

Assay Summary

Lactoferrin, Stool

Clinical Use

- Non-Invasive differentiation of IBS from IBD (Qualitative)
- Assists physicians in monitoring intestinal inflammation in Crohn's Disease and Ulcerative Colitis (Quantitative)

Test Codes

901713: Qualitative
901951: Quantitative

Benefits

- 90% specific for identifying inflammation in patients with active Inflammatory Bowel Disease
- Highly specific in ruling out Irritable Bowel Syndrome
- Reduces the need for invasive procedures
- Higher level of patient acceptance than endoscopy

Analytical Method

- Enzyme Linked Immunosorbent Immunoassay

CPT Code*

- 83630 (Qualitative); 83631 (Quantitative)

Clinical Summary

An estimated 30 million Americans suffer from Irritable Bowel Syndrome (IBS), a disorder characterized by crampy abdominal pain, bloating, constipation, and/or diarrhea. The same clinical picture may be seen in individuals with Ulcerative Colitis (UC) and Crohn's Disease (CD). Collectively known as Inflammatory Bowel Disease (IBD), UC and CD affect more than 1 million Americans. Although individuals with IBS may experience severe discomfort and require symptomatic treatment, patients with IBD may develop rectal bleeding and permanent intestinal damage. Furthermore, patients with IBD frequently require long-term steroid therapy and immunosuppressive agents. Consequently, distinguishing IBS from IBD is critical for patient management.

In patients with active IBD, lactoferrin, a proven marker of inflammation, is released from leukocytes infiltrating the intestinal mucosa. Whereas fecal lactoferrin tends to be elevated in patients with active IBD, lactoferrin is 86% sensitive and 100% specific in distinguishing IBD from IBS, thus making fecal lactoferrin an important diagnostic tool (*Am J Gastroenterol.* 2003;98:1309-1394).

The evaluation of fecal lactoferrin offers a safe, non-invasive, accurate method to quickly differentiate IBD from IBS once infectious causes of intestinal inflammation and colorectal cancer are ruled out. A positive fecal lactoferrin result can be complemented by the Inflammatory Bowel Disease Differentiation Panel (Test Code 701264) to assist in distinguishing UC from CD.

Specimen Requirements

1 gram frozen random stool sample in a plastic screw-cap container (0.3 gram minimum).

A Proven Leader in Digestive Diseases

Sonora Quest Laboratories offers extensive clinical and pathology testing services to assist physicians in the diagnosis and management of a broad spectrum of gastroenterological disorders, including:

- Inflammatory Bowel Disease (IBD)
- Celiac disease and gluten sensitivity
- Colorectal and other gastrointestinal cancers
- Liver disease and hepatitis
- Peptic ulcer disease (*H. pylori*)

*The CPT Codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payor being billed.