

Patient Name :
 DOB/Age/Gender : Bill Date :
 Patient ID / UHID : Sample Collected :
 Referred By : Sample Received :
 Sample Type : Report Date :
 Barcode No : Report Status :

BIOCHEMISTRY REPORT

LDH Isoenzymes

LDH Fractions

L1	11.4	%	16.1-31.5
L2	20.7	%	29.2-41.6
L3	21.7	%	17-26.2
L4	14.9	%	5.9-12.3
L5	31.3	%	3.2-17.3

Note :

LD isoenzyme patterns should not be interpreted without a knowledge of the patient's clinical history

Interpretation :

Normal LD isoenzyme pattern: LD2 is the largest fraction, followed by LD1 and LD3 ; LD4 and LD5 are the minor components.

Abnormal LD Isoenzyme patterns :

1. Elevated LD1 and LD2 while LD1 value becomes generally greater than the LD2 value (LD1 /LD2 flip) myocardial infarction and surgery, pernicious , hemolytic, acute sickle cell and megaloblastic anemia hemolysis of any cause Duchenne muscular dystrophy (relative increase of LD1 and LD2)
2. Elevated mid-zone fractions: LD3 and generally also LD2 and LD4 massive platelet destruction such as in pulmonary infarction, lymphatic system involvement such as in infectious mononucleosis, lymphomas and lymphocytic leukemias.
3. Elevated LD5 : injury, and inflammatory and degenerative diseases of the skeletal muscle, many types of liver injury such as cirrhosis, hepatitis and congestion, congestive heart failure.

LDH-Lactate Dehydrogenase (Lactate-pyruvate(IFCC))	247	U/L	0-250
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Interpretation:

- Lactate dehydrogenase (LDH) is an enzyme that is present in heart, liver, muscle and kidney tissues.
- Very high levels of LDH are seen in patients with megaloblastic anaemia, carcinoma and shock.
- Moderate increase seen in muscular disorders, nephrotic syndrome, and cirrhosis.
- Mild increases in LDH activity are seen in cases of myocardial or pulmonary infarction, leukemia, hemolytic anemia and non-viral hepatitis
- Many cancers cause a general increase in LDH levels or an increase in one of its isozymes.



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