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Clinical utility of Interferon-γ compared to ADA in tuberculous pleural effusion

By

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Abstract

Introduction: Tuberculous pleural effusion (TPE) is a common problem for differential diagnosis from malignant effusion (MPE) in epidemic areas of tuberculosis (TB). Prediction based on adenosine deaminase (ADA) is dependent on age as well as the tuberculosis incidence.

Aim of the work: To estimate the value of cutoff point of ADA in MPE and TPE & to evaluate its role in differential diagnosis in Egypt a country with high incidence of TB.

Subjects & methods: The study was conducted in Kaser El-Aini Hospital, Cairo University in the period from April ٢٠١١ to January ٢٠١٢. It was carried on ٣٠ patients. We retrospectively analyzed ٣٠ patients with a definitive diagnosis of TPE (n= ١٩) and MPE (n= ١١). The optimal cutoff value of ADA was determined using the receiver operating characteristic (ROC) curve. There was a statistically significant difference according to the levels of pleural fluid ADA between TPE and MPE groups.

Result: Our results demonstrate that the pleural fluid concentrations of ADA, INF-c in patients with tuberculous pleural effusions are significantly higher than in other effusions. Most importantly, ROC analysis clearly demonstrated ADA to be more sensitive and specific than INF-c for diagnosis of tuberculous pleuritis