

## Causes of Low or High Total Immunoglobulins

## Table 1. Causes of secondary or acquired hypogammaglobulinemia

Conditions that cause an abnormal loss or increased catabolism of immunoglobulins

- Nephrotic syndrome and other severe renal diseases
- Severe burns
- Sepsis
- Protein-losing enteropathy
- Intestinal lymphangiectasia

Conditions & factors affecting immunoglobulin production

- Nutritional due to malnutrition or alcoholism
- Drugs such as phenytoin, cabamazepine, immunosuppresive drugs or chemotherapy agents
- Malignancies, especially hematological malignancies (chronic lympbocytic leukemia, lymphoma, multiple myeloma)
- Rheumatological disease, including rheumatoid arthritis or systemic lupus erythematosus
- Viruses including HIV, Epstein-Barr virus, rubella and cytomegalovirus





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Immunoglobulin Result	Associated Conditions
Polyclonal increase in any or all of the three classes (IgG, IgA and/or IgM)	<ul> <li>Infections, acute and chronic (including HIV, Epstein-Barr virus, cytomegalovirus)</li> <li>Connective tissue diseases (rheumatoid arthritis, systemic lupus erythematosus, scleroderma)</li> <li>Chronic active autoimmune hepatitis (lgG)</li> <li>Primary biliary cirrhosis (lgM)</li> <li>Hematologic disorders</li> <li>Non-hematologic malignancies</li> <li>In cord blood of newborns with intrauterine infection (lgM to offending pathogen)</li> </ul>
Monoclonal increase in one class with or without decrease in other two classes	<ul> <li>Multiple myeloma (lgG, lgA, rarely lgM)</li> <li>Monocloncal gammopathy of uncertain significance</li> <li>Chronic lymphocytic leukemia</li> <li>Non-Hodgkin lymphoma</li> <li>Waldenstrom macroglobulinemia (lgM)</li> <li>Primary systemic amyloidosis</li> <li>Monoclonal cryoglobulinemia</li> </ul>