and barley. As celiac disease is caused by the intake of gluten, consequently a gluten-free diet cures the disease completely and thus has to be maintained throughout life. Renewed consumption of Gliadin leads to a return of the symptoms. The disease is HLA-associated (>95% of patients have DQ2 encoded by DQA1*0501 and DQB1*0201) and manifests at any age with a peak onset in early childhood, even in newborn babies. The incidence ranges from 1 in 4000 to 1 in 300 in european countries. Diagnosis of celiac disease is made by small intestinal biopsy (demonstrating the flat mucosa) supported by serological markers. Antibodies against Gliadin and anti-endomysium antibodies (EMA) are of major significance. They are detected so far by indirect immunofluorescence (IFT), which is restricted to subclsas IgA only. The identification of tissue transglutaminase (tTg) as a major target antigen of EMA provided the opportunity of an easier and more reliable diagnosis of celiac disease. tTg is an enzyme that upon tissue damage is released from the cells where it is thought to aid in tissue repair. Anti-tTg antibodies show higher sensitivity and specificity than anti-Gliadin antibodies. Furthermore they closely correlate with the activity of the disease and thus are especially useful for diet monitoring. The determination of IgG antibodies to tTg is the only available specific serology for those 2-5% of patients with IgA deficiency. A high number of subclinical cases have been detected by screening for anti-tTg, fostering the theory that the majority of celiac diesease cases goes undetected and untreated.

*** End Of Report ***

Disclaimer: Method given in report are only indicative and can be changed depending upon type of machine and kit available at time of testing.

Not all tests at all locations are under NABL scope. Availability of tests under NABL scope varies from lab to lab.

Dr. Dummy

Booking Centre :- DEMO PARTNER CHENNAI, DEMO PARTNER CHENNAI

Processing Lab :-

Terms and Conditions of Reporting

1. The presented findings in the Reports are intended solely for informational and interpretational purposes by the referring physician or other qualified medical professionals possessing a comprehensive understanding of reporting units, reference ranges, and technological limitations. The laboratory shall not be held liable for any interpretation or misinterpretation of the results, nor for any consequential or incidental damages arising from such interpretation.

2. It is to be presumed that the tests performed pertain to the specimen/sample attributed to the Customer's name or identification. It is presumed that the verification particulars have been cleared out by the customer or his/her representation at the point of generation of said specimen / sample. It is hereby clarified that the reports furnished are restricted solely to the given specimen only.

3. It is to be noted that variations in results may occur between different laboratories and over time, even for the same parameter for the same Customer. The assays are performed and conducted in accordance with standard procedures, and the reported outcomes are contingent on the specific individual assay methods and equipment(s) used, as well as the quality of the received specimen.

4. This report shall not be deemed valid or admissible for any medico-legal purposes.

5. The Customers assume full responsibility for apprising the Company of any factors that may impact the test finding. These factors, among others, includes dietary intake, alcohol, or medication / drug(s) consumption, or fasting. This list of factors is only representative and not exhaustive.