Lactoferrin as a Marker of Systemic Inflammatory Response

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ABSTRACT

Materials and methods. 51 patients, who were ill with generalized peritonitis, went through a prospective randomized research. They were randomized on groups depending on the objective score SAPS (1984): 29 survived people (53%) and 22 people with favorable end (47%). Intensive care and surgical tactics standardized patients. Lactoferrin (LF) as modulator of systemic inflammatory response (SIR) was assessed by immunoferment analysis. Statistical processing was done McNemar test. **Results and discussion.** In initial condition dynamics of this laboratory marker defined a group with favorable end as patients with granulocytes activation [1]. On the first 24 hours level of LF was marked twice above values of second group (95% confidence interval (CI) 1670-2024 ng/ml; $p<0.05$). Then content of LF was increased for certain in highest limit of rate (95% CI 1104-1310; $p<0.001$). LF level in group with nonfavourable end was remained in lowered figures. It was differ with such in group of comparison for certain (95% CI 811-921 ng/ml; $p<0.05$). This situation can be explained as repression of nonspecific resistance on repeated effects of endotoxins. Positive connection of LF indices with facts of SIR ($r=0.457$; $p<0.05$) can serve as proof of granulocyte's activation in group with favorable end [2].

1. Bistrian BR. Crit Care Med. 1999; 27(3); 452-453.
2. Nuijens JH, Abbink JJ. Wachtfoggel YT. J Lab Clin Med. 1992; 112(2); 159-168.

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