How will I find out the results?

Your Endocrinologist will write to your GP with the results of the test. A copy of this letter will usually be sent to you also.

Further information?

You can contact the Endocrinology Nurse Specialist with any questions you may have.

Endocrinology Specialist Nurse Tel: 07881 928197

If your enquiry is for the endocrinology medical team, please contact their secretaries through the hospital switchboard.

St Helens Hospital Marshalls Cross Road, St Helens, WA9 3DA 01744 26633



Saline Infusion Test

If you need this leaflet in a different language or accessible format please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترسپذیر نیاز دارید، لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formacie, proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil, vă rog să discutați cu un membru al personalului să se ocupe de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式,请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أُخرى، أو بتنسيق يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

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Department: Diabetes and Endocrine

Document Number: MWL2149

Version: 001

Review Date: 01 / 04 / 2027

Why do I need to have this test?

The aim of this test is to see if you have a condition called Primary Hyperaldosteronism, which can cause hypertension (high blood pressure).

Your adrenal glands produce many hormones, one of which is aldosterone. Aldosterone causes the kidney to increase the amount of water and sodium it keeps in the blood, and this raises your blood pressure. The normal response to high blood pressure is for your adrenal gland to reduce the amount of aldosterone it produces.

In Primary Hyperaldosteronism, your adrenal gland continues to release aldosterone even when your blood pressure is high. This test uses an intravenous infusion of saline to temporarily increase your blood pressure. A blood test will then show whether your aldosterone levels have dropped, or if they remain abnormally high

Should I fast or stop any medication prior to the test?

You do not need to fast before the test.

Your endocrinologist should tell you if you need to stop any medication and when to restart it.

Spironolactone, Eplerenone, Triamterene and Amiloride should be stopped 6 weeks before the test as they will interfere with the test results. Liquorice, including liquorice teas, should also be avoided for 6 weeks before the test.

You may also need to stop beta-blockers, loop and thiazide diuretics, angiotensin converting enzyme inhibitors, angiotensin receptor blockers, dihydropyridine calcium blockers and non-steroidal anti-inflammatory medications for 2 weeks before the test. Your Endocrinologist will advise whether it is safe to do this or if you should continue them. The potassium levels in your blood need to be normal before the test, so you may need to take potassium supplements for the week before the test if your levels are low.

What does the test involve?

You will need to attend the hospital for approximately 6 hours for this test. The nurse will explain the test, place a cannula (a small tube for the infusion and for blood samples) into a vein and take an initial blood sample for aldosterone, renin, urea and electrolytes.

You will need to be seated for 30 minutes before the saline infusion can begin. The nurse will take baseline observations - blood pressure, oxygen saturations and heart rate.

Two litres of 0.9% saline will then be given intravenously over 4 hours. Your observations will be monitored every 30 minutes during this infusion.

Once the infusion is complete, another blood sample will be taken for aldosterone, renin, urea and electrolytes. Then the cannula will be removed and you can go home.

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