

Labs for people with adipose tissue (fat) disorders

Request	Lab name	Lab and ID	CPT	Reason to order
	Erythrocyte sedimentation rate (ESR)			Marker of inflammatory mediators in the blood (especially antibodies and acute phase reactants) causing blood cells to precipitate quicker – the faster they fall, the higher the ESR, the more the inflammation
	C-reactive protein (CRP)			Stable marker of inflammatory repair
	Lipid panel			Normalize if elevated due to increased risk of cardiovascular disease when combined with a fat disorder
	Homocysteine			Normalize if elevated due to increased risk of cardiovascular disease when combined with a fat disorder
	Lp(a)			Normalize if elevated due to increased risk of cardiovascular disease when combined with a fat disorder
	CH50			Checks if your complement (clotting system) is normal or elevated/activated. The complement system is part of the inflammatory cascade and when other markers of inflammation/repair tend to be negative, this one can turn out to be positive and guide us in your treatment.
	Chromogranin A	ARUP 0080469		Do not get this lab if you are on a proton pump inhibitor (omeprazole, Nexium, etc.) which can raise chromogranin A levels (a marker of neuroendocrine tumors). This marker helps us better understand your mast cells that participate in inflammation, edema, flushing and itching.
	Angiotensin converting enzyme (ACE) level			This is a non-specific marker of inflammation and can turn out to be positive when other markers are negative. If it is positive, it does not mean you have sarcoid, a condition in which ACE levels are high - it just means you have inflammation. Your healthcare provider may want a chest X-ray to evaluate for sarcoid if this lab comes back positive.
	Immunoglobulin (Ig) levels: IgE, IgA, IgG			Many people with fat disorders have low IgG levels. If this lab is abnormally low, check a IgG subclass panel to find which IgG is low. You may want to see an Immunologist/Allergist if you have low IgG levels.
	Vitamin D level			Vitamin D helps fight infection, improves bone mineral density and tends to be low in people who have excess fat.
	Nagalase level			If you think you have a lot of <u>inflammation</u> that is hidden (not found on usual labs) a Nagalase level may find the inflammation (see

				here: http://www.hdriusa.com/tests/nagalse/ Your healthcare provider will need to order a kit.
	Serum tryptase	Quest Diagnostics; 34484	83520	If you have a lot of chemical sensitivities, allergies, itching, flushing, edema, or think you might have a mast cell activation disorder.
	Plasma histamine	Quest Diagnostics; 6586X	83088	For a mast cell disorder, check tryptase, histamine, prostaglandin D2, Factor VIII activity
	Prostaglandin D2 (FPGD2) http://www.mayomedicallaboratorie.com/test-catalog/print/90154)	Mayo clinic 90154	84150	And 24 hour urine for N-methylhistamine
	Factor VIII activity	Quest Diagnostics; 8353	85240	 v
	24 hour urine for the histamine metabolite N-methylhistamine Includes creatinine	Quest Diagnostics; 83011	82570 83789	Must be off all H2 antagonist/blockers (ranitidine, cimetidine, famotidine), all antihistamines (benadryl, zyrtec, allegra, claritin, quercetin and others) and off all NSAIDs (ibuprofen, naproxen, ketoprofen and others), and off aspirin (ASA) for 7 days to get the tests for mast cells
	Estrogen panel			If <u>menopausal</u> not on hormone replacement therapy; if estrogen is high, consider lowering it
	Heavy metal screen			Can be a hidden cause of inflammation
	TSH			For evaluation of fatigue
	Circadian cortisol	Labcorp 502124	82533	For fatigue; check the hypothalamic pituitary adrenal axis circadian rhythm and function with four salivary cortisol levels: 8AM, noon, 4PM and before bed
	Hyaluronic acid	Quest diagnostics 19480X		This is a good test to run if you think you have jelly-like fat (geloid fat) as in lipedema, diffuse Dercum's disease and widespread Madelung's disease.