



Test Information

High Sensitivity C-Reactive Protein (hs-CRP)

C-reactive protein (CRP) is a protein produced by the liver that increases in the presence of inflammation in the body and is considered a non-specific “marker” for disease. Inflammatory markers are known as acute phase reactants and may, amongst others, include erythrocyte sedimentation rate (ESR) and ferritin. They can be used to monitor a person’s health and are useful for establishing the effectiveness of recommended protocols. Hs-CRP is a more sensitive test, enabling low grade inflammation to be identified.

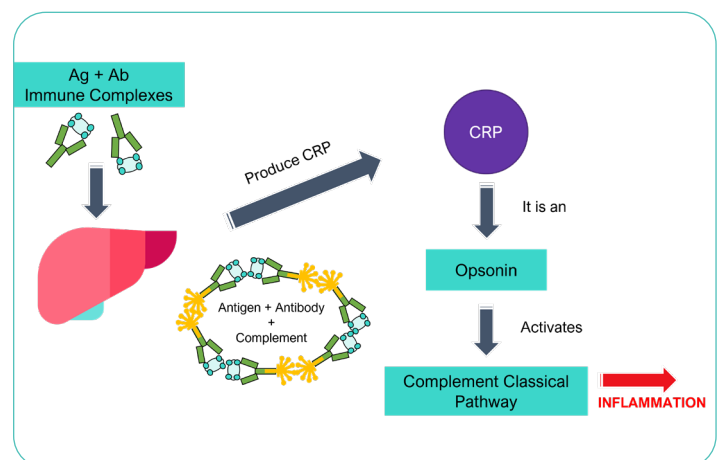
Why test for hs-CRP?

A standard CRP test identifies high grade inflammation which can signal many different conditions, including cancer, cardiovascular disease, infection, and autoimmune conditions, such as rheumatoid arthritis, lupus erythematosus and inflammatory bowel disease. If it remains elevated further investigation is recommended with the support of a general practitioner in order to address underlying causes.

In contrast, low grade inflammation may present with non-specific symptoms, such as pain, fatigue, insomnia, depression, anxiety, digestive problems, weight gain and frequently recurring infections. Research links low grade inflammation to chronic health conditions and measuring hs-CRP level may provide a valuable signal to the early stages of disease, such as type 2 diabetes, obesity or potential future weight gain and cardiovascular disease. The results can then be used as a tool to suggest where preventative strategies could be implemented or to monitor the effectiveness of protocols. Low grade inflammation may also contribute towards neurodegenerative conditions, such as Alzheimer’s and Parkinson’s disease.

Conditions associated with low grade inflammation

- ✓ Allergies and sinusitis
- ✓ Asthma, emphysema and bronchitis
- ✓ Dermatitis, eczema, psoriasis, acne
- ✓ Cardiovascular disease
- ✓ Cancer
- ✓ Attention deficit disorder and autism
- ✓ Chronic fatigue syndrome and fibromyalgia
- ✓ Inflammatory liver disease
- ✓ Irritable bowel syndrome, Inflammatory bowel disease and cystitis
- ✓ Neurogenerative diseases such as MS, Parkinson’s, Alzheimer’s
- ✓ Dementia
- ✓ Diabetes and obesity
- ✓ Osteoarthritis
- ✓ Autoimmune diseases such as lupus, rheumatoid arthritis
- ✓ Sinusitis



Test results

An hs-CRP score will indicate the level of hs-CRP between 0.1-8.0 mg/L of blood with its associated risk level. It cannot explain the cause or location of the inflammation and an elevated result does not necessarily mean a medical condition is present. If, however, it remains elevated a health care provider may recommend further tests or give a referral to a general practitioner.

**LABORATORY REPORT**

PATIENT DETAILS		CLINIC DETAILS	
PATIENT NAME:	Sample Report	Sample Report	
PATIENT ID:	123456	SAMPLE DATE:	09/09/2021
PATIENT DOB:	02/08/1967	SAMPLE TIME:	Practitioner One
ORDER ID:	1254	RECEIVED DATE:	Eden Research Park
TEST ID:	134259	REPORT DATE:	10/09/2021
			Henry Crabb Road
			Littleport CB6 1SE
			United Kingdom

LOW GRADE INFLAMMATION SCREEN

hs-CRP Level

3.4

mg/L

Grade 4

HIGH RISK

This means that you are considered at high risk for the development of low grade inflammatory mediated conditions such as obesity, insulin resistance, diabetes mellitus and coronary heart disease.

There is a clear link between elevated levels of food specific IgG antibodies and this type of inflammation.

Evidence has shown that a diet based on the elimination of foods showing the highest levels of IgG antibodies will significantly reduce inflammation in the vast majority of patients.

SYSTEMIC LOW GRADE INFLAMMATION may contribute to the development of obesity, insulin resistance, diabetes mellitus and atherosclerotic vascular disease.

RESULT	Range	INTERPRETATION
 Grade 1	< 0.5 mg/L	Optimal Level
 Grade 2	0.5 - 1.0 mg/L	Low Risk
 Grade 3	1.1 - 3.0 mg/L	Moderate Risk
 Grade 4	3.1 - 8.0 mg/L	High Risk

How often should I take the test?

We recommend taking a baseline test at the start of a dietary elimination programme and a second test approximately 3 months after changes have been implemented. A reduced second test score may help to indicate the success of the recommended treatment protocol. If the score remains high, or increases, a general practitioner referral may be suggested to establish the cause.

Recommendations for addressing inflammation

- A 'Mediterranean' diet high in wholegrains, fish, essential oils, colourful fruits and vegetables and low in dairy, red meat, processed food, sugars and saturated fats
- The use of anti-inflammatory functional herbs including ginger and turmeric
- Addressing lifestyle factors such as smoking, sleep patterns and avoiding negative stressors
- Regular, appropriate exercise, as research indicates that as fitness levels decline C-reactive protein levels go up.

Sample requirements and test turnaround

- Finger prick blood sample
- Results are available within 5 working days on receipt of sample
- If possible please post on the day of sample collection
- Take sample first thing in the morning before food or drink

Important notice before taking the test

Please note that some medications may interfere with the test results, notably statins, glucocorticoids (steroids), high dosages of aspirin and some NSAIDs.

We suggest an initial baseline test and a second test 3 months after dietary intervention strategies have been implemented. Where possible it is advisable that medical and supplement regimes remain consistent between tests so that only lifestyle, non-medical variables are being measured and compared.

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