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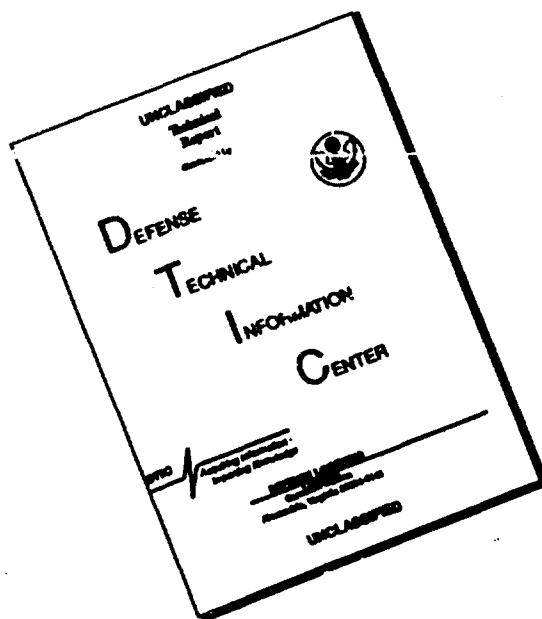
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## BIOLOGICAL AND CLINICAL FOUNDATIONS OF AUTOIMMUNE DISEASES

Riv. Ist. Sieroterap. Ital.  
(Italian Serotherapy Institute Magazine)  
Vol 39, 1964, pp 191-199

### Conclusion

In concluding this brief and necessarily limited review of the methods used in establishing the auto-antibodies and on the criteria which may determine the choice and influence the evaluation, we think we might say that none of the techniques which we have today fully meets all of the requirements which we have here; we therefore think that in each individual case (of course, whenever we find ourselves confronting unknown or not well-known systems) it is always worthwhile to take recourse to a "screening" of several methods.

The "screening," according to our experience, would include the following methods:

precipitation, in a liquid medium; because of the ease of execution and because of the possibility of quantitative dosage, in agar because of the capacity of bringing out, separately, individual antigen antibody systems;

the conditioned agglutinations (and in this field, on the basis of our most recent experiences, the conditioned hemoagglutination are still valuable because of their high sensitivity, especially when we use blood corpuscles previously subjected to formalization);

complement fixation [reaction] and the Steffen test because of the possibility of using these methods also with corpusculated antigens and because of the capacity of bringing out also the antibodies of the incomplete type;

any of the tests of cytolesivity, because of the importance which might be attributed, also in vivo also to the cytolesive property;

immunofluorescence, because of the localizing capacity both of the antigen and the antibody which this technique may offer us;

finally, for delayed reactivity, one of the tests, which is not yet well known and properly standardized but would be capable of demonstrating (in vitro) a sensitization of the lymphocyte cells.