

50

FUNDAMENTAL AND CLINICAL EVALUATION OF FREE T₄ RADIOASSAY KIT. S.Bito,H.Ito,Y.Morimoto, N.Oshiro,N.Tamaki,T.Ishihara, and T.Mori. RI Department and Internal Medicine, Kobe Central Municipal Hospital. Kobe.

Usefulness of free T₄ radioassay kit (Gamma Coat) were evaluated. This solid phase system was found to bind not only free T₄ but considerable part (9.4–17.7%) of total T₄. The 2nd step of incubation was direct saturation analysis by I-125-T₄, and standard curves were constructed by B/Bo % v.s known free T₄ concentration of the standard sera. Intra- and inter-assay variabilities were 4.8 % to 14.8 %, and 12.8 to 28.6 %, respectively. Dilution test using '0' standard serum, which had 0 µg/dl T₄ and 20.9 µg/dl TBG, showed almost linear regression, however, over estimation by TBG excess and under estimation by TBG deficiency were encountered. Similar results were obtained by recovery test also. Clinically, measured free T₄ in 29 normal subjects gave mean value of 1.24 ± 0.36 (s.d.). Untreated Graves' patients had values exceeding 2.45, and hypothyroid patients had values less than 0.42, respectively. Most of euthyroid cases with TBG abnormalities showed normal distribution except for 1 case of 7.5 µg/dl TBG showing 0.51. Measured free T₄ showed a good correlation ($r=0.899$) with calculated free T₄ index. In conclusion, free T₄ radioassay kit was considered quite useful clinically, even though it had some problems fundamentally.

51

FUNDAMENTAL AND CLINICAL EVALUATION OF THE MEASUREMENT FOR SERUM FREE THYROXINE CONCENTRATION WITH RADIOIMMUNOASSAY KIT. B.BAN,M. HASHEGAWA,T.OKI,Y.AWAYA,H.KIMURA,T.INOUE,T.KOJIMA and S.IINO. Division of endocrinology and Metabolism, Depart.Int.Med. Showa Un. Fugigaoka Hospital. Yokohama.

The fundamental and clinical evaluation of GammaCoat FT₄ which determines serum free thyroxine (FT₄) was performed in this study. The standard curve covered the range between 0.2 and 9.5 ng/dl. The coefficients of variation for intraassay were from 4.4 to 10.3% and those for interassay were from 4.3 to 15.2%, respectively. The recovery of FT₄ for dilution of the serum with high concentration of FT₄ was 130%, and the cross reactivity for T₄ and T₃ were 100% and 5%, respectively. The coefficients of correlation between FT₄ and FT₄I (Thyrotect3 X Thyopac4/100), FT₄ and T₄ or FT₄ and T₃ (RIA) were $r=0.879$, 0.892 and 0.735 , respectively. The mean serum FT₄ concentration (mean±SD) were 1.62 ± 0.33 ng/dl for normal subjects (84 cases) and 1.48 ± 0.25 ng/dl for normal pregnant women (75 cases), respectively. The ranges or values of FT₄ were 2.7 ng/dl and more for the patients with Graves' disease (35 cases), 0.36 ng/dl and less for those with hypothyroidism (8 cases), between 1.06 and 2.40 ng/dl for those with chronic thyroiditis, between 1.91 and 8.05 ng/dl for those with subacute thyroiditis, 0.48 and 0.54 ng/dl for those with TBG deficiency, respectively. These data indicate that FT₄ value well reflected the thyroid function.

52

FREE THYROXINE MEASUREMENT WITH RADIOIMMUNOASSAY. T.Nakagawa,K.Kawarada,M.Taguchi and N.Shinoda. Department of Radiology, Mie University School of Medicine and Central Clinical Division of Radiology, Mie University Hospital. Tsu, Mie.

GammaCoat Free T₄ Radioimmunoassay Kit was validated for the method and clinical results. Per cent free T₄ bound by coated tube as measured with I-125-T₄ labeled sera was much more than the one obtained by dialysis, increasing in hypothyroidism and decreasing in hyperthyroidism. Absolute free T₄ bound by tube estimated from the product of total T₄ by the per cent free T₄ was increased in hyperthyroidism and decreased in hypothyroidism, but not exactly proportional to the one by dialysis. This absolute free T₄ bound by tube is measured with competitive binding radioassay and bound fraction is referred to the standard curve which is labeled with real free T₄ value. Free T₄ values did not exactly fall linearly with dilution with hormone-free serum, especially in hyperthyroid sera. This result is explainable by the difference in unoccupied TBG concentration between hyperthyroid sera and hormone-free serum. Free T₄ concentration measured with different volume of 10 µl to 100 µl of samples remained constant. These results support that free T₄ measured with this kit is valid obeying mass law equations. Normal value for free T₄ ranged 1.1 ± 0.2 ng/dl (mean±SD). There was a good correlation ($r = 0.984$) between free T₄ values as measured with dialysis and radioimmunoassay.

53

EVALUATION OF SOLID-PHASE RADIOIMMUNOASSAY FOR FREE THYROXINE. Y.Iida,T.Kosaka,K.Kasagi,K.Ikekubo,J.Konishi and K.Torizuka. Kyoto University School of Medicine. Kyoto.

A solid-phase radioimmunoassay (RIA) for the serum free thyroxine (FT₄), GammaCoat kit, was evaluated for its clinical usefulness. Coefficients of variation for 3 control sera were 6.5–7.1% (intraassay) and 7.1–12.5% (interassay). The percentage cross-reactivity of T₃ to the anti-T₄ antibody was 3.1%. Dilution of high FT₄ sera using a T₄-free serum with equivalent TBG concentration gave linear relationship. Time course of T₄ binding to the antibody was parallel in 2 euthyroid sera with high or low TBG concentrations. The normal range was 0.9–2.1 ng/dl as determined on 26 healthy adults. Serum FT₄ was increased in all 32 hyperthyroid and decreased in all 18 hypothyroid patients. It was normal in 14 pregnant women and 4 subjects with TBG deficiency, although free T₄ index (FT₄I) was low normal or low in these cases. In patients with liver cirrhosis (12) and chronic renal failure (9) FT₄I was low, and it was high in 2 of 7 patients with acute hepatitis. Except 5 cases of chronic renal failure, FT₄ was normal in these patients. Correlation of GammaCoat FT₄ with FT₄I ($r=0.90$) and with Immophase FT₄ ($r=0.92$) was good. Excellent correlation was observed between FT₄ (RIA) and FT₄ by equilibrium dialysis ($r=0.98$) in 18 subjects studied. Measurement of FT₄ by RIA was rapid and reproducible, and in conditions where TBG varies it more accurately reflected thyroid status than did the FT₄I.