

Overnight Dexamethasone Suppression Test (Single Dose)

An information guide



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Your doctor has recommended that you have a dexamethasone suppression test. This test is important to help with the diagnosis and management of your condition.

What is the purpose of the test?

The dexamethasone suppression test will help us to know if your body is producing too much of the hormone called cortisol. Cushing's syndrome is a disease caused by too much cortisol production. Cortisol is a natural steroid hormone produced by the adrenal glands, which sit just above the kidneys and respond to instructions from the pituitary gland, which is a small gland beneath the brain. High levels of cortisol can indicate a problem with either the pituitary gland or the adrenal glands.

Preparation for the test

- You do not need to fast for this test.
- You can take your usual regular medication.
- You may need to stop oestrogen therapy (HRT, the contraceptive pill) for 6 weeks prior to the test, as advised by your doctor. **If you are stopping contraception, you must ensure that you use alternative contraception to avoid pregnancy.**
- If you are using steroid creams or inhalers, you may need to stop them for a short time **but this must be discussed with medical staff first.**
- You will be allowed to drive after the test.

How is this test carried out?

Your endocrinologist will give you a prescription for one dexamethasone tablet (the dose is 1mg) and a blood request form

- You will need to collect the tablet from the pharmacy.
- You should take the tablet at night at half past eleven (23.30 hrs) at home and then attend the hospital for a blood test next morning at 9 am (09.00 hrs). **(The timing of the tablet and the blood test is very important and needs to be as close to the recommended time as possible so that we can make sense of the results properly).**
- Alternatively, if you are referred for this test to be done at our Patient Investigation Unit (PIU), then you will be asked to pick up the prescription for dexamethasone from the unit on the morning before the test and a cortisol blood test will be obtained at the same time. The test will then be carried out as detailed above.

Why use dexamethasone?

Dexamethasone is a steroid tablet that reduces the production of cortisol, the natural steroid hormone. If your body is producing normal amounts of cortisol the dexamethasone should suppress your production of cortisol. If your cortisol levels are not suppressed this might mean that your body is producing too much.

What are the risks?

It is unusual to have side effects from a single dexamethasone tablets, but some people may have difficulty sleeping or have vivid dreams.

Side effects from prolonged use of dexamethasone may include; gastrointestinal effects, dyspepsia, abdominal distension, increased appetite, endocrine effects and increased susceptibility to infection. The full list will be included with your medication. There are no known long-term risks from taking a single dexamethasone tablet.

If you suffer from vomiting or diarrhoea during the period of the test, then the test will have to be stopped and re-arranged when symptoms completely settle.

What are the alternatives to this test?

A number of different tests may be necessary, including blood tests, urine tests and scans. This varies between patients and depends on the results of your investigations. Your endocrinologist will advise you about this in more detail.

How will I find out the results of this test?

Your results will be reviewed by the endocrinology doctors. We will inform you and your GP of your results and any changes to treatment or medication, by letter. Sometimes it may be necessary to contact you by telephone.

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:

0845 450 0375

(Mon-Fri 08:00-16:00)

www.pituitary.org.uk

Notes

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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The NCA brings together Salford Royal NHS Foundation Trust and the hospitals and community services of The Royal Oldham Hospital, Fairfield General Hospital in Bury, and Rochdale Infirmary (currently part of The Pennine Acute Hospitals NHS Trust).

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