

Phosphorus

Interpretive Summary

Description: Phosphorus is essential for energy production, protein synthesis, and acid/base balance in the body. Phosphorus is also a major component of bone.

Decreased Phosphorus

Common Causes

- Increased urinary excretion
 - Diabetes mellitus with ketoacidosis
 - Diuretics
 - Hyperparathyroidism
 - Hypercalcemia of malignancy
- Translocation from extracellular fluid (ECF) to intracellular fluid (ICF)
 - Bicarbonate administration
 - Insulin therapy
 - Insulinoma
- Defective mobilization from bone
 - Eclampsia (dogs)
- Artifact
 - Icterus may lower measured phosphorus, depending on method used

Uncommon Causes

- Decreased intestinal absorption
 - Diet imbalance
 - Dietary insufficiency
 - Prolonged anorexia
 - Intestinal malabsorption
 - Phosphate binding agents
 - Vitamin D deficiency
- Renal tubular defects
 - Fanconi syndrome (dogs)
 - Other renal tubular defects
- Translocation from extracellular fluid (ECF) to intracellular fluid (ICF)
 - Intravenous glucose administration
 - Metabolic or Respiratory Alkalosis
- Unknown mechanism
 - Renal failure (horses)
 - Halothane anesthesia (horses)

Related Findings

- Diabetes mellitus with ketoacidosis
 - Increased glucose, ALP, ALT, BUN, creatinine, cholesterol, anion gap
 - Decreased TCO₂, sodium, potassium (can also be normal or increased)
 - Increased fructosamine
 - Glucosuria and ketonuria, variable bacteriuria and pyuria
 - Increased Spec fPL® or Spec cPL® (with concurrent pancreatitis)
- Hyperparathyroidism
 - High normal to increased PTH
 - Increased total and ionized calcium
- Hypercalcemia of malignancy

- Increased total and ionized calcium
- Decreased PTH
- Increased PTHrp
- Cytology and/or histopathology consistent with neoplasia
- Eclampsia (dogs)
 - Decreased total and ionized calcium

Increased Phosphorus

Common Causes

- Decreased urinary excretion
 - Decreased glomerular filtration rate (GFR)
 - Renal failure
 - Prerenal azotemia
 - Postrenal azotemia
 - Growing animals (2X increase common)
 - Hypoparathyroidism
- Artifact
 - Caused by hemolysis in vitro

Uncommon Causes

- Increased intestinal absorption
 - Increased intake
 - Phosphate enema
 - Phosphate-containing urinary acidifier ingestion
 - Increased vitamin D or vitamin D analogue
 - Cholecalciferol rodenticide
 - Jessamine/wild jasmine (*Cestrum diurnum*)
 - Dietary excess (low Ca/PO₄ ratio)
 - Intestinal ischemia
- Shift from ICF to ECF
 - Acute tumor lysis syndrome
 - Myopathies
 - Exertional rhabdomyolysis
 - Malignant hyperthermia
 - Endurance rides (horses)
- Other or unknown mechanisms
 - Lactic acidosis
 - Neoplasia with osteolytic bone lesions
 - Hyperthyroidism (cats)
 - Acromegaly

Related Findings

- Renal failure
 - Increased BUN and creatinine
 - Isosthenuria (urine specific gravity 1.008-1.012)
 - Mild to moderate nonregenerative anemia with chronic disease (decreased erythropoietin)
 - Increased parathyroid hormone (PTH) due to renal secondary hyperparathyroidism
 - Positive PCR or serology for leptospirosis, Lyme or other infections
 - Urinary casts, pyuria, hematuria, proteinuria, glucosuria, and bacteria
 - Positive urine culture with pyelonephritis
 - Increased blood pressure
 - Abdominal ultrasound shows abnormal renal size and structure
 - With protein losing nephropathy (PLN) due to glomerulonephritis or amyloidosis
 - Decreased albumin
 - Increased urine protein:creatinine ratio

- Prerenal azotemia (severe)
 - Increased BUN and creatinine
 - Increased urine specific gravity (hypersthenuria; >1.030 dogs, >1.040 cats, >1.025 horses)
 - Increased serum protein and hematocrit
- Postrenal azotemia
 - Increased BUN and creatinine
 - Increased potassium (severe cases)
 - Urine sediment can show crystals, blood, and white blood cells with obstructive disease or just blood with rupture
 - Uroabdomen
 - Abdominal fluid has higher creatinine concentrations than serum
 - Contrast radiographs for urinary tract rupture or obstruction
 - Abdominal ultrasound for masses, stones, other causes of obstruction in the urinary tract
- Growing animals
 - Often also have increased ALP (especially dogs and horses)
- Hypoparathyroidism
 - Decreased total and ionized calcium
 - Decreased PTH

Additional Information

Physiology

- Most phosphorus occurs free; smaller amounts are complexed to nonprotein cations and cationic proteins.
- Inorganic phosphorus is predominantly HPO_4^{2-} at neutral pH of 7.4; chemical forms vary with pH.
- Balance between parathyroid hormone (PTH) and Vitamin D metabolism is critical for phosphorus homeostasis.
- Phosphorus is an important component of adenosine triphosphate (ATP) and depletion may significantly affect brain, RBC, and skeletal muscle cells.

References

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- Willard MD, Tvedten H, eds. *Small Animal Clinical Diagnosis by Laboratory Methods*, 4th ed. St. Louis, MO: Saunders; 2004.

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