

PF-PTD-115

DHEAS

Synonyms

Dehydroepiandrosterone sulphate (DHEAS) (DHAS)

Clinical Indication

DHEAS is useful in the diagnosis of a virilizing adrenal tumour and to monitor recurrence after surgical removal. It is of little value in the investigation of acne, idiopathic hirsutism or infertility.

DHEAS is the first adrenal androgen to show a significant increase at the onset of adrenarche and serum levels give an indication of the stage of development in children and may be useful in the investigation of delayed or precocious adrenarche / puberty.

High levels of DHEAS are often seen in polycystic ovary syndrome.

Part of Profile / See Also

Request Form Combined Pathology manual Blood form or ICE request

Availability / Frequency of

Analysis

Referred test

Analytical method LS-MS/MS

Royal London Hospital, 8285

Clinical Biochemistry, 4th Floor Pathology & Pharmacy Building,

80 Newark Street, Whitechapel, London. E1 2ES

Contact:-

Dr Sarah Pitkin, Principal Clinical Biochemist

sarah.pitkin@nhs.net

Switchboard: 0207 377 7000 Ext: 61038

Turnaround Time

10 days or 48 hours if urgent and agreed by Clinical Scientist

(excluding weekends)

Patient Preparation

None required.

Sample Requirements

Specimen Type

Serum

Volume

Minimum volume 250µL

Container



Gold-top (SST) or plain Red-top

tube ONLY

Green-top (Lithium Heparin) tubes are unsuitable for analysis



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Reference Range & Units

Male

6m - 9 years: < 0.5

10 - 15 years*: 2.3 - 10.0

≥16 years: 2.3 - 10.0

*Adult reference range. Interpret in

line with pubertal status.

Female

6m - 9 years: <0.5

10 - 15 years*: 1.6 - 7.8

≥16 years: 1.6 – 7.8

*Adult reference range. Interpret in

line with pubertal status.

Interferences

Interpretation & Clinical

Decision Value (if applicable)

References

Test code

Lab Handling

DHAS

Aliquot 500ul and store in referrals rack at -20°C. Sent daily by courier to Royal London Hospital (First class post acceptable)

Sample stability:-

5 days at 2-8 °C

2 months at -18 to - 26°C

