

POSTER SESSION I

A MULTICENTER EVALUATION OF APTASCREEN® HEPATITIS B SURFACE ANTIGEN (HBsAg) FROMBLOPLASTIN TIME TEST, CEPHO-TEST. D. Collen, H.C. Godal, P.M. Mannucci, I.M. Nilsson, C. Gilhuus-Moe and N. Refsum. University of Leuven, Belgium, Ullevål Hospital, Oslo, Norway, University of Milan, Italy, Allmänna Sjukhuset, Malmö, Sweden and Nyegaard & Co., Oslo, Norway.

To compare the sensitivity and precision of the Activated Partial Thromboplastin Time (APTT) test Cephotest to that of APTT methods in current use, Cephotest and current APTT method (Leuven and Milan: Locally modified Thrombofax/kaolin procedures; Malmö: Automated APTT; Oslo: APTT of human brain/kaolin) were performed in parallel (20 tests) on lyophilized standard plasmas of 4 levels of factor VIII. The mean value (1 standard deviation) of Cephotest on Control Plasma Normal was 36.3 (2.21) s in Leuven, 31.7 (1.13) s in Oslo, 35.0 (1.36) s in Milan and 35.0 (1.16) s in Malmö. The corresponding values of the local APTT methods were 50.2 (1.58) s, 34.5 (1.27) s, 51.9 (1.17) s and 38.8 (1.23) s, respectively. In Oslo, Milan and Malmö, the sensitivity of Cephotest was superior to that of the local APTT reagent at all levels of factor VIII. In Leuven, the local APTT method had a higher ratio than Cephotest. There was no statistical significant differences between the standard deviation of Cephotest and the local APTT methods. The study indicates that Cephotest has a high sensitivity, satisfactory precision and is subjected to only minor interlaboratory variations.

FACTOR VIII DEFICIENT PLASMA FOR LABORATORY TESTS PREPARED FROM NORMAL PLASMA AND A HUMAN ANTIBODY. K. A. Rickard, T. Exner and H. Kronenberg. Haematology Department, Royal Prince Alfred Hospital, Sydney, Australia.

Plasma from a patient with a potent factor VIII inhibitor was mixed at several low concentrations with fresh normal plasma. The factor VIII deficient plasmas obtained after a short incubation period were used as substrate plasmas in the normal one stage factor VIII assay method. Results obtained using 0.5% to 1% of the inhibitor plasma in normal plasma compared favourably with those obtained using normal haemophilia A factor VIII-deficient plasma provided that tests were carried out without delay. A single plasma exchange of this patient provided enough antibody to prepare more than 500 litres of factor VIII-deficient plasma by simple mixing with fresh normal plasma.