enzyme	locations	indications	time	con	N.B
enzyme CPK	locations heart and skeletal muscles, less in brain	indications AMI No in increase in heart failure and coronary insufficiency	increase within 3-6 hours returns to normal in 2-4 days	con Normal: 10-50 U/L mostly MM isoenzyme In AMI: 20 times the normal, half MM and half MB. In skeletal muscle diseases: 1-increase in neurogenic muscular dystrophies, 2-highest values are seen in Deuchenne	N.B Has three isoenzymes made of two protomers, M and B MM: skeletal and heart MB: heart BB: Brain
LDH	Heart muscles, RBCs, brain, liver and skeletal muscles	AMI anemias, hepatocellular damage, muscular dystrophies, carcinoma, leukemia and necrosis	rises within 12 to 24 hours normal from 8 - 14 day.	Normal: 55-140 U/L (higher con in children) AMI: 1000 U/L	Has 5 tertameric isoenzymes made of H and M chains Highest con from RBC isoenzyme (H3M1) followed by heart and brain isonzymesh Heart isoenzyme is H4
BNP	Brain but more in heart ventricles	ventricular function congestive heart failure along with ANP			1.17
Troponin I	Heart and skeletal muscles	AMI	Rises within 3- 6 hours Return to normal in 4-7 days		
TnT	Heart and skeletal muscles	AMI	increases within 4-6 hours return to normal in 10- 24 days.		TnT2 is 100% sensitive

Myoglobins		AMI, renal failure and	rises within 1 hour		Lacks specificity
A	ACT-liven	skeletal muscle injury		ACT :- ADAL-	ACT in also COOT
Aminotransferases	AST:liver, cardiac	AMI, and liver	AST in AMI:	AST in AMI:	AST is aka SGOT
	muscle, skeletal	diseases	Rises within 12	>350	
	muscle and others		hours	masiive(fatal)	
			Returns to	>150 high	
	ALT: only liver		normal 3-5	mortality	
			days	<50 low mortality	
			Aminotrans In	In liver diseases:	
			viral hepatitis:		
			Rises faster	aminotransferases	
			than bilirubin	> 1000 U/L in:	
				1-viral hepatitis,	
				(2) ischemic liver	
				injury	
				3-drug induced	
				injury	
				acute hepatic	
				disorder :	
				ALT is higher	
				than or equal to	
				the AST	
				alcoholic liver	
				disease:	
				AST>ALT	
				AST rarely>300	
				ALT normal	
				alcohol-induced	
				deficiency of	
				Pyridoxal	
				phosphate:	
				low ALT	
				obstructive	
				jaundice:	
				normal con of	
				aminotrans	
ALP	liver, bone,	Physiological:		less than	The level of ALP
	placenta and less	In Over 60 years olds,		threefold	doesn'tt help in
	commonly small	children and		elevation in any	distinguishing extra
	intestine	adolescents.		liver disease	and intrahepatic
		Blood types, O and B			cholestasisp
		Fatty meal and		greater than four	
		pregnancy		times normal in	Has 6 isoenzyemes:

		Pathological: 1-intra and extrahepatic cholestasis 2-Gl disorders 3-Regan isoenzyme carcinoma of lung, liver or gut. Also, in chronic smokers 4-nagao isoenzyme: carcinoma of pleural surfaces and adenocarcinoma of pancreas and bile duct 5-bone isoenzyme: Rickets, osteomalacia, hyperparathyroidism and in Paget's disease. Also in primary and secondary cancer	cholastatic disorders, liver cancer and amyloidosis	Hepatic, placental, intestine, regan (resembles placental ALP) and nagao (a type of regan isoenzyme)m
GGT	biliary ducts of the liver, kidney and pancreas.	infective hepatitis , obstructive jaundice, liver neoplasms, alcohol induced liver disease , and in liver cirrhosis.	Normal: 6-45 U/L in male and 5-30 U/L in female. Increases by some drugs especially alcohol	
5' nucleotidase	in or near the bile canalicular membrane	prostate cancers	Moderately 个 in hepatitis highly elevated in biliary obstruction.	
Acid Phosphatase	semen	bony metastasis of carcinoma prostate,		Used in rape investigations
Aldolase		dermatomyositis, muscular	Normal: 1.5-7 U/L	Highest values in deuchenne

		dystrophies, and deuchenne			
Amylase		Acute pancreatits, perforated peptic ulcer and intestinal obstruction.	Acute pancreatits: peak in 24 hours	Normal: 50- 120 U/L Acute pancreatitis: >1000	
Lipase		Mumps, acute pancreatitis, perforated duodenal and peptic ulcers and intestinal obstruction.	Acute pancreatitis: persists for 7-14 days	Normal: 0.2-1.5 U/L. acute pancreatitis: 2800 U/I	
NSE		small cell lung cancer, neuroblastoma, pheochromocytoma, medullary carcinoma of thyroid			
PSA	semen	Prostate neoplasm		Normal: 1 -5 μg/L Benign tumor: 4- 10 μg/L Cancer: above 10 μg/l	
Cholinesterase	nerve endings and in RBCs.	Decreases in: chronic hepatic dysfunction, pregnancy, organophosphate poisoning.		Normal: 2-12 U/ml	