

Investigations Laboratory

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A full blood count should be performed as anaemia is common, resulting from iron deficiency owing to blood loss, malabsorption or chronic disease. Vitamin B12 and folate deficiency may occur as a consequence of terminal ileal disease or resection. - - Active inflammatory disease is usually associated with low total serum albumin, magnesium, zinc and selenium. Acute-phase protein measurements (C-reactive protein) and erythrocyte sedimentation rate may correlate with disease activity. An elevated faecal concentration of calprotectin, a protein marker of mucosal inflammation, may support a diagnosis of CD in patients with new onset of persistent gastrointestinal symptoms. It can also be used to monitor disease activity in the long-term management of established CD. -

disease. A: age at diagnosis A1 \leq 16 years old A2 17-40 years old A3

“ 40 years old B (behaviour): B1 Inflammatory progression B2 Stenosing B3 Penetrating p Perianal (can exist with any of the above) L: location L1 Ileal L2 Colonic L3 Ileocolonic L4 Upper digestive tract; can be added to any of the three above After Silverberg MS, Daly MJ, Moskovitz DN et al. Diagnostic mis

• classification reduces the ability to detect linkage in inflammatory bowel disease genetic studies. Gut 2001; 49 : 773-6.

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