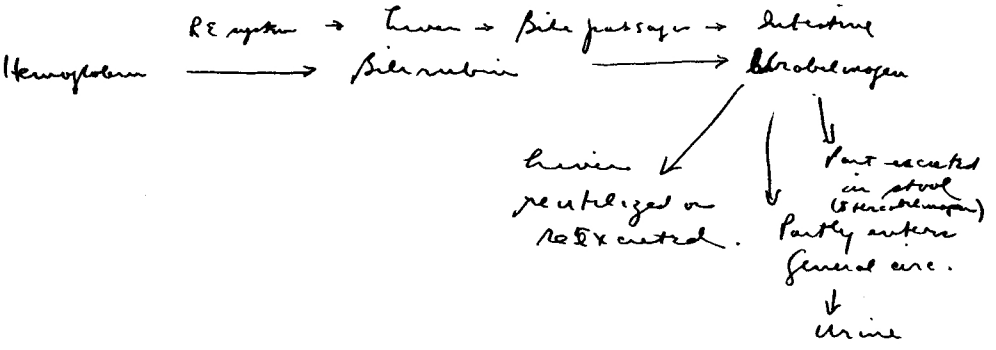
Kaufmann - 6/7/34

Pigments



Urobilinogen = Stercobilinogen (colorless)
↓ oxid ↓ oxid
Urobilin = Stercobilin (brown)
↳ imparts characteristic color to feces

Jaundice - retention of bilirubin in body fluids
measured by direct detn of bilirubin
in bl. stream, or icterus index.
Icterus index = arbitrary, comparison
of pt. plasma of K, Cr, O,
Ict index 1 = 0.1 mg bilirubin/100cc
normal 6-8
Upper limit 10.
van den Bergh is direct detn of bilirubin
difficult to determine in normal plasma.

Carotene + other pigments may throw off the
ict. index.
Poor agreement between van den Bergh
& I.I. with high values.

direct v.d Bergh - bile has passed through hepatocelle
indirect " - " " not " " " " "

Blood examin is best index of jaundice. Urine gives good data.

Index must go to 15 to be recognized clinically.

(1) With primary or hemolytic anaemias: II ↑, urobilinogen in urine & stool ↑. (2) In hypochromic microcytic anaemias: II ↓, urobilinogen ↓.

With biliary obstruction:

(3) complete: bilirubin in Bl ↑, no urobilinogen in urine or stool.

(4) In " : II ↑, urobilinogen in urine & stool ↓.

(5) Incomplete obstruction & liver damage: urobilinogen in urine ↑ in stool ↓, II ↑ due to poor neutral. in liver & a little pigment does leak through from blood but common lab. tests are insufficiently sensitive.

(6) Comp. obstr. & infection in biliary tree. Bilirubin → urobil. can go at infected < & colon bacilli) area. ∴ urobilinogen in urine ↑ (due to bl. absorption), none in stool.

Toxic hepatitis = 4 or 5

Infections " = 6

Ca of common duct, head of pancr = 3

Stones never produce complete obstr.

nor do even the severest liver injuries. There may however be transitory jaundice of complete obstr.

Bilirubin is never reabsorbed from GI as such. Always converted to urobilinogen