

Caeruloplasmin

Synonyms	
Clinical Indication	Low caeruloplasmin is found in approximately 85 to 90% of patients with Wilson disease. Copper accumulation produces clinical features (hepatic disease, neurological signs, Kayser-Fleischer rings) usually in late childhood / early adulthood. Decreased levels also found in severe liver disease, malnutrition, malabsorption and nephrotic syndrome.
	Investigation of suspected Wilson's or Menkes' disease or if specifically requested by a Consultant. Investigation will normally only be undertaken if patient less than 40 years of age.
	Caeruloplasmin has a low positive predictive value in patients undergoing evaluation for liver disease.
Part of Profile / See Also	
Request Form	Combined Pathology manual Blood form or ICE request
Availability / Frequency of	Referred test: Analysed at King's College Hospital, (Synnovis 9067) if specific
Analysis	criteria met.
Turnaround Time	2 weeks
Patient Preparation	None required
Sample Requirements	
Specimen Type	Serum
Specifien Type	Schum
Volume	2 ml
Volume	2 ml
Volume	2 ml Yellow top (SST) tube Or Paediatric lithium heparin (Orange top – Sarstedt
Volume	2 ml The second
Volume Container	2 ml Final Structure Stru
Volume Container Reference Range & Units	2 ml
Volume Container Reference Range & Units Interferences	2 ml The second secon



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	While a diagnosis of Wilson disease is established in patients with low serum caeruloplasmin, Kayser-Fleischer rings and elevated urinary copper excretion, additional testing is required in patients with indeterminate results. Typically, this involves a liver biopsy to determine the hepatic copper concentration and to look for histologic changes suggestive of Wilson disease.
References	Up to Date – Wilson disease: Diagnostic tests – searched Sept 2018 https://www.synnovis.co.uk/our-tests/caeruloplasmin
Test code	CAER
Lab Handling	Aliquot 500ul and store in referrals rack at 4C. Sent daily by courier to King's College, London.



Accredited to ISO 15189:2012