

Lab Report

Dr. Hugh Wegwerth

Comp. Metabolic Panel (14)

	Test	Current Result and Flag		Previous Result and Date	Units	Reference Interval
	Glucose 01	90			mg/dL	70-99
	BUN 01	19			mg/dL	6-24
	Creatinine 01	1.43	High		mg/dL	0.76-1.27
V	eGFR	59	Low		mL/min/1.73	>59
	BUN/Creatinine Ratio	13				9-20
	Sodium 01	142			mmol/L	134-144
	Potassium 01	4.7			mmol/L	3.5-5.2
	Chloride 01	107	High		mmol/L	96-106
V	Carbon Dioxide, Total 01	18	Low		mmol/L	20-29
	Calcium 01	9.7			mg/dL	8.7-10.2

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Date Created and Stored 12/13/24 1509 FT Final Report Page 1 of 7

December 12th 2024

Comp. Metabolic Panel (14)

	Test	Current Resu	lt and Flag	Previous Result and Date		Units	Reference Interval
	Glucose 01	102	High	90	12/05/2024	mg/dL	70-99
	BUN 01	25	High	19	12/05/2024	mg/dL	6-24
	Creatinine 01	1.53	High	1.43	12/05/2024	mg/dL	0.76-1.27
V	eGFR	55	Low	59	12/05/2024	mL/min/1.73	>59
	BUN/Creatinine Ratio	16		13	12/05/2024		9-20
	Sodium 01	139		142	12/05/2024	mmol/L	134-144
	Potassium ⁰¹	5.3	High	4.7	12/05/2024	mmol/L	3.5-5.2
	Chloride 01	104		107	12/05/2024	mmol/L	96-106
	Carbon Dioxide, Total 01	20		18	12/05/2024	mmol/L	20-29

THIS IS NOT LAB ERROR

Stage of CKD	eGFR result	What it means		
Stage 1	90 or higher	- Mild kidney damage - Kidneys work as well as normal		
Stage 2	60-89	- Mild kidney damage - Kidneys still work well		
Stage 3a	45-59	Mild to moderate kidney damage Kidneys don't work as well as they show		
Stage 3b	30-44	Moderate to severe damage Kidneys don't work as well as they should		
Stage 4 15-29		- Severe kidney damage - Kidneys are close to not working at all		
Stage 5 less than 15		Most severe kidney damage Kidneys are very close to not working or have stopped working (failed)		

eGFR levels and stages of chronic kidney disease Stage 1 90 ml/min eGFR remains within a normal range, or more but other test results suggest signs of kidney damage 60 to 89 ml/min Stage 2 Slightly reduced kidney function with other tests suggesting kidney damage 30 to 59 ml/min Stage 3 Moderately reduced kidney function Stage 4 15 to 29 ml/min Severely reduced kidney function Stage 5 Less than 15 Very severe or end-stage kidney failure ml/min

Homocyst(e)ine

Test Current Result and Flag		Previous Result and Date	Units	Reference Interval
Homocyst(e)ine 01	12.1		umol/L	0.0-14.5

Uric Acid

Ferritin

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Ferritin 01	235		ng/mL	30-400



High ferritin levels are commonly found in patients with chronic kidney disease (CKD) and can be a risk factor for poor outcomes:

Ferritin as a marker of inflammation

Ferritin is an acute-phase reactant that increases in response to inflammation, which is common in CKD. High ferritin levels can be a sign of inflammation rather than iron overload.

Ferritin and risk of CKD

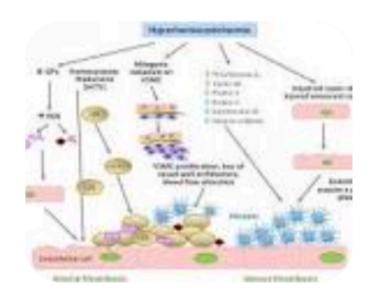
High ferritin levels are associated with an increased risk of CKD in men, but not in women.

Ferritin and renal progression

Ferritin levels are a significant risk factor for rapid renal progression in CKD and hemodialysis patients.



High levels of homocysteine are associated with chronic kidney disease (CKD) and can indicate a decline in renal function. Homocysteine is an amino acid that contains sulfur.



Explanation

Homocysteine levels and kidney function

Homocysteine levels increase as kidney function declines. This is true even for people with normal or high glomerular filtration rates.

Homocysteine and CKD

People with high homocysteine levels are more likely to develop CKD.

Homocysteine and cardiovascular disease

Hemoglobin A1c

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval			
Hemoglobin A1c 01	5.6		%	4.8-5.6			
Please Note: 01							
	Prediabetes: 5.7 - 6.4						
	Diabetes: >6.4						
	Glycemic control for adults with diabetes: <7.0						

DHEA-Sulfate

Test	Current Resul	t and Flag	Previous Result and Date		Units	Reference Interval
▼ DHEA-Sulfate 01	69.6	Low	81.9	12/13/2021	ug/dL	71.6-375.4

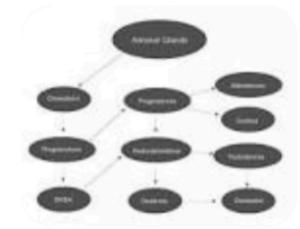
Testosterone

Test	Current Result and Flag		Previous Result and Date		Reference Interval		
Testosterone 01	783	r					
Adult male reference interval is based on a population of healthy nonobese males (BMI <30) between 19 and 39 years old.							

TSH



Low levels of dehydroepiandrosterone (DHEA) and dehydroepiandrosterone sulfate (DHEA-S) are associated with chronic kidney disease (CKD). DHEA is a steroid hormone that helps with endothelial cell function, inflammation, and vascular remodeling.



Explanation

- Low DHEA levels are associated with an increased risk of cardiovascular disease (CVD) and all-cause mortality.
- DHEA levels decrease with age in both men and women.
- Reduced renal function decreases the renal clearance of DHEA-S.
- Low DHEA levels are associated with diabetic kidney disease (DKD) in people with type 2 diabetes.
- Low DHEA levels may also be a sign of Addison disease or hypopituitarism.

Other conditions associated with low DHEA Coronary heart disease, Type 2 diabetes mellitus, and Poor cardiovascular outcomes.

Magnesium, RBC

Test Current Result and Flag		Previous Res	sult and Date	Units	Reference Interval
Magnesium, RBC A, 03	5.2	5.2*	12/13/2021	mg/dL	3.7-7.0

^{*} Previous Reference Interval: (Magnesium, RBC: 4.2-6.8 mg/dL)

Sex Horm Binding Glob. Serum



Low magnesium levels (hypomagnesemia) are closely linked to kidney disease, particularly chronic kidney disease (CKD), as impaired kidney function can lead to difficulty excreting magnesium, resulting in a deficiency that can further worsen kidney damage and contribute to disease progression; research suggests that maintaining adequate magnesium levels may be beneficial for individuals with CKD by mitigating complications like vascular calcification and phosphate toxicity.

Key points about low magnesium and kidney disease:

Mechanism:

The kidneys play a crucial role in regulating magnesium balance, so when kidney function declines, the body can't effectively reabsorb magnesium, leading to low serum levels.

Consequences of low magnesium in CKD:

• **Progression of kidney disease:** Studies show that low magnesium levels are associated with a faster decline in kidney function and increased risk of progressing to end-stage kidney disease.



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•	eGFR	55	Low	59	12/05/2024	mL/min/1.73	>59
	BUN/Creatinine Ratio	16		13	12/05/2024		9-20
	Sodium 01	139		142	12/05/2024	mmol/L	134-144
	Potassium ⁰¹	5.3	High	4.7	12/05/2024	mmol/L	3.5-5.2
	Chloride 01	104		107	12/05/2024	mmol/L	96-106
	Carbon Dioxide, Total 01	20		18	12/05/2024	mmol/L	20-29

December 12th 2024

DHEA-Sulfate

AV

Test	Current Resul	t and Flag	Previous Result and Date		Units	Reference Interval
▲ DHEA-Sulfate 01	475.0	High	69.6	12/05/2024	ug/dL	71.6-375.4

Homocyst(e)ine

Test	Current Result and Flag	Previous Res	sult and Date	Units	Reference Interval
Homocyst(e)ine 01	11.5	12.1	12/05/2024	umol/L	0.0-14.5

Ferritin

Test	Current Result and Flag	Previous Resi	ult and Date	Units	Reference Interval
Ferritin 01	204	235	12/05/2024	ng/mL	30-400

Disclaimer





Cystatin C with eGFR

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Cystatin C 02	1.14		mg/L	0.67-1.14
eGFR	68		mL/min/1.73	>59

DHEA-Sulfate

December 17th 2024

DHEA-Sulfate

Test	Current Result and Flag	Previous Resu	ult and Date	Units	Reference Interval
DHEA-Sulfate 01	164.0	475.0	12/12/2024	ug/dL	71.6-375.4

Testosterone

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Testosterone 01	838	783	12/05/2024	ng/dL	264-916
	Adult male reference interva	l is based on	a population of		
	healthy nonobese males (BMI	<30) between 1	9 and 39 years old		
	Travison, et.al. JCEM 2017,1	02;1161-1173.	PMID: 28324103.		

December 17th 2024

Ferritin					
Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Ferritin 01	180	204	12/12/2024	ng/mL	30-400
Disclaimer		2	35		



Changes I Implemented

- I look my labs seriously
- Gave blood
 - o will give again in 56 days (February)
- Started to weigh myseld weekly
 - o need to loss 30lbs
- Started a specific supplement program
- Being more consistant with my sauna use

















