

# Lipase

<b>Description</b>	Pancreatic enzyme. Hydrolyses triglycerides to produce free fatty acids.
<b>Indication</b>	Diagnosis of acute pancreatitis
<b>Additional Info</b>	<p>Lipase will be raised along with amylase when there is damage to the pancreatic cells or a blockage to the pancreatic duct.</p> <p>Lipase and/or amylase may be used to diagnose acute pancreatitis. However, AMYLASE is the routine test available.</p> <p>Lipase remains elevated for longer than amylase following an acute attack and may therefore be useful in patients presenting later after onset.</p> <p>Lipase is generally considered more specific for pancreatic disease than amylase, as it is not raised in many of the conditions causing a raised salivary amylase or macroamylasaemia. Lipase may therefore be occasionally useful in establishing if a raised amylase is of pancreatic origin.</p>
<b>Concurrent Tests</b>	AMYLASE is the routine test available
<b>Dietary Requirements</b>	None
<b>Interpretation</b>	<p>Lipase levels rise 4–8hrs after an acute pancreatic attack, reach peak levels within 24 hrs and return to normal within 7-14 days. Peak levels are usually &gt;5x the upper limit of normal, however, the level does not correspond to severity.</p> <p>Lipase is raised in any condition that also causes an increase in pancreatic amylase e.g. pancreatitis, pancreatic trauma, pancreatic carcinoma, biliary tract disease, intestinal obstruction, peptic ulcer disease and opiate use (due to contraction of the sphincter of Oddi). Lipase may also be raised in a number of non-pancreatic conditions such as kidney disease (due to a reduced glomerular filtration rate). However the levels are generally lower than in acute pancreatitis and do not display the same sharp rise and fall.</p> <p>Lipase is not affected by ethnicity.</p>
<b>Collection Conditions</b>	None
<b>Frequency of testing</b>	As required