

Carbohydrate Antigen 19-9 (CA 19-9) (CA199)

Source:

Cerba Lancet Africa

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TEST OVERVIEW

Test Name	Carbohydrate Antigen 19-9 (CA 19-9)
Test Code	CA199
Short Description	CA 19-9

OVERVIEW

Test Name	Carbohydrate Antigen 19-9 (CA 19-9)
Test Code	CA199
Category	Immunoassay
TAT	Main Lab: 6 Hour(s) Family Site: <8hrs, <6hrs
Specimen(s)	1 x Venous blood - 5 mL Tube - Gold - SST-Serum Separator Tube

SPECIMEN(S)

SST-Serum Separator Tube

Specimen Type	SST-Serum Separator Tube
Specimen Format	Tube
Specimen Colour	Gold
Specimen Volume	5 mL
Sampling Order	2
Origin	Venous blood
Collection time after baseline	-
Transport Temperature	15-25°C
Accepted Other Specimens	Serum Lithium Heparin Plasma Sodium Heparin Plasma

TAT	Main Lab: 6 Hour(s) Family Site: <8hrs, <6hrs
Test Stability	Room Temp: 24 Hour(s) 2–8°C: 30 Day(s)

CLINICAL INFORMATION

Cancer Antigen 19-9 (CA 19-9)

Methodology	-
Specimen Type	SST-Serum Separator Tube
Delay before pre-treatment	6
Transport Temperature	15-25°C
Transport Stability at room temp	24 Hours
Transport Stability at 2–8°C	30 Day
Haemolysis interference	<input type="button" value="No"/>

Clinical Interest

CA 19-9 is an antigen produced by pancreatic, biliary and gastrointestinal cells. It is most commonly used to monitor response to therapy and disease progression in patients with pancreatic adenocarcinoma. An increase in CA19-9 during treatment may indicate that the cancer is not responding well to therapy, while a decrease may indicate a positive response.

It is also useful for detecting recurrence after surgery or other treatments, such as chemotherapy.

High levels of CA 19-9 at diagnosis are often associated with a poor prognosis and advanced disease.

CA 19-9 is also used in the diagnosis and monitoring of cholangiocarcinoma. CA 19-9 levels can be elevated in other malignancies, including colorectal cancer, gastric cancer, hepatocellular carcinoma (liver cancer) and gallbladder cancer.

Elevated CA 19-9 levels can also be observed in non-cancerous conditions, particularly those affecting the liver, pancreas or biliary system.

This lack of specificity means that elevated CA 19-9 levels are not always indicative of cancer and should be interpreted with caution, particularly in the context of underlying benign disease.

PATIENT INFORMATION

Clinical Information Required	-
Patient Collection Notes	-

COMMENTS & NOTES

LOINC Code

084-4, 83084-4

Outwork

No