

Antiglobulin tests

SIR, A perfectly good blood transfusion-related paper¹ has been marred by the use of inaccurate terminology; in this instance, the use of the term Coombs' test. Although two papers describing a 'new' test were published in good faith in 1945,^{2,3} it soon came to the attention of one of the authors, Dr Authur Mourant, that the test described was not new. Moreschi, a microbiologist, had described it, at least in principle, in 1908.⁴

Thus, it was recognised at a very early stage after publication that this test should not be called the Coombs' test but rather the antiglobulin test. Indeed, Professor Robin Coombs does not subscribe to the term Coombs' test on two counts. First, he recognises the primacy of Moreschi's work, and second, he believes that Authur Mourant and Robert Race do not receive the recognition they deserve when this term is used.

It has been recognised for a long time, certainly within the world of transfusion science, that indirect antiglobulin test (IAT) and direct antiglobulin test (DAT) are the correct terms, and the use of indirect Coombs' test (ICT) and direct Coombs' test (DCT) should be discouraged.

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References

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- 2 Coombs RRA, Mourant AE, Race RR. Detection of weak and 'incomplete' Rh agglutinins: a new test. *Lancet* 1945; **ii**: 15.
- 3 Coombs RRA, Mourant AE, Race RR. A new test for detection of weak and 'incomplete' Rh agglutinins. *Br J Exp Pathol* 1945; **26**: 255–66.
- 4 Moreschi C. Neue tasachen uber die blutkorperchen-agglutination. *Zentralbl Bakteriol Parasitenkd Infektkr Originale* 1908; **46**: 49–51.

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