AMPATH
Central Reference Labor
Door No. 1-100/1/CCH N
Serilingampally
Hyderabad

MC-2751

AMPATH
ACCURATE DIAGNOSTICS, AMERICAN STANDARDS.

## LABORATORY REPORT

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|---|---|---|---|---|---|
| **NAME** | **: MR.PR0959** | REFERRED BY | : SELF | VISIT NO | : VAMP26147986 |
| AGE | : 40Y 0M 0D | ZERO TARIFF CLIENT CODE | | COLLECTED ON | : 21-04-2026 10:00 |
| GENDER | : Male | **LAB MR#** | **: AAMP01479265** | RECEIVED ON | : 21-04-2026 18:11 |
| OP / IP / DG # | : | | | APPROVED ON | : 22-04-2026 13:18 |
| | | | | REPORT STATUS | : Final Report |

| Test Name | Result | Biological Ref. Interval | Unit |
|---|---|---|---|
| **Celiac Disease Screening Profile** | | | |
| **SEROLOGY AND IMMUNOLOGY** | | | |
| **Anti Gliadin (Deamidated)IgG Antibodies** *(Serum)* | | | |
| Anti Gliadin (Deamidated)IgG Antibodies<br>*Enzyme Immunoassay* | 2.30 | Negative: < 20<br>Weak Positive: 20-30<br>Strong Positive: >30 | Units |

**Interpretation:**

**Interpretation**:
Gliadin (deamidated,DGP) is a fraction of gluten, which is a protein component found in wheatmeal and other cereals
In gluten sensitive enteropathy/celiac disease, cereal ingestion brings about intestinal malabsoption and diarrhoea
High anti gliadin IgA and/or IgG levels are therefore used for screening or monitoring patients with Celiac disease
**Limitations**:
High anti- gliadin titres may be found in other gastrointestinal diseases such as Crohn`s disease, ulcerative colitis and esophagitis. Low levels of anti- gliadin antibodies have been found in several cases of celiac disease due to a selective IgA deficiency Values should be interpreted in conjunction with associated tests viz. tissue trans glutaminase and endomysial antibody

| | | | |
|---|---|---|---|
| **Anti Gliadin IgA Antibodies** *(Serum)* | | | |
| Anti Gliadin IgA Antibodies<br>*Enzyme Immunoassay* | 4.20 | Negative: < 20 Weak Positive: 20-30 Strong Positive: >30 | Units |

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|---|---|---|---|
| **Anti Human Tissue Transglutaminase (TTG) Antibody (IgA)** *(Serum)* | | | |
| Anti Human Tissue Transglutaminase (tTG) Antibody (IgA)<br>*ELISA* | 3.10 | Negative: <4.0<br>Weak Positive : 4 -10<br>Positive: >10 | U/mL |

**Interpretation:**

This test is used for the determination of IgA autoantibodies to human tissue transglutaminase for the differential diagnosis of Celiac disease/Gluten sensitive enteropathy (GSE). Celiac disease is characterized by small intestinal damages with flat mucosa leading to malabsorption with depletion of key nutrients. Tissue transglutaminase is one of the main endomysial



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| **Celiac Disease Screening Profile** | | | |

autoantigens that can be easily detected for the diagnosis of Celiac disease. Other recommended tests are Endomysial, Gliadin & Reticulin antibodies along with small intestinal biopsy. Negative serology does not exclude a diagnosis of GSE. False positive results are seen in Type 1 Diabetes, Chronic Liver Disease, Heart Failure and Psoriatic or Rheumatoid Arthritis. False negative results may be seen in children below 2 years & patients with IgA deficiency. There is high prevalence of IgA deficiency in Celiac disease thus simultaneous screening for IgA level has been recommended.

**Anti Human Tissue Transglutaminase Antibody (IgG)** *(Serum)*

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|---|---|---|---|
| Anti Human Tissue Transglutaminase Antibody (IgG)<br>*ELISA* | 5.30 | Negative: <6.0<br>Weak Positive : 6 -9<br>Positive: >9 | U/mL |

**Interpretation:**

Detection of tTG IgG antibodies, in conjunction with tTG IgA antibodies helps in the diagnosis of certain Gluten sensitive enteropathies such as Celiac disease & Dermatitis herpetiformis. It is not uncommon for Celiac patients to be IgA deficient. This IgA deficiency is probably the single largest contributor to a false negative serological result for tTG IgA in biopsy confirmed celiac patients. Test sensitivity increases from 91.5% for tTG IgA antibody alone to 98.5% when both IgA and IgG results are considered.
A negative result indicates no h-tTG IgG antibody or low levels below cut-off of the assay.

Dr. G. Amitha
MBBS, MD (MICROBIOLOGY)
Consultant Microbiologist

Disclaimer:
1. All results released pertain to the specimen as received by the lab for testing and under the assumption that the patient indicated or identified on the bill/test requisition form is the owner of the specimen.
2. Clinical details and consent forms, especially in Genetic testing, histopathology, as well as wherever applicable, are mandatory to be accompanied with the test requisition form. The non-availability of such information may lead to delay in reporting as well as misinterpretation of test results. The lab will not be responsible for any such delays or misinterpretations thereof.
3. Test results are dependent on the quality of the sample received by the lab. In case the samples are preprocessed elsewhere (e.g., paraffin blocks), results may be compromised.
4. Tests are performed as per the schedule given in the test listing and in any unforeseen circumstances, report delivery may be affected.
5. Test results may show inter-laboratory as well as intra-laboratory variations as per the acceptable norms.



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**Celiac Disease Screening Profile**

6. Genetic reports as well as reports of other tests should be correlated with clinical details and other available test reports by a qualified medical practitioner. Genetic counselling is advised in genetic test reports by a qualified genetic counsellor, medical practitioner or both.
7. Samples will be discarded post processing after a specified period as per the laboratory's retention policy. Kindly get in touch with the lab for more information.
8. If accidental damage, loss, or destruction of the specimen is not attributable to any direct or negligent act or omission on the part of Ampath Labs or its employees, Ampath shall in no event be liable. Ampath lab's liability for a lack of services, or other mistakes and omissions, shall be restricted to the amount of the patient's payment for the pertinent laboratory services.



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