Pathkind Labs

Client

Gurugram

Pathkind Diagnostics Pvt. Ltd.

Plot No. 55-56, Udhyog Vihar Ph-IV, Gurugram - 122015

Processed By

Pathkind Diagnostics Pvt. Ltd.

Plot No. 55-56, Udhyog Vihar Ph-IV, Gurugram - 122015

Name	: **Mr. SE103**	Billing Date	:	07/07/2023	12:33:24
Age	: 22 Yrs	Sample Collected on	:	10/07/2023	10:01:31
Sex	: Male	Sample Received on	:	10/07/2023	11:02:13
P. ID No.	: P1000100013003	Report Released on	:	19/07/2023	16:18:05
Accession No	: **10002305059**	Barcode No.	:	10002305059-01	
Referring Doctor	: Self				
Referred By	:	Ref no.	:		

Report Status - Final

Test Name	Result	Biological Ref. Interval	Unit
		SEROLOGY	
# Epstein Barr Virus (EBV) Viral Capsid Ag IgM Antibodies (VCA) *Sample: Serum* *Method: ELISA*	0.02	Negative: < 8 Equivocal: 8 - 12 Positive: > 12	U/mL

Epstein Barr Virus (EBV) Viral Capsid Ag

Interpretation

EBV (VCA) IGM, SERUM-Epstein Barr Virus (EBV), classified as human herpes virus type 4, is ubiquitous virus. EBV infection is common, worldwide in distribution and largely subclinical in early childhood. Acute infection in adults results in Infectious Mononucleosis .It has also been aetiologically implicated in Burkitt""s lymphoma, Nasopharyngeal carcinoma and lymphoproliferative disorders. Less certain is the aetiologic role of EBV in Rheumatoid arthritis, Hodgkin""s disease and its role as a cofactor in AIDS. It is possible that latent and infectious forms of EBV can coexist throughout life in an individual. Test

Significance: EBV-specific antibody testing is useful in patients with suspected acute EBV infection who lack heterophile antibodies and those with atypical infection. Titres of IgM and IgG antibodies to the viral capsid antigen (VCA) are elevated in the serum of more than 90% of patients at the onset of disease.

IgM antibodies to VCA is useful for diagnosis of acute infectious mononucleosis because it is present at elevated titres only during the first two months of the disease. In contrast, IgG antibody to VCA is often used to assess exposure to EBV in the past because it persists for life. IgM VCA antibodies are not demonstrable in the general populations, and thus their presence is virtually diagnostic of acute EBV infection.Antibodies to Early Antigens (EA) are detectable 3 to 4 weeks after the onset of symptoms in patients with Infectious mononucleosis and usually persist for 3 to 6 months. Antibodies to Epstein Barr virus nuclear antigen (EBV-NA) are detectable relatively late (3 to 6 weeks after onset of symptoms) and persist for the lifetime of the patient. The appearance of EBV-NA in a patient with previous VCA-positive and EBV-NA negative is strong evidence of recent EBV infection. The EBV-EA and EBV-NA are also elevated in nasopharyngeal carcinoma, Burkitt""s lymphoma and chronic active EBV infection.

Limitations: Serum specimens drawn early during acute phase of infection may be negative for IgM or IgG class of antibodies.Equivocal results should be followed up with testing of a new serum specimen within 10 to 14 days.Past overt and subclinical infections greatly contribute to high sero-prevalence of various community-related infectious diseases in the general Indian population. Hence, all results must be interpreted in the context of the total clinical history and supplementary findings of other investigative procedures.

** End of Report**

Saloni Garg

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MD

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