

Well Man Check

An essential entry-level male health check which includes tests for liver and kidney function, heart health and diabetes as well as testosterone.

Is it for you?

Do you want a men's health check that covers all the basics? Do you want to be proactive about your health and understand any personal health risks that apply to you? Perhaps you want to monitor your health as you make changes to improve. If you are interested in knowing where you stand on things like cholesterol, diabetes, liver health and testosterone then this comprehensive health check which includes interpretation from a doctor, is right for you.

Blood sample 41 biomarkers included

Qualified nurse attendance to your home to collect sample. Sample should be collected in the morning.

Hormones govern every activity of your body, from growth and metabolism to reproduction and your sleep cycle. Even a small imbalance in your hormone levels can have a significant impact on your health, affecting your mood and energy levels as well as fertility and libido. Hormones are known as chemical messengers which are manufactured in your glands and released into your bloodstream. They instruct your body in everything it does – regulating appetite, growth, mood and reproduction. Generally they keep the body functioning and in balance. Hormone disorders are common and can often be put right through hormone replacement therapy or lifestyle changes. Hormone levels fluctuate throughout the day and also, for women, through the reproductive cycle.

Testosterone is generally known as the male sex hormone, though women have it too. It is required for protein synthesis, red blood cell production and glycogen replenishment. It is important for bone and muscle strength, mood, energy and sexual function. In men it stimulates fat mobilisation, while in women it promotes fat storage. However, women have more oestrogen which deposits fat in the subcutaneous tissue as opposed to the central visceral fat area, which many men are prone to and has been associated with worsening health outcomes. Testosterone is important for optimal training, however if you train too much you can actually reduce your testosterone levels. This is one of the signs of over training. If you train appropriately then testosterone levels tend to increase to healthy levels naturally. Testosterone levels are rarely higher than normal unless you are supplementing or using steroids.

Proteins are vital to the functioning of cells and tissues as well as for building muscle. Proteins in the blood are measured to help diagnose liver or kidney disease as well as other conditions. Proteins also carry other molecules around the blood (e.g. hormones) so are often measured to help calculate how much of a particular hormone is bound to protein or free and therefore available to your cells. Raised proteins are

often caused by dehydration but can also indicate other conditions. Low proteins can indicate severe malnutrition or malabsorption.

Globulin is an umbrella term for a set of different proteins that the immune system and the liver produce. Certain globulins bind with haemoglobin while others transport metals, such as iron, in the blood. Additionally, there is a certain type of globulin known as an immunoglobulin, (another name for an antibody) which helps to fight infection in the body.

Albumin is a protein which is made mainly in the liver. It helps to exert the osmotic pressure which holds water within the blood. It also helps carry nutrients and medications and other substances through the blood and is important for tissue growth and healing. Albumin also carries hormones around the body, therefore measuring the amount of albumin in the blood can help us calculate how much hormone is available to your tissues.

Total Protein represents the sum of the proteins albumin and globulin in your blood. Albumin and globulin have a range of functions including keeping blood within vessels, transporting nutrients and fighting infection. Abnormal levels can indicate malnutrition as well as a liver or kidney disorder.

Liver Health Your liver is one of your body's most important organs and has many functions including breaking down food and converting it to energy, getting rid of waste and toxins and manufacturing and regulating some hormones. Your liver can become inflamed and progressively damaged through excessive food intake, alcohol consumption and viral hepatitis. Your liver has amazing powers of regeneration, but once inflammation has led to scarring (cirrhosis) then liver disease is irreversible. Blood tests measure the level of different enzymes which, if raised, can indicate that your liver is inflamed.

Bilirubin is a product of the breakdown of haemoglobin from red blood cells. It is removed from the body via the liver, stored and concentrated in the gallbladder and secreted into the bowel. It is removed from your body through urine and faeces. Bilirubin causes the yellowish colour you sometimes see in bruises, due to red blood cells breaking down underneath the skin.

Alanine transferase (ALT) is an enzyme which is produced by the liver and can indicate liver damage caused by alcohol, drugs or viruses (hepatitis).

Gamma GT, also known as Gamma Glutamyltransferase, is a liver enzyme which is raised in liver and bile duct diseases. It is used in conjunction with ALP to distinguish between bone or liver disease. Gamma GT is also used to diagnose alcohol abuse as it is raised in 75% of long term drinkers.

Alkaline phosphatase (ALP) is an enzyme found mainly in the liver and bones. Measuring it can indicate whether people have any ongoing liver, gallbladder or bone diseases.

Cholesterol is a fatty substance found in the blood that plays an essential role in how the cells in the body work. However, too much cholesterol in the blood can have a serious effect on your health as it increases your risk of having a heart attack or stroke. There are many factors which raise the risk of cardiovascular disease and we are learning more all the time about the complex biological processes which lead to a heart attack. High levels of cholesterol have long been known to increase your risk but, even then, it is not that simple – there are different types of cholesterol and some are more dangerous than others. Cholesterol is manufactured in the liver and also comes from the food we eat. Diet, family history, obesity and lack of exercise can all adversely impact cholesterol levels.

LDL cholesterol (low density lipoprotein) is a molecule made of lipids and proteins which transports cholesterol, triglycerides and other fats to various tissues throughout the body. Too much LDL cholesterol, commonly called 'bad cholesterol', can cause fatty deposits to accumulate inside artery walls, potentially leading to atherosclerosis and heart disease. You can make dramatic changes to your cholesterol levels through diet and training. And just like with the diabetes checks, if you can improve your levels you can hopefully prevent getting serious, possibly even fatal conditions down the line. You can use HDL and LDL (and non-HDL) results as markers and targets for improvement. Regular exercise will help get the LDL down and the HDL up, in particular cardio and resistance training exercises. A Mediterranean diet which is high in vegetables and oily fish, and low in meat and dairy, will also help to optimise cholesterol levels.

Non-HDL cholesterol includes all the cholesterol molecules which are not HDL (or 'good' cholesterol). It therefore includes all the non-protective and potentially harmful cholesterol in your blood. As such, it is considered to be a better marker for cardiovascular risk than total cholesterol and LDL cholesterol. The recommended level of non-HDL cholesterol is below 4 mmol/L. You can make dramatic changes to your cholesterol levels through diet and training. And just like with the diabetes checks, if you can improve your levels you can hopefully prevent getting serious, possibly even fatal conditions down the line. You can use HDL and LDL (and non-HDL) results as markers and targets for improvement. Regular exercise will help get the LDL down and the HDL up, in particular cardio and resistance training exercises. A Mediterranean diet which is high in vegetables and oily fish, and low in meat and dairy, will also help to optimise cholesterol levels.

HDL cholesterol, or High Density Lipoprotein is a molecule in the body which removes cholesterol from the bloodstream and transports it to the liver where it is broken down and removed from the body in bile. HDL cholesterol is commonly known as 'good cholesterol'. You can make dramatic changes to your cholesterol levels through diet and training. And just like with the diabetes checks, if you can improve your levels you can hopefully prevent getting serious, possibly even fatal conditions down the line. You can use HDL and LDL (and non-HDL) results as markers and targets for improvement. Regular exercise will help get the LDL down

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Cholesterol is an essential fat (lipid) in the body. Although it has a bad reputation it has some important functions, including building cell membranes and producing a number of essential hormones. Cholesterol is manufactured in the liver and also comes from the food we eat. Total cholesterol is a measure of all the cholesterol in your blood, both good (HDL) and bad (LDL, VLDL and non HDL). Fats are the primary energy source for endurance events or when carbohydrate energy sources are low. In particular medium-chain fatty acids are heavily utilised. Cholesterol transports fatty acids around the body and by looking at the levels of the different types of cholesterol we can get an insight into your health and cardiovascular risk (i.e. the buildup of cholesterol in blood vessels leading to blood vessel narrowing, heart attack and stroke). The liver regulates cholesterol levels in the body; it both synthesizes it and removes it, it also synthesises various lipoproteins that transport cholesterol throughout the body – and it is these that we measure in the cholesterol test.

The cholesterol/HDL ratio is calculated by dividing your total cholesterol value by your HDL cholesterol level. It is used as a measure of cardiovascular risk because it gives a good insight into the proportion of your total cholesterol which is "good" (i.e. high-density lipoprotein, HDL). Heart disease risk tools (such as QRisk) use the cholesterol/HDL ratio to calculate your risk of having a heart attack.

Triglycerides are a type of fat (lipid) that circulate in the blood. They are carried in the bloodstream by lipoproteins called chylomicrons and VLDLs (very low density lipoproteins). After you eat, your body converts excess calories into triglycerides which are then transported to cells to be stored as fat. Your body then releases triglycerides when required for energy.

Your kidneys are responsible for removing waste products and excess fluid from your blood. How well they are doing their job can be measured by examining the levels of waste product in the blood as well as levels of electrolytes which regulate fluid in the body. Kidney disease has few symptoms in the early stages so it is important to monitor kidney function, especially if you are a diabetic, have raised blood pressure or a close relative with the disease.

Creatinine is a chemical waste molecule that is generated from normal muscle break down. Sportspeople can therefore have higher levels than the average person. Creatinine is cleared from the kidneys and so is also an accurate marker of kidney function, and may help in diagnosing kidney disease.

Urea is a waste product produced by the body when it breaks down proteins in the liver. Once the urea is made, it is transported to the kidneys, which filter it out of the blood and remove it from the body in the form of urine. Measuring the levels of urea in the blood can therefore reflect how well both the liver and the kidneys, are

functioning. It is important to note that even if one kidney is severely damaged but the other is functioning perfectly, results may still return as normal.

The estimated **glomerular filtration rate (eGFR)** assesses how well the kidneys are working by estimating the amount of blood filtered through the kidneys. The glomeruli are tiny filters in the kidneys responsible for removing waste products. If these filters do not do their job properly, kidney function can be impaired. The eGFR calculation is an estimate of actual glomerular filtration rate, calculated using your age, gender, ethnicity, and serum creatinine levels.

Diabetes -Type 2 diabetes is a metabolic disease which is becoming increasingly common across all ages. Up to one third of adults in the UK have prediabetes and are at risk of developing diabetes. It is caused by the interplay between lifestyle factors and our genes. Lack of exercise, making unhealthy diet choices and being overweight all increase the likelihood of developing diabetes. It is important to identify diabetes early; if you have raised blood glucose and are at the stage described as prediabetic, then you can still bring blood glucose levels back down by making lifestyle changes. Once diabetes is diagnosed it is vitally important to manage your blood glucose levels carefully to avoid many of the devastating side-effects of the disease which can damage nerves, blood vessels, kidneys and eyes. Diabetes is a known risk factor for cardiovascular disease as well as some cancers and is a major cause of decreased life-expectancy.

Haemoglobin A1c (HbA1c), also known as glycated haemoglobin, is a longer term measure of glucose levels in your blood than a simple blood glucose test. Glucose attaches itself to the haemoglobin in your red blood cells, and as your cells live for around 12-16 weeks, it gives us a good indication of the average level of sugar in your blood over a 3 month period.

Iron Status - Iron is an element that we require for several different bodily processes such as creating new red blood cells, carrying oxygen around the body and strengthening our immune system. Most of the iron in our bodies is found in haemoglobin, a protein in our red blood cells. A smaller proportion is stored in a protein called ferritin that is responsible for controlling the release of iron when levels are too low or high. Iron status tests measure the total amount of iron in the blood with a view to diagnosing anaemia or iron overload (haemochromatosis). They also test your body's ability to absorb iron as well as the amount of iron stored in your body.

Iron is a vital component of oxygen transport, DNA synthesis and oxidative phosphorylation, which are fundamental processes for life, let alone sporting performance. About half of your body's iron (about 2.1 g) is found in red blood cells in the oxygen-transporting haemoglobin. About another gram is found in macrophages (white blood cells) and in the oxygen-transporting myoglobin of muscles. Excess iron is stored in the liver. If you are low on iron you will struggle to respire at the cellular level as well as you could and so you will feel more fatigued

and get tired quicker. For athletes this will result in a reduced performance, impaired VO2 Max, reduced energy efficiency, inability to train maximally each day, greater maximum lactate and quicker exhaustion. You get your iron from two main sources: from your diet (about 5%) and from the breakdown and turnover of your red blood cells (about 95%). In your diet there are two main types of iron: Fe²⁺, which is found in meat and dairy products, and Fe³⁺, which is harder to absorb and found in plant based foods. Iron status tests look at several measures of iron, which together can paint a picture about your iron metabolism and what it means for you.

Total iron-binding capacity (TIBC) is a measure of the ability of your body to efficiently carry iron through the blood.

Transferrin is made in the liver and is the major protein in the blood which binds to iron and transports it round the body. This test measures how much this protein is 'saturated' by iron.

Ferritin is a complex globular protein which stores iron in an inactive form. As your iron stores deplete, the ferritin releases its iron for use. If your ferritin depletes then you will run out of iron and if your iron runs out your ability to produce red blood cells in your bone marrow decreases. Ferritin therefore gives a good measure of your iron stores. Ferritin is also an acute phase protein, so can increase during periods of infection, inflammation or trauma.

Unsaturated iron binding capacity (UIBC) represents the portion of iron binding sites on transferrin that are not occupied by iron. UIBC is often measured along with iron and total iron-binding capacity (TIBC) as a diagnostic tool to determine various iron disorders.

Gout Risk - Gout is a form of arthritis which occurs mostly in the joints of the fingers and toes, wrists and ankles. It is caused by excess uric acid accumulating and depositing crystals in the joints. The first attack often affects the big toe which becomes so inflamed and painful that a sufferer cannot bear anything to touch it. Gout can affect one or more joints at the same time. Treatments for gout include steroids, non steroidal anti-inflammatories and colchicine.

Uric acid is a waste product produced from the breakdown of chemical compounds called purines. Purine occurs naturally in the body, but it is also found in the food we eat - and in some foods more than others. In healthy individuals, uric acid is excreted by the kidneys in urine, however, if levels are too high to excrete, or if you have a problem metabolising purine, then uric acid can begin to accumulate and can be deposited as crystals in the bodily tissues. When this occurs in joints it causes the painful condition known as gout.

Clotting Status - Your clotting cells (platelets) are produced in the bone marrow and are important for controlling bleeding. Sometimes too few platelets are produced or are destroyed too quickly resulting in a condition known as thrombocytopenia. This can be caused by immune disorders, some medication, liver disease or chronic

bleeding. A high platelet count is called thrombocytosis and can be caused by a variety of conditions including bone marrow disorders, infection and inflammation.

MPV, or Mean Platelet Volume, is a measurement of the average size of your platelets. Platelets are fragmented cells within the blood that aid the process of clot formation. MPV provides an indication of platelet production in your bone marrow.

Platelet Count - Platelets or clotting cells are the smallest type of blood cell and are important in blood clotting. When bleeding occurs, the platelets swell, clump together and form a sticky plug (a clot) which helps stop the bleeding.

Red Blood Cells - Red blood cells are the most common type of blood cell and have the job of delivering oxygen to your tissues via your circulatory system. Red blood cells are continuously created in your bone marrow to replace cells which are lost through bleeding or cell ageing. Your red cell count should be stable, but certain conditions can cause too few or too many cells to be created, cells to die too quickly or to be misshapen. If you are not producing enough red blood cells it affects the amount of oxygen being delivered to your tissues, resulting in anaemia and its associated symptoms of fatigue and pale skin. Overproduction of red blood cells can cause headaches, blurred vision and an enlarged spleen.

HCT (haematocrit) measures the amount of space (volume) within the blood that is taken up by red blood cells.

Haemoglobin is a protein in red blood cells which carries oxygen around the body and gives the blood its red colour. This test measures the amount of haemoglobin in the blood and is a good measure of the blood's ability to carry oxygen around the body. Athletes and sports people tend to have a higher oxygen demand than the average person as they need to ensure a supply of oxygen to their muscles. It is normal to find haemoglobin levels at the higher end of the normal range in endurance and strength athletes.

MCH (mean corpuscular haemoglobin) measures the average amount of haemoglobin contained in one of your red blood cells.

MCHC (mean corpuscular haemoglobin concentration) is the average concentration of haemoglobin in your red blood cells. Haemoglobin is a molecule which allows red blood cells to transport oxygen around the body.

MCV (mean corpuscular volume) reflects the average size of your red blood cells. This is important to measure, as it can indicate how much oxygen your cells are likely to be transporting around the body.

Red blood cell distribution width (RDW) indicates whether your red blood cells are all the same size, or different sizes or shapes. Normally cells are fairly uniform both in size and in shape, but some blood disorders may cause your red blood cells to form in abnormal sizes. This test measures the difference between the largest and the smallest red blood cell.

Red Blood Cell (RBC) Count analyses the number of red blood cells in the blood. Red blood cells carry oxygen from the lungs to the rest of the body, where it can be used to fuel energy processes such as movement and respiration. They also carry carbon dioxide produced from cells back to the lungs so that it can be exhaled.

White Blood Cells - Your white blood cells are the key to your body's immune or defence system. They fight infections and protect your body from foreign particles such as harmful germs and bacteria. White blood cells are formed from the stem cell of the bone marrow and have a lifespan of a few days. There are five major types of white blood cell and they all play a different role in protecting the body. The numbers of each one of these types of white blood cell give important information about your immune system as well as in the diagnosis of recent infection.

White Blood Cell (WBC) Count measures the number of white blood cells in the blood. White blood cells are key to your body's immune system. They fight infections and protect your body from foreign invaders such as harmful germs and bacteria. Additionally, they produce many antibodies and memory cells to protect you from further infections with the same germ.

Basophils are a type of white blood cell that protect your body from bacteria and parasites such as ticks. They also play a role in allergic reactions.

Eosinophils are a type of white blood cell that are responsible for removing parasitic infections and regulating inflammation to mark an infected site. They also play a role in allergy and in asthma.

Lymphocytes are a type of white blood cell which fight bacterial and viral infections. They are the subset of white blood cells involved in the more specific response to infections, which can identify and differentiate between different foreign organisms that enter the body. As well as fighting infection, they produce antibodies and memory cells to help to prevent future infections from the same germ. Lymphocytes include T cells, B cells and natural killer cells.

Monocytes are a type of white blood cell that engulf and remove pathogens and dead or damaged cells from our blood. The heat and swelling of inflammation is in part caused by the activities of these cells.

Neutrophils are a type of white blood cell that are responsible for helping your body fight infection. When neutrophils are low you can be more vulnerable to illness and infection.

Muscle Health - Creatine kinase (CK) is an important enzyme in tissues that have a fast metabolism, including muscle tissue. Sport and competitive training imposes substantial mechanical stresses on your body and one of the most prominent by-products of this is CK, which leaks into the blood when your muscle fibres are damaged from repeated, intense contractions. Traditionally in medicine, CK has been a marker of serious muscle injury due to a variety of mechanisms. High levels can be dangerous and can accumulate to cause a nasty condition called 'rhabdomyolysis'.

This is when so much muscle breaks down that the CK by-product can make you sick and even cause kidney failure and heart attack. However, for the athlete muscle breakdown is key to the anabolic process and so instead of breaking your muscle down by accident, you're breaking it down on purpose and as a result an athlete's body adapts to deal with far higher levels of CK than the average person. An understanding of healthy CK levels is important as it can give measures of capacity for increased training load or flags about over-training and need to reduce load. If you are a muscle building athlete and your CK level is on the low side of the normal range, then technically you can increase your workload for faster, larger gains in performance without overloading your system (from a CK point of view!). If your CK level is too high then it's an important alarm bell to reduce your training load to prevent severe muscle injury, over training syndrome and possibly kidney damage. To make sure you get the right result always ensure you test your CK level at least 2 days post-heavy exercise to get your baseline.

Inflammation - Inflammation occurs when your defence system is activated to rid your body of foreign invaders or irritants and to protect against tissue damage. Typical signs of inflammation include heat, redness, swelling and pain. Inflammation can be acute or chronic. Acute inflammation is often caused by infection or injury, and it flares up and disappears within days. Chronic inflammation is caused by longer-term conditions such as arthritis, inflammatory bowel disease or asthma. Inflammation causes levels of certain proteins in the blood to rise and these can be measured to assess the extent of inflammation as well as in some instances the cause.

CRP HS - C-Reactive Protein (CRP) is an inflammation marker used to assess whether there is inflammation in the body - it does not identify where the inflammation is located. High Sensitivity CRP (CRP-hs) is a test which is used to detect low-level inflammation which is thought to damage blood vessels which can lead to a heart attack or stroke. When you have a serious injury you get a lot of inflammation around the site of injury. You can imagine the swelling around a twisted ankle. Any injury like this will cause your CRP-hs to rise. However, people who train often are also at risk of chronic low level inflammation, which can impact your performance negatively. We use CRP-hs in conjunction with CK and your full blood count (see liver and full blood count sections) to paint this picture. Inflammatory markers like CRP-hs offer the best insights if you are rested when you have the test, otherwise they might be elevated due to recent exercise.