ter distinguishes hyperfunction from normal parathyroid function."

Haver et al. enumerated several cases in which the two assays gave particularly discrepant results. It is difficult to assess the significance of those anecdotal case descriptions, but their description of case GC could be interpreted differently. Two months before testing, the patient had undergone total parathyroidectomy, and part of the gland was implanted in the left forearm. The patient had normal values for PTH with the INC procedure, above-normal values with the MML assay. The authors stated that: "Implants are usually not functional until after three or four months." However, parathyroid autotransplants may be functional, as assessed by radioimmunoassay, within a few days after transplantation (5, 6). Although one case does not prove anything, this example illustrates the importance of using confirmed reference groups of study objects if one is to avoid subjective bias in evaluating assay performance.

References

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Some New Developments in the Field of the Anti-LDs of the IgA Class

The senior author of the paper in question responds:

To the Editor:

Our publication was not (and was not meant to be) critical of the Mayo laboratory procedure. It was our intent to find a satisfactory alternative method that would not involve the inconvenience, the delay, and the expense associated with sending assays to a referral laboratory. We think that we have achieved this goal, not only through our initial evaluation, but also through extensive use of this procedure since 1985. In addition, there have been at least four evaluations by other laboratories that were carried out before, parallel with, and after our evaluation (1-4). All four reports confirm our conclusion that the INC PTH-MM method is an acceptable method for use in the clinical laboratory. Thus, regardless of any possible deficiencies in our evaluation of the method, the conclusion appears to be correct. This is also suggested by the fact that the latest CAP survey lists the INC PTH-MM procedure as the most widely used in-house procedure among survey participants (5).

References

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To the Editor:

Recent advances in our investigations dealing with the lactate dehydrogenase isoenzyme 3-immunoglobulin Aα (LD3α-IgA3) complex (1) prompt us to comment on the interesting article of Podlasek et al. (2).

In the last paragraph of their article they conclude, "...the anti-LDs ap-