Letters to the Editor

for enzyme histochemistry is easily adapted to immunohistochemistry. With TNBT a distinct black precipitate was obtained, whereas NBT did not result in an acceptable product. TNBT staining was somewhat less distinct than azo dye coupling reactions.

With both newly introduced methods plasma cells and extravasal deposited immunoglobulins were easily demonstrated in human synovial tissue. When the sensitivity of the standard methods for alkaline phosphatase were compared with either the new azo coupling method with varainime blue salt or the McGadye technique, no differences in the sensitivity could be seen (Table). But the four methods demonstrating alkaline phosphatase labelled antibodies were less sensitive than the PAP technique in identifying endogenous IgG within conventionally processed tissue sections of human synovium.

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False positive results with a tube pregnancy test

We have recently compared a slide pregnancy test (Roche Diagnostika) with the Pregnosticon tube pregnancy test (Organon Teknika). Both tests were performed as described in the manufacturer’s instructions except that initial screening with the tube method was at one in three for specimens from hospital patients (to detect 3000 IU/l of human chorionic gonadotrophin) and one in five for specimens from other sources (to detect 5000 IU/l of human chorionic gonadotrophin).

Altogether 232 urine samples were tested; the two tests agreed in all but 13 instances (5.6%). Three specimens were slide positive but tube negative. This could be explained by the greater sensitivity of the slide test compared with the tube test at the dilutions being used. Indeed, in one case, for which a subsequent specimen was received, positive results were obtained by both tests. Two specimens were negative by the slide test and equivocal by the tube test. This was not considered significant because in practice repeat specimens would have been requested in cases where the tube test alone was used.

A more important observation was that eight specimens were negative by the slide test but positive by the tube test. On repeat testing later the same day or after storage overnight at 4°C, all became negative by both tests. The explanation for these initial false positive results by the tube test is unclear. Vibration is known to affect the tube test in this way, causing the edge of the red blood cell mat to roll down the tube. But this was well known to our staff, who took great care to avoid such vibration. Another explanation could be that compounds were present in the urine which inhibited haemagglutination and which rapidly became inactive. We were concerned about these false positive results, which were detected only because the slide test was being performed in parallel. Laboratories relying solely on the tube test should be aware of the problem and be not reporting false positive results.

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Book reviews


There is an increasing use of quantitative methods in histopathology. They are most easily applied in the tightly controlled experimental situation but perusal of any journal with a component of clinical pathology shows that there are also many uses in this field either diagnostic, or simply trying to analyse the tissue processes.

Drs Baak and Oort have been prominent in the field during the past decade and have produced a short monograph which is an excellent introduction to the subject and covers both older grid-type techniques as well as developments based on computer assisted microscopy. The reference lists to work already accomplished are most valuable.

Most people who buy this book will have at least an incipient interest in the subject but it is well worth buying for the departmental library and will stimulate those who hitherto have regarded diagnostic histopathology as necessarily subjective.

G SLAVIN


This is a timely and useful review of the state of the art of selected topics in tumour immunology. It deals with various aspects of host resistance to neoplasms and discusses current thoughts in the ways that such responses could be augmented or modified.

For pathologists, however, the chapter on monoclonal antibodies to human tumours will be of most value. Lloyd has reviewed the wide range of such reagents indicating their specificities and potential utility in the biological and pathological classification of human neoplasms.

Overall, the book is a useful and timely contribution to the literature.

A MUNRO NEVILLE

References
False positive results with a tube pregnancy test.

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J Clin Pathol 1984 37: 1079
doi: 10.1136/jcp.37.9.1079-a

Updated information and services can be found at:
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