

CA15.3	
Description	CA 15-3 is a high molecular weight transmembrane glycoprotein, also known as MUC1, that is frequently overexpressed and aberrantly glycosylated in cancer.
Indication	<p>This marker should only be requested in patients with known breast cancer:</p> <ul style="list-style-type: none"> Monitoring treatment in patients with advanced breast cancer; changes in the concentration of CA 15-3 may indicate whether a tumour is responding to treatment. For detecting recurrences in patients with diagnosed breast cancer. The clinical value of this practice is unknown.
Additional Info	Increasing and decreasing values show correlation with disease progression and regression, respectively. In general, higher concentrations of CA 15-3 suggest that the breast cancer is more advanced and that a larger amount of tumour is present. The concentration of CA 15-3 tends to increase as the cancer grows. In metastatic breast cancer, the highest concentrations of CA 15-3 are often seen when the cancer has spread to the bones and/or the liver.
Concurrent Tests	None
Dietary Requirements	None
Interpretation	<p>Reference range: < 30 KU/L</p> <p>Malignancies with elevated levels</p> <ul style="list-style-type: none"> Elevated in 80% of women with advanced metastatic breast cancer. Rarely elevated in patients with local breast cancer. May also be high in other adenocarcinomas, especially with distant metastasis; elevated levels have been reported in malignancies of the lung, liver, pancreas, colon, ovary, cervix and endometrium. <p>Benign diseases with elevated levels</p> <ul style="list-style-type: none"> Benign liver disease (e.g. cirrhosis), hypothyroidism, sarcoidosis, possibly benign breast disease, benign ovarian disease, endometriosis, pelvic inflammatory disease The CA 15-3 elevations seen in these non-cancerous conditions tend to be stable over time. <p>Additional causes of elevated levels</p> <ul style="list-style-type: none"> Pregnancy and lactation <p>A negative CA 15-3 result cannot be used to confirm the absence of cancer in a patient.</p>
Collection Conditions	Usually avoid testing in the first few weeks following commencement of treatment to avoid detecting temporary alterations in CA 15-3 that do not correlate with the response to therapy.
Frequency of testing	Minimum retesting interval for monitoring disease recurrence – 2 months