

Standard short synacthen test (children)

Information for parents and carers

This information sheet answers some of the questions you may have about your child's short synacthen test. It explains the risks and the benefits of the test and what you can expect when you come to hospital. If you have any other questions or concerns, please do not hesitate to speak to the doctors or nurses caring for your child.

Confirming your identity

Before your child has a treatment or procedure, our staff will ask you to confirm their name and date of birth and check their ID band, we will also ask you to confirm your address. If we don't ask these questions, then please ask us to check. Ensuring your safety is our primary concern.

What is a short synacthen test?

It is a test to see how well the adrenal glands (triangular-shaped glands sitting on top of each kidney) produce a hormone called cortisol.

We use a synthetic form of the natural pituitary hormone (adrenocorticotrophic hormone) to stimulate the adrenal glands and see how well they respond.

Why do I need this test?

- It will tell us how well your child's adrenal glands are working.
- It will give the doctors information about how your child's hypothalamus, pituitary and adrenal glands work together.

What are the benefits?

It helps the doctors make a diagnosis.

What are the risks?

There are usually no side effects. Your child may have an anaphylaxis (allergic) reaction but this is very rare. We will be closely monitoring for any reactions.

Are there any alternatives?

Yes. There are other tests, but this one is widely used throughout the UK and is the most accurate.

Consent

We must by law obtain your written consent to any operation and some other procedures beforehand. Staff will explain the risks, benefits and alternatives before they ask you to sign the consent form. If you are unsure about any aspect of the procedure or treatment proposed, please do not hesitate to speak with a senior member of staff again.

Do I need to prepare for my child's test?

Your child does not need to fast for this test. If your child usually takes hydrocortisone or other glucocorticoid treatment, they should miss out their usual dose on the morning of the test. At the end of the test, they can start taking their medicine as normal. Your doctor or nurse specialist will give you specific advice about your child.

What happens before my child's test?

Your child will be admitted to Philip Isaacs Ward, the day case unit for children. They will be seen by a nurse who will check a few details and measure your child's pulse rate, blood pressure, respiratory (breathing) rate and temperature. We will also measure their height and weight.

What happens during my child's test?

A nurse or doctor will put a cannula (thin plastic tube) into one of your child's veins (usually on the back of their hand or inside their elbow). They will use a cold spray or a local anaesthetic cream to numb the area beforehand.

The nurse first takes a blood sample from the cannula. They then give your child an injection of synacthen through the cannula.

If a vein cannot be found, the test may be modified by injecting the synacthen into your child's thigh and taking limited blood samples with finger pricks. You will have the opportunity to discuss this with staff.

Following the injection of synacthen, the nurses will monitor your child and take blood samples at the correct time.

How long does the treatment take?

The test will take two hours (including preparation). We will ask you to bring your child in for the test starting at 8.30am.

What happens after my child's test?

We will take out the cannula and put on a plaster and you would be able to go home.

When will I get the test results?

The results are usually available after a couple of weeks. All results are reviewed by the endocrine team (on a weekly basis). We usually provide your child's test results at their next outpatient appointment at the hospital. However, if they need to start treatment before this appointment, we will contact you and their GP soon after the results have been reviewed at our weekly meeting.

Who can I contact with queries and concerns?

If you have any queries or concerns after the test, please contact the Paediatric Endocrine Clinical Nurse Specialists (Krystal and Sarah).

Tel: 020 3299 1922, 9am to 5pm, Monday to Friday

Details of additional sources of information

Child Growth Foundation (CGF)

Tel: 020 8995 0257

www.childgrowthfoundation.org

Sharing your information

We have teamed up with Guy's and St Thomas' Hospitals in a partnership known as King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas'. To make sure everyone you meet always has the most up-to-date information about your health, we may share information about you between the hospitals.

Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. The PALS office is located on the ground floor of the Hambleden Wing, near the main entrance on Bessemer Road - staff will be happy to direct you.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS:

Tel: 020 3299 3601

Email: kch-tr.palsdh@nhs.net

You can also contact us by using our online form at www.kch.nhs.uk/contact/pals

If you would like the information in this leaflet in a different language or format, please contact PALS on 020 3299 1844.