

The Use of Fecal Calprotectin Testing in Paediatric Disorders

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Standards and Guidelines

Paediatrics

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An expert consensus panel of 14 authors developed 28 evidence-based recommendations on the clinical use of fecal calprotectin in pediatric gastrointestinal disorders, identifying inflammatory bowel disease diagnosis and monitoring as its primary utility.

KEY POINTS

- Fecal calprotectin is most useful for diagnosing and monitoring inflammatory bowel disease in children and for differentiating it from functional gastrointestinal disorders
- Limitations include variability in extraction methodology, test kit performance, and the need for local reference ranges due to influences of age, diet, microbiota, and drugs
- Fecal calprotectin elevation may alert to necrotizing enterocolitis risk and help identify gastrointestinal involvement in Henoch-Schönlein purpura
- Fecal calprotectin has little or no value in diagnosing infantile colic, differentiating constipation types, cow's milk protein allergy, coeliac disease, cystic fibrosis, distinguishing bacterial from viral gastroenteritis, *Helicobacter pylori* infection, small intestinal bacterial overgrowth, acute appendicitis, or intestinal polyps
- This consensus statement is intended for pediatric gastroenterologists and clinicians managing gastrointestinal disorders in children

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