



Glomerular Filtration Rate GFR

General:

Cystatin C is eliminated from the circulation almost exclusively by glomerular filtration and reabsorbed tubularly. The cystatin C concentration in serum depends therefore on the glomerular filtration rate (GFR). Kidney failure leads to an at least 10-fold rise of the cystatin C concentration in serum. Malfunctions of the proximal renal tubuli affect the cystatin absorption of glomerular ultrafiltrates. As cystatin C concentration in serum is not affected by inflammations, malignant processes, muscle mass or gender, it adjusts with increasing age to GFR. Thus cystatin C has the highest diagnostic sensitivity to indicate a reduced GFR also within the creatinine-blind range.

Indication: Control of the renal function (glomerular filtration rate)

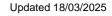
Material: 1 ml serum

Preanalytics: Blood collection in the morning from fasting patient. Blood collection in upright position results in approx. 10% higher values than in lying position.

Stability:	7 days at 2 to 8°C
TAT:	same day, FML
Method:	nephelometric
Units:	mg/l
Ref range:	see report
Calculation GFR:	according to Grubb A et al.:
	GFR = 84.69*(SCYS) -1.68
	Correction for women: *0.948
	Correction for children (<14years): *1.384

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

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