Liverpool University Hospitals

Patient information

Conns Definitive Test

Diabetes and Endocrinology Department

Conns Definitive Test

What is a Conn's definitive test? Why do I need the test?

This test is performed to confirm whether you have Conn's syndrome, a condition caused by too much production of aldosterone hormone by the adrenal glands usually manifesting in hypertension, low potassium and tiredness.

What are the risks/side effects?

It is necessary to change some of your blood pressure medication so that it does not interfere with the test. This may lead to a period where your blood pressure is not controlled and you are at risks associated with uncontrolled blood pressure. It is important to carefully monitor your blood pressure and switch to the alternate medications that least interferes with the test. After this has been discussed with yourself, your endocrine doctor would liaise with your GP regarding the change of medications.

What happens before the test?

Your health professional will advise you on what medications if any you need to stop prior to the test. THe table below details most medication that may affect the test:

Drug	You should stop the drug at:
Mineralocorticoid receptor antagonists (e.g: spironolactone, eplerenone etc	Six weeks
Beta blockers (e.g: bisoprolol, atenolol etc)	Six weeks
ACE inhibitors and ARB's (e.g: ramipril, enalapril, losartan, irbesartan etc)	Two weeks
Nonsteroidal anti-inflammatory drugs (NSAIDS) (e.g : ibuprofen, diclofenac etc)	Two weeks
Diuretics (e.g : furosemide, thiazide, indapamide etc.)	Two weeks
Central alpha 2 agonists (e.g: clonidine, alpha - methyldopa)	Two weeks
Calcium antagonists (e.g: amlodipine, lacidipine etc)	Two weeks
Alpha blockers (doxazocin, prazocin, terazocin etc)	Day of the test

You can eat and drink as normal on the day of the test.

What happens during the test?

On the day of your test a nurse will check your details and explain the test to you. You will be on the ward for about five hours.

A nurse will put a small tube (cannula) into your vein.

A blood sample is taken at the beginning of the test to ensure your potassium is normal.

You will be attached to a pump and will be given a chair to sit on. You will receive two litres of normal saline over four hours through the cannula and you will need to be remained seated for the whole time. Your blood pressure will be monitored and a final blood sample will be taken before you are discharged.

What will happen after the test?

Once you have completed the test, the results will be reviewed by endocrine doctors and they will contact you directly if necessary.

Further investigation and management will be discussed in the endocrine clinic.

Feedback

Feedback Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point.

Your co-operation is greatly appreciated.

Further Information

If you have any query or do need to speak to doctors please contact on call endocrine doctor via hospital switch board:

Tel: 0151 706 2000 Text phone number: 18001 0151 706 2000

If you have any worries or questions about the test or the date is inconvenient please contact the Medical Day Case Unit

Medical Day Case Unit

Telephone number: 0151 706 2396 Text phone number: 18001 0151 706 2396 **Opening Hours:**

07:30 – 20:00 Monday to Thursday 07:30 – 16:00 Friday

If you have any query or do need to speak to doctors please contact on call endocrine doctor via hospital switch board : Tel: 0151 706 2000 Text phone number: 18001 0151 706 2000

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All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

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ز انیاریی پیو مندیدار به ونهخو شانهی له لایهن **تر استهوه** پهسهند کر اون، ئهگم داو ا بکریّت له فوّر ماتهکانی تر دا بریتی له زمانهکانی تر، ئیزی رید (هاسان خونّیندهوه)، چاپی گهوره، شریتی دمنگ، هیّلی موون و ئهلیّکتروّنیکی همیه.

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