VALUES FOR THYROID UPTAKE OF I¹³¹ AND PROTEIN-BOUND IODINE IN "NORMAL" INDIVIDUALS FROM BIRTH TO TWENTY YEARS¹

JOHN E. KEARNS, M.D. and HERBERT F. PHILIPSBORN, JR., M.D.

Introduction

IN 1938 Hertz (5), using radioactive iodine, studied thyroid function in rabbits and humans. Since then an abundance of data on this subject have been published. However, there still exists scant data concerning thyroid uptake of I¹³¹ and values for protein-bound iodine among individuals demonstrated to be euthyroid. Some data referable to thyroid function of "normal" persons have been derived through studies concerned with abnormal thyroid function (4). The most systematic study of thyroid function using I¹³¹ in growing individuals was conducted by Oliner (7).

Thyroid uptake studies with I¹³¹ measure the ability of the thyroid gland to gather iodide. Protein-bound iodine expresses a distribution of "hormonal" iodine in the blood. These determinations offer evidence of thyroid function. Data gathered from studies of I¹³¹ and protein-bound iodine permit comparison of thyroid activity among large numbers of

known euthyroid individuals.

MATERIAL AND METHOD

All persons studied were free from organic disease and were "normal." The majority of subjects were well known in a routine pediatric practice. Some of the older individuals were healthy undergraduates at the Evanston Hospital School of Nursing. All of the persons demonstrated skeletal maturation consistent with their chronological age (3). Protein-bound iodine values were determined and unusually high or low values were repeated for verification and checked with butanol extractable iodine studies

(1). Observations of thyroid uptake of I¹³¹ were carried out by using 25 microcuries of radioactive material in children up to the age of 6 years and 50 microcuries of radioactive material in older individuals. Gamma studies were made in a routine manner at 24-hour intervals.

DATA

Results of this study are presented in Charts and Graphs (figs. 1-3) with accompanying legends. Values for thyroid uptake of I¹³¹ and protein-bound iodine in euthyroid individuals, from birth to 20 years, are shown in Figure 1C through 2D. Values of protein-bound iodine from 10 pregnant women, beyond the age of 20 years and at term, are available for comparison with the protein-bound iodine values from the cord blood of their infants (fig. 1B). Other data (fig. 1D) show increased values for thyroid uptake of I¹³¹ in the very young infant as opposed to lower values obtained during childhood and adolescence.

Our results are not in agreement with those of others (2, 6) who have reported butanol extractable iodine and the protein-bound iodine of infants' venous blood at birth as similar to that of their mothers at term. Our data demonstrate a distinct rise in the protein-bound iodine level of infants during their first few days of life.

Discussion

The physiological basis for increased thyroid uptake of I¹³¹ and the increased quantities of protein-bound iodine present in the infant soon after birth are as yet unexplained. Profound physiological changes occur when the umbilical cord is severed. The fetus becomes a non-parasitic one. Such a fundamental change requires adjustments by respiratory, cardiovascular, gastrointestinal, musculoskeletal and other systems. The thermoregulatory system, intimately associated

¹From the Departments of Surgery and Pediatrics, Northwestern University Medical School, Chicago, and the Radioisotope Laboratory and Division of Pediatrics, Evanston Hospital. Supported by the Thomas J. Dee Research Fund, Evanston Hospital, Evanston, Illinois. Received for publication, January 17, 1962.

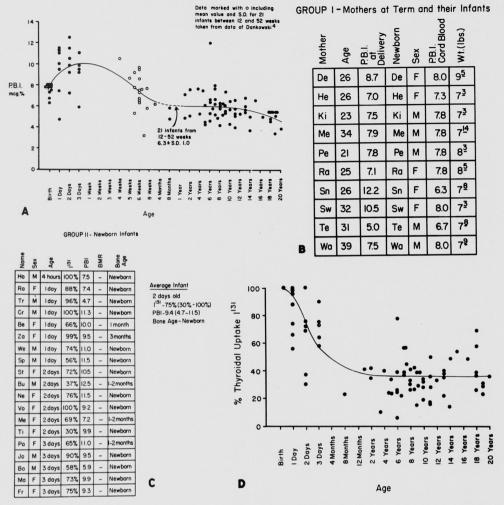


Fig. 1. A, Scatter graph and curve show values of protein-bound iodine in "normal" individuals from birth through 20 years. B, Values for protein-bound iodine from "normal" mothers and infants at time of birth. C, Values of uptake of I¹³¹ and protein-bound iodine from "normal" infants: 4 hours to 3 days old. D, Uptake of I¹³¹ by thyroid gland in "normal" individuals from birth through 20 years.

with thyroid activity, is triggered to new activity as the fetus leaves its controlled intra-uterine existence. We have as yet unpublished evidence that the newborn is relatively deficient in thyroxin-binding protein. By the third day of life, this protein factor is increasing. (This or any one of these factors may be responsible for the increased thyroid activity during the neonatal period.)

Small amounts of maternal thyroxin cross the placental membrane during pregnancy. With the onset of labor, this

extra-fetal supply of thyroxin is abruptly withdrawn. The immediate post-birth condition of the infant should appear to be hypothyroid. Unexplained by such simple placental transfer are the increased values of I¹³¹ and the rise of protein-bound iodine occurring soon after birth.

We have been interested in the histology of the placenta as it is related to transplacental migration of certain blood components. The placental anatomy in lower orders of animals is such that the maternal-fetal circulation appears to be

													GROUP IV - Children 6-9 Years								
	GF	ROUP III	- Chil	dren	8 Mc	nths	- 5 Y	ears													
						~	S						Nome Sex	Age		=	BMR	Ht.(in.)	Wt.(Ibs.)	Bone	
Nome	Sex	Age	<u></u>	PBI	BMR	Ht.(in.)	Wt.(Ibs)	Bone					ž δ Ku F	6	78%	_	<u>-</u>	Ī.	3	6 yrs.	
Ž	ν,	< −		۵	8	Ξ,	>						Ru F	6	26%	\rightarrow	_			5/2-6yrs	Average Child
No	М	8mo.	23%	4.8	-	-	2234	6 mo.			0114		Th F	6	39%	4.6	-	-	-	6 yrs.	7.5 years ¹³ - 34.3% (6%-78%)
Sp	F	1½yrs	41%	4.9	-	-	-	18 mo.	Averdg	e Chile	4		Sa M	6	25%	-	_		53	6 yrs.	PBI - 6.2 (4.2 - 12)
Be	F	1/2	-	7.1	-	_	-	18 mo.	3* yedi				AI M	6 1/2	6%	12.0	-		50	6 yrs.	
Wi	м	2	35%	5.1	-	_	_	-		30%(10% -42%) - 5.9(4.3-7.7)			Sc M	7	57%	5.8	-	-	-	6 /2 yrs.	
Ne	м	2	42%	7.6			_		101-3			•	Ho F	7	-	8.0	-	-	-	7 yrs.	
-	-	_			-	-							Ba F	7	39%	6.2	-	47	42	-	
Wi	F	3/2	10%	7.7	-	-	-	3/2 yrs.					An M	7	37%	5.2	-	-	-	-	
Ti	М	4	40%	5.3	-	-	-	4 yrs.					My F Be M	7	57%	\rightarrow	_	-	43 68 ¼	7 yrs.	
Ba	F	41/2	24%	7.5	-	-	-	41/2 yrs.					Be M	7 /2	45% 26%	5.8	13%			7 /2 yrs. 8 /2-9 yrs.	
Wi	м	5	-	4.5	_	-	_	-					Ne M	8	41%	4.2	-	49	52	7 yrs.	
-	-	-		-	-	-		3½yrs.					AI M	8	30%	6.1	-	52	62	8 yrs.	
Re	М	5	34%	4.3	+8%	-	43¾						Eg M	8	33%	6.3	-	50	73	8 yrs.	
Pa	F	5	23%	6.1	120%	46	40	5-5/2yrs.	A				We M	81/2	42%	6.3	-	-	70	8/zyrs.	
													Ko F	81/2	26%	5.2	-	50/2	- 07	8 yrs.	
													Ru F	9	39%	6.1	-	-	-	7 1/2 yrs.	
													Te M	9	15%	5.4	-	-	69	9 yrs.	
													St M	9	29%	7.4	\rightarrow	57	98	9 yrs.	В
	De M 9 29% [r4 - 51 50]																				
	GROUP V - Children 10 - 14 Years GROUP VI - Adolescents 15 - 20 Years																				
•			_	(in)	2												-	0			
Ng mg	Sex	Age Is	PBI	Ē	Wt(lbs	Bone				Name	Sex	Age	=	PBI	BMR	Ht.(in.)	1	WI.(IDS.)	Bone	,	
Ph	м	10 34%	++	59/2	82	10yrs		Average Chi					Ē	_	_	_	_	_	_	_	
AI	-	10 28%	+	-	73	10yrs	4	11.7 years	<u></u>	Vo	М	15	54%	6.6	-	65	184	4	15 y	rs.	Average Adolescent
Fr	-	10 19%		% 54 % 53½	79	-	+	1 ¹³¹ - 30.8% PBI - 5.4(3.7		Qu	F	16/2	49%	5.0	-20%	6234	130	01/2	15 y	rs.	
Bo	\rightarrow	11 36%	+	59/2	106	l lyrs.	+	BMR - (-11%-		SI	F	18	26%	4.6	-	62½	12	1	-		18+ years 1131 - 41% (23% -69%)
AI	-	11 16%	-	% 58¼	77%	Hyrs.	+			Ch	F	18	37%	5.5	-	-	-		You	ng It	PBI -5.0 (3.4-6.6)
Sm	м	11 50%	5.3 -7	% 58/2	91/2	Hyrs.	7			Br	F	18	39%	5.5	-	-	-		You	ng	
Sc	м	11 17%	5.8 05	% 53¾	60	9½y	rs.			EI	F	18	58%	5.5	-	-	-		You	ng	
Lo	-	11 28%	4.0 +29	+	-	-				-	+	_		-	-	-	-	-	You	19	
-	-	12 33%	5.3 -	-	-	-	-			Ni	F	18	69%	4.8	_	-	-		Adu	lf .	
Ca	_	13 35%	6.0 -	+	-	13 yrs.	-			Fe	F	19	29%	5.1	-18%	67	130	0	Your	_	
\rightarrow	-	13 22%	5.7 + 49	60½ 60	108	13 yrs	-			Ri	F	19	23%	5.5	- 9%	64¾	139	9/2	You	ng It	
\rightarrow	-	13 40%	_	6 67%	135	13 yrs	-			Vo	F	19	31%	3.4	-	-	-		You	ng It	
\rightarrow	-	14 14%	-	6 71%	134	14 yrs	-			Co	F	19	-	5.5	- 8%	-	1-		You	ng It	
Hu	F	14 49%	5.0 -11%	_	112/2	-	1	C		Di	F	20	36%	3.9	- 6%	68	12	614	You		D
				40.00						01	1'	20	30%	10.5	0/8	100	1		Adu		

Fig. 2. A, Values for uptake of I³¹ and protein-bound iodine in "normal" children: age 8 months through 5 years. B, Values for uptake of I³¹ and protein-bound iodine in "normal" children: age 6 through 9 years. C, Values for uptake of I¹³¹ and protein-bound iodine in "normal" children: age 10 through 14 years. D, Values for I¹³¹ and protein-bound iodine in "normal" adolescents: age 15 through 20 years.

considerably less intimate than that of primates. We feel that when maternalfetal circulation becomes less intimate, differences in values between proteinbound iodine levels of mothers and their offspring should be observed. Values of protein-bound iodine among cows and calves were determined in an attempt to evaluate the transfer of thyroxin across the placental barrier. Values for proteinbound iodine from 6 registered Holstein calves between 2 days and 4 months of age have been compared with those of 6 pregnant, non-lactating, registered Holstein cows between 2 and 7 years of age (fig. 3).

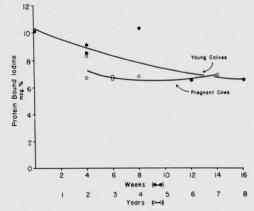


Fig. 3. Values for protein-bound iodine in registered Holstein pregnant cows and calves.

SUMMARY

- 1. Charts and graphs indicate values of thyroid uptake of I131 and values for protein-bound iodine. Serums were from 90 euthyroid individuals between birth and 20 years of age. In addition, protein-bound iodine values of 10 pregnant women at term, and beyond the age of 20 years, are available for comparison with their infants.
- 2. Increased thyroid activity in the neonatal period is described.
- 3. Graphs and charts demonstrate "normal values" of protein-bound iodine and thyroid uptake of I¹³¹ from birth to 20 years.
- 4. Physiological implications of increased thyroid activity soon after birth are discussed.
- 5. The role of placental histology in the transmigration of blood substances is discussed.

REFERENCES

1. Bioscience Laboratories, Los Angeles, Cali-

2. Dankowski, T. S., Johnson, S. Y., Price, W. C., McKelvy, M., Stevenson, S. S. and McCluskey, E. R.: Protein-bound Iodine in Infants from Birth to One Year of Age, Pediatrics, 7:240-243, 1951.

3. Greulech, W. W. and Pyle, S. I.: Radiographic Atlas of Skeletal Development of Hand and

Wrist, Stanford University Press, 1959.

4. Hamilton, J. G., Soley, M. H., Reilly, W. A. and Eichorn, K. B.: Radioactive Iodine Studies in Childhood Hypothyroidism, Am.

J. Dis. Child., 66:495, 1943.
5. Hertz, S., Roberts, A. and Evans, R. B.:

Radioactive Iodine as an Indicator in the Study of Thyroid Physiology, Proc. Soc. Exper. Biol. & Med., 38:510, 1938.

6. Mann, E. B., Pickering, D. E., Walker, J. and Cooke, R. E.: Butanol Extractable Iodine in the Serum of Infants, Pediatrics, 9:32-37, 1052. 1952.

 Oliner, L., Kohlenbrener, R. M., Field, T. and Kundstadter, R. H.: Thyroid Function Studies in Children. Normal Values for Thyroidal I¹³¹ Uptake and P.B.I. Levels up to the Age of Eighteen, J. Clin. Endocrinol., 17:61-75, 1957.

