

Short synacthen test



Information for patients

This leaflet answers some of the questions you may have about having a short synacthen test. It explains the purpose of the test and the side effects you may have during the test. This leaflet also explains what you can expect when you come to hospital. If you have any other questions or concerns, please speak to the doctors or nurses caring for you.

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your **name** and **date of birth** and check your **ID band**. If you don't have an 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?

This test is done to assess the function of your adrenal glands. The adrenal glands are situated on top of both kidneys and are responsible for producing cortisol. Cortisol is a hormone which is essential for health and is particularly important in stressful situations. The adrenal glands produce cortisol in response to adrenocorticotrophic hormone (ACTH), a hormone produced by the pituitary gland.

During this test you receive an injection of synthetic ACTH to stimulate cortisol release from your adrenal glands. We are then able to assess how much cortisol you are able to produce by taking blood samples.

Why do I need this test?

This test is necessary to find out if there is an adequate level of cortisol production in response to stimulation.

Cortisol is a hormone produced by the adrenal glands and plays an important role in your body's response to stress and illness. Cortisol is also involved in regulating your blood sugar, blood pressure and immune system. Greater amounts of cortisol are produced by your body in times of illness. If your body is unable to produce enough cortisol you may not be able to cope with illness and could become very unwell.

What are the benefits?

This test will allow us to find out if your adrenal glands are able to produce a sufficient amount of cortisol in response to ACTH. The results of this test allow the endocrine team to decide if you require treatment or if you are currently on treatment, whether this should continue.



What are the risks?

A cannula (tiny plastic tube) will be inserted into a vein in your arm or hand using a needle. The cannulation process is similar to that of a blood test. Associated risks with cannulation or a blood test may include:

- multiple punctures to locate veins
- bleeding from puncture site
- bruising
- haematoma (blood build up under the skin)
- fainting or feeling lightheaded
- infection (a slight risk any time the skin is broken)
- phlebitis (inflammation of the vein)

Keeping pressure on the puncture site for a few minutes after the needle is removed will help to reduce bruising.

During this test you will be given an injection of synthetic ACTH (synacthen) into your vein. As with any new medication there is a small risk of allergic reaction. In extremely rare cases this medication can cause adrenal bleeding. More commonly you may feel warm, light-headed, or nauseous (feeling sick). These feelings should subside quickly.

Are there any alternatives?

To assess for primary hypoadrenalism there are no alternatives to this test.



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 a consent form. If you are unsure of any aspect of the treatment proposed, please do not hesitate to speak with a senior member of the staff again.

Do I need to prepare for my test?

If you are taking hydrocortisone tablets or any other steroid (for example, prednisolone or dexamethasone) do not take these tablets on the day of the test. On the day before the test do not take any steroid past 9pm. Do not use any steroid inhalers or creams on the day of the test or 12 hours before the test.

If you are on oral oestrogens (oral contraceptive pill containing oestrogen or oral HRT) you should stop these six weeks before the test. You may continue using oestrogen gel or patches. Please call to discuss with a member of the nursing staff on 020 3299 3034. Apart from the medications mentioned above you can continue to take your other regular prescribed medications.

What happens before my test?

Your blood pressure will be taken and the nurse will ask you about your regular medications. A consent form will be completed and you will be asked to sign this.

What happens during my test?

A cannula (tiny plastic tube) will be inserted into a vein in your arm or hand using a needle from which blood samples will be taken. The nurse will then give the synthetic ACTH (synacthen) through the cannula. You may have side effects of the synacthen injection



during the test. You may feel all or some of the following symptoms: flushing (a warm sensation), nausea (feeling sick), light-headedness, or a metallic taste. These side effects do not last for long and should not be felt by the end of the test. Some people do not have any side effects.

A blood sample will be taken at 30 minutes and 60 minutes after the synacthen has been given. The test is one hour long.

How long does the test take?

The test lasts for one hour from the time the nurse gives you the synacthen. You should expect to be in the unit for one and a half to two hours.

What happens after my test?

Once the test has been completed the cannula will be taken out and you will be able to go home.

If you are taking steroids: continue to take your steroid tablets as before until you hear from the hospital.

Results will be reviewed by the endocrine team. They will either be sent to you by letter or, in some cases, discussed on the phone or with you at your next clinic appointment. We will also send a letter to your GP. This may take up to six weeks.

Contact

If you have any queries or concerns please contact the Programmed Investigation Unit (PIU).

Tel: 020 3299 3034 or 020 3299 1385. Opening hours: 8am to 6pm, Monday to Friday.



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.



