

## THROMBIN / ANTITHROMBIN III

These two tests are used to evaluate the intrinsic coagulation system. They can determine heparin effect, warfarin anticoagulant therapy, liver failure, and disseminated intravascular coagulation (DIC).

**■ Thrombin**

This test is used to evaluate the fibrinogen-to-fibrin reaction. It is used to determine severe hypofibrinogenemia, dysfibrinogenemia, and the presence of heparin-like anticoagulants. Thrombin levels are used to confirm and monitor disseminated intravascular coagulation (DIC) and fibrinolysis. This test can also be used to monitor fibrinolytic therapy. The thrombin levels can be used to monitor therapy with heparin.

**■ Antithrombin III**

This test is used to evaluate the hypercoagulable state, fibrinolytic state, and the response to heparin. The hereditary deficiency of antithrombin III (autosomal dominant) is characterized by predisposition to thrombosis. Acquired deficiency is associated with severe cirrhosis, chronic liver failure, DIC, thrombolytic therapy, pulmonary embolism, nephrotic syndrome, or post-surgical state (especially liver transplant or partial hepatectomy). Decreased levels of antithrombin can be attributed to decreased synthesis, increased loss or consumption, or may be induced by drugs. Antithrombin III levels might also be of use in cases of suspected heparin failure, suspected DIC, or personal or familial history of thromboembolic disease. The test is indicated in the latter cases especially prior to heparinization, general or orthopedic surgery, prolonged bed rest, pregnancy, postpartum or postoperative state or oral contraceptive use.

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