



Community Referrer Requesting of Calprotectin

Because calprotectin is a relatively expensive test (the cost to HBDHB is about \$110 + GST per test), a requirement was instituted that requests be limited to those made by, or advised by, gastroenterologists. With the current understaffing of the HBDHB Gastroenterology Department, that is impractical.

That requirement is therefore suspended, and community requestors can order faecal calprotectin for the following situations:

- To exclude Irritable Bowel Syndrome in patients who have prolonged or repeated episodes of diarrhoea. A single negative test is a good negative predictor of IBD in a symptomatic patient. A test above the reference range is not diagnostic of IBD, but may indicate a role for further testing. Advice from specialist services should be sought in this scenario.
- In patients who have an established diagnosis of IBD, for monitoring disease activity and predicting symptomatic relapse over the subsequent 6 months. Such patients should be under the care of specialist services.

Please supply clinical particulars to indicate the reason for testing – requests without clinical details or that do not meet the above criteria will not be tested.

Please note that:

- Where there is a high likelihood of Inflammatory Bowel Disease (IBD), calprotectin is rarely a useful test. Colonoscopy or cross-sectional small bowel imaging are favoured (accessed via referral to specialist services). The triaging specialist may, on occasion, ask that a calprotectin is sent from primary care.
- It not useful (although it may be abnormally increased) in infectious diarrhoea, coeliac disease, diverticulitis, or GI malignancy.

Dr Ross Boswell Clinical Director HBDHB Laboratory

Dr Melissa Yssel Chemical Pathologist Southern Community Laboratories

21/12/20