

Freiburg Medical Laboratory ME LLC, P.O.Box 3068, Dubai

Tel: 04 396 2227





Androstenedione

General:

Androstenedione belongs (together with DHEA) to the 17-ketosteroids formed at an early stage of the steroid hormone cascade (estrone, estradiol, testosterone and dihydrotestosterone). 60% of Androstenedione are synthesized in the suprarenal cortex out of progesterone; the remaining part originates from the ovary. The daily production of androstenedione is controlled by a feedback mechanism of ACTH as well as LH. A circadiane rythm exists, in early morning the levels are 30% higher than in late afternoon.

The androstenedione level increases considerably in the middle of the cycle. DHEA-S is a weak androgen and is formed mainly in the suprarenal cortex. In contrast to androstenedione, DHEA-S is not subject to any control by ACTH. In synthesis abnormalities of hormones, e.g. enzymatic block in the suprarenal cortex (AGS), the diagnosis can be supported by testing the increased pre-hormone androstenedione.

Androstenedione can be influenced by drugs stimulating the ovarial or adrenal cortex androgen synthesis (e.g. clomifen or metapiron), or suppressing (e.g. glucocorticoids and ovulation inhibitors).

Material: 1 ml serum

TAT: 2-3 days, FML

Method: ECLIA

Units: ng/ml

Ref.- range: Postmenopausal:0.187 -1.07; Polycystic ovarian syndrome:0.645 - 3.47

For complete list of laboratory test offered at Freiburg Medical Laboratory, please visit http://www.fml-dubai.com/parameter-listings/

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