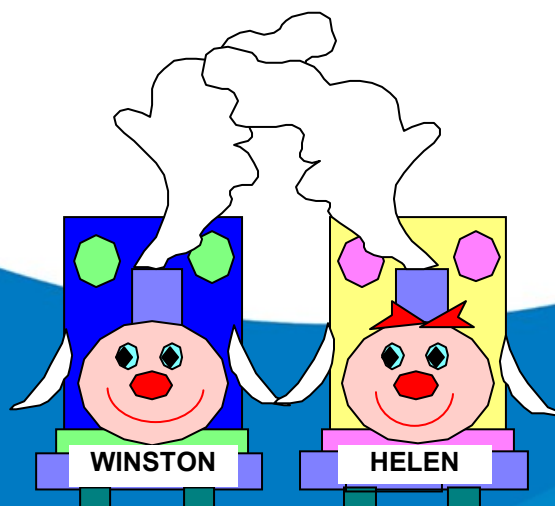


Sweat Test

This leaflet can be made available
in alternative languages / formats on request.

如有需要，本传单可提供其他语言/版式
此單張的其他語言/格式版本可按要求提供

Na żądanie ta ulotka może zostać udostępniona
w innych językach/formatach.



The reasons for the procedure

A sweat test is used as a basic screening test to check for a disease called Cystic Fibrosis. It is much better to identify the condition early so that appropriate treatment can be started. Children with Cystic Fibrosis are known to have increased amounts of salt in their sweat. We carry out many of these tests every week for infants and children who have recurrent chest infections or who have faltering growth.

The nature of the procedure

- A sweat test measures the amount of salt in the sweat. First a small area of skin on the arm or leg is cleaned and two disks of a special jelly (pilocarpine) are placed on the skin a few inches apart.
- The disks are connected to a battery, which passes a tiny electric current between them. After about five minutes the skin under the disks should be sweating nicely, the disks can now be removed and skin dried.
- A paper disk or special device is put over the place where the sweating has taken place and the new sweat is then absorbed into special paper or device.
- The device used over the skin is similar to a small watch. The test takes 30 minutes to one hour to complete, sometimes longer if your child does not sweat adequately.
- The results are usually available and sent to your consultant within a few days. Arrangements will be made as to how best to contact you with the results. If the result is abnormal or the test needs repeating for some reason your Consultant Paediatrician or the Respiratory Nurse Specialist will contact you to discuss the implications for your child.

The benefits of the procedure

The sweat test will enable your doctor to screen for Cystic Fibrosis for your child.

A sweat test is a simple screening test, which is carried out for most infants and children who have a medical history of chest/respiratory symptoms, poor weight gain and/or diarrhoea.

Common in very small babies as they do not sweat very well. It may also be difficult to obtain enough sweat on children with eczema.

On rare occasions if the result is not suitable to make a definite diagnosis the test will be repeated at Alder Hey Children's Hospital.

The risks of the procedure

On rare occasions, we are unable to collect enough sweat for adequate analysis. If this happens we will have to repeat the test at a later date. This problem is more common in very small babies as they do not sweat very well. It may also be difficult to obtain enough sweat on children with eczema. On rare occasions if the result is not suitable to make a definite diagnosis the test will be repeated at Alder Hey Children's Hospital.

Sweat testing is very safe and many thousands of children have the test each year without any problem. There is a very slight risk of a tiny superficial burn to the skin. Young babies less than 6 weeks old are most at risk.

The discomforts of the procedure

The test only usually causes slight tingling sensation. It is very unusual for a child to become distressed during the procedure. The infant or child can continue to eat, drink and play whilst conducting the test.

The alternatives of the procedure

The sweat test is the Gold Standard test for cystic fibrosis. It is quick, reliable and safe.

The consequences of not having the procedure

If your child does not have the sweat test your consultant may not be able to rule out Cystic Fibrosis as a cause of your child's symptoms. Failure to do so may cause your child to have an incorrect diagnosis for their medical condition and therefore may receive inappropriate treatment.

Note

Occasionally your infant/child may not sweat enough for the test to give an accurate result. In this case the test will be repeated at a later date. If you have any questions or concerns about the sweat test you can contact your child's Consultant or the Paediatric Respiratory Nurses to discuss your anxieties before the test.

The Paediatric Respiratory Nurses can be contacted on the following telephone numbers: 0151-430-1938/1453

If you have any further questions, please contact your child's consultant via their secretary via the hospital switchboard.

The secretaries are available Monday to Friday, 9.00 am to 5.00 pm

If you need to contact the department outside of these hours, please phone either:

Ward 3F	0151 430 1616
Ward 4F	0151 430 1791

Whiston Hospital
Warrington Road,
Prescot, Merseyside, L35 5DR
Telephone: 0151 426 1600

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