

# Calprotectin

## Background

### ▼ [About calprotectin](#)

#### About calprotectin

Faecal calprotectin:

- is a marker of intestinal mucosal inflammation that is useful in differentiating between irritable bowel syndrome (IBS) and inflammatory bowel disease (IBD) in symptomatic patients aged 50 years or younger with chronic diarrhoea.
- can be used in secondary care to assess disease activity in patients with known IBD.
- concentrations can also be elevated in gastroenteritis or malignancy, and with the use of non-steroidal anti-inflammatory drugs (NSAIDs), including aspirin.
- is a second-line investigation if there is concern about possible IBD, although it may be a first-line investigation if there is a family history.

## Public

1. Check the ▼ [criteria](#).

#### Criteria

Patients aged between 16 and 50 years with:

- chronic diarrhoea (lasting more than 4 weeks).
- bowel symptoms where IBD is suspected.
- family history of IBD.

#### Exclusions

Patients:

- with a positive faecal microbial investigation (molecular enterics) or positive *Clostridium difficile* PCR.
- who do not have typical IBS.
- with known IBD.

- who need a colonoscopy, sigmoidoscopy, or CT imaging based on the [Colorectal Symptom](#) pathway.

2. Prepare the [required information](#).

**Required information**

Request form on GPTR or, if not available, stool sample and completed [referral form](#).

[Standard request information](#)

**Standard request information**

- Confirm patient contact details, including mobile number
- Include medications
- Reason for request
- History and co-morbidities
- Body mass index (BMI)
- Examination findings
- Investigations carried out, and results
- Options already pursued
- If an interpreter is required – specify what language, including British sign language (BSL)
- Other important information, e.g. social factors, or other services involved

3. [Contact the service](#).

**Metabolic Laboratory**

Cardiff

**REFERRAL OPTIONS**

Phone (029) 218 43560

University Hospital of Wales (UHW)

Heath Park

Cardiff CF14 4XW

[Admin contact info](#)

Phone (029) 2074 7747 (switchboard)

4. Interpret the result:

- The best value of this test is a negative result (less than 50 micrograms/g) which effectively excludes a diagnosis of IBD.
- 50 to 150 micrograms/g indicates that IBD is very unlikely. Consistent with IBS if symptoms are suggestive.

- More than 150 micrograms/g – request [urgent gastroenterology assessment](#) as IBD is likely.

## Information

▼ [For health professionals](#)

### Further information

NICE Guidance:

- [Algorithm for the Use of Faecal Calprotectin in General Practice in Patients Presenting with Lower Gastrointestinal Symptoms](#)
- [Faecal Calprotectin Diagnostic Tests for Inflammatory Diseases of the Bowel](#)

SEND FEEDBACK

### SOURCES

Select Bibliography

- van Rheenen PF, Van de Vijver E, Fidler V. [Faecal calprotectin for screening of patients with suspected inflammatory bowel disease: diagnostic meta-analysis](#). BMJ (Clinical Research Ed.). 2010;341:c3369. [\[Abstract\]](#)
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