

# Short Synacthen Test

An information guide



# Short Synacthen Test

Your doctor has recommended that you have this test to help with the diagnosis and the management of your condition.

## What is synacthen?

The pituitary gland produces several hormones. One of these is called 'Adrenocorticotrophic hormone' (ACTH). Its job is to get the adrenal glands to produce another hormone called cortisol. Synacthen is the man made version of ACTH and is used to test the function of the adrenal gland.

## What is a short synacthen test?

It is a test to check the amount of cortisol produced in your body and to check how well your body can produce cortisol. Cortisol is one of the essential steroid hormones to keep you healthy. You can be unwell if this hormone is too low or too high.

## Where is this test carried out?

Your test will take place on one of the Trust's Patient Investigation Units (PIU's).

## **What do I need to do before the test?**

If you take hydrocortisone please omit the morning dose until after the test has been completed. If you are taking prednisolone or cortisone, please transfer to dexamethasone two weeks prior to the test, and omit your morning dose prior to the test.

If you have a steroid inhaler, we ideally advise you to omit this on the night before the test and on the morning of the test. You may take your inhaler once the test has finished. However, if you have any concerns, please consult your endocrine team for advice prior to doing so.

You may eat and drink normally before the test.

The test takes one hour from the time of injection, so please allow at least one and a half hours to be in the unit. You may wish to bring a book or magazine to read whilst the test is being performed.

## **Procedure**

Your test will take place on one of the Patient Investigation Units (PIU) within the Trust.

The test is best performed in the morning, preferably around 9am, as cortisol levels decline during the day. The test is carried out as follows:

1. A small needle/cannula will be inserted into a vein in your arm. This is called a venflon and allows blood samples to be taken without causing too much discomfort
2. A blood sample will be taken at the start of test to check your level of cortisol (baseline sample)
3. An intramuscular or intravenous injection of synacthen will be given. This stimulates the adrenal glands to produce cortisol
4. A second blood sample will be taken half an hour after the synacthen injection
5. A third and last blood sample will be taken one hour later after the synacthen injection. This completes the test.

### **Rare side effects**

Side effects from Synacthen injection are very rare, but in common with any other drug, an allergic reaction can occur.

This can show as swelling of the tissues of the face, neck or body and possibly difficulties in breathing. It is important that you stay on your allocated bed or chair as a precaution and if any of these signs develop, please call for assistance immediately.

A nurse call button is next to each chair/bed, in case no-one is immediately available to ask. If required medication will be administered to reverse this reaction.

### **After the test**

If you take steroid medication it can be taken and your cannula will be removed. You will be offered refreshments prior to going home.

### **General advice**

You should feel no after-effects from the test and should be fit to return home afterwards.

You will receive your results by letter or at your next clinic appointment.

If you have any further questions, please do not hesitate to contact your endocrinology doctor or nurse.

## **Contact Information**

Normal working hours (Monday to Friday): the endocrine team (all telephone numbers are direct to consultant's secretaries). At other times (5pm to 9pm) or in case of emergency or urgent advice being required, you should contact your own GP or go to your local Accident and Emergency department.

### **Fairfield General Hospital**

Dr S Rowles, Dr H Smithhurst, Dr L Pichaipillai and Dr S Kouta

Telephone: 0161 778 2676

Department Fax Number: 0161 778 3917

### **The Royal Oldham Hospital**

Dr TK Jagadhish

Telephone: 0161 627 8778

Dr BM Mishra and Dr A Shiraz

Telephone: 0161 778 5431

Department Fax Number: 0161 627 8175

### **Rochdale Infirmary**

Dr PK Prakash

Telephone: 01706 517 032

Department Fax Number: 01706 517 869

## **North Manchester General Hospital**

Professor C Dang, Dr I Malik and Dr S Farook

Telephone: 0161 720 2086

Dr R Khurana, Dr H Chandrasekara and Dr V Arul Devah

Telephone: 0161 604 5349

Department Fax Number: 0161 720 2029

### **Endocrine Specialist Nurse:**

Cristina Edward – 0161 918 4069

Karen Hallett - 0161 627 8388

### **Patient self help groups and further information:**

The Pituitary Foundation

86 Colston Street, Bristol BS1 5BB

Information and support

Helpline 0117 370 1320

(Mon-Fri 08.00-16.00)

[www.pituitary.org.uk](http://www.pituitary.org.uk)

The UK Addison's Disease Self Help Group (ADSHG)

[www.addisons.org.uk](http://www.addisons.org.uk)

**If English is not your first language and you need help, please contact the Interpretation and Translation Service**

Jeśli angielski nie jest twoim pierwszym językiem i potrzebujesz pomocy, skontaktuj się z działem tłumaczeń ustnych i pisemnych

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Dacă engleza nu este prima ta limbă și ai nevoie de ajutor, te rugăm să contactezi Serviciul de interpretare și traducere

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For advice on stopping smoking contact the Specialist Stop Smoking Service on 01706 517 522

**For general enquiries please contact the Patient Advice and Liaison Service (PALS) on 0161 604 5897**


**For enquiries regarding clinic appointments, clinical care and treatment please contact 0161 624 0420 and the Switchboard Operator will put you through to the correct department / service**

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**Date of publication: May 2015**

**Date of review: December 2020**

**Date of next review: December 2022**

**Ref: PI(M)590**

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