copper, our method is simple and reliable for the microdetermination of serum iron.

### References


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### Errors in Describing Errors

To the Editor:

An excellent book (1) says about biochemical test results: "Some subjects who are perfectly healthy will have test results outside of the healthy range of values (a false positive result: a type I or α error) and some subjects who are ill will have test results within the healthy range (a false negative result: a type II or β error)." These concepts about α and β errors are obviously coherent (the author is a clinical biochemist and Fellow of the Statistical Society in the United Kingdom) with the basic formulation of the null hypothesis for this kind of comparisons.

Surprisingly, one can read in several relevant publications (2–4) concepts other than mentioned above. Thus, these authors hold a radically different point of view: they state that a falsely positive result is a β error and, conversely, a falsely negative result is an α error. Whether this be a clerical or a conceptual error, the fact is that the clinical biochemists can be confused on comparing literature from different authors.

### References


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### Serum Glucose Phosphate Isomerase and Ornithine Carbamoyltransferase Activities Are Increased in Women Taking Contraceptive Steroids

To the Editor:

Serum glucosephosphate isomerase (GPI; EC 5.3.1.9) activity is increased in cancer (1), viral hepatitis (1, 2), and myocardial infarction (2). We describe here a hitherto unknown cause of high serum GPI activity, which may have a bearing on the diagnostic value of this enzyme.

We measured serum GPI activity with a kit (3) in 10 healthy women of reproductive age, three, six, and nine months after they started taking an oral contraceptive (Ovulen–Searle) and in 20 age- and sex-matched controls. The data were analyzed statistically by use of Student's t-test.

Mean (and SD) serum GPI activity was 23.4 (6.6) Bodansky units in the control group, and 58.4 (16.3), 144.7 (64.1), and 192.9 (101.3) Bodansky units after use of the oral contraceptive for three, six, and nine months, respectively. The difference at each interval was highly significant (p < 0.001). Values exceeding 40 Bodansky units are considered abnormal (3). The highest value in our control group of women was 38 Bodansky units. Values exceeding 40 Bodansky units were observed in eight of the 10 women three months after they started taking the oral contraceptive.