Patient information



Oral Glucose Suppresion Test – for Acromegaly

What is an Oral Glucose Suppression Test?

This test is performed over a two- and half-hour period. This is to establish whether your pituitary gland (often called the master gland, a pea size gland situated in a bony hollow just behind the nose bridge) is producing too much growth hormone.

Why would I need this procedure?

Your endocrinologist may have noted an elevation of your IGF-1 (Insulin-like growth factor 1) in your bloodstream. IGF-1 is secreted by your liver through a stimulation of GH (Growth Hormone) from your pituitary gland. IGF-1 is what causes tissue growth in your body.

What are the symptoms that have led to me having this procedure?

You may have any of the following signs and symptoms:

- Increase in shoe size, gloves, hats, shirt collar, over months or years
- Headaches
- Joint pains
- Facial pain changes to bite as the jaw moves forward and/or spacing of teeth may change
- Sweating
- Increased weight
- Mood swings
- Tongue grows
- Speech differences i.e., deeper voice, with possible lisping sound
- Sleep apnoea (snoring with episodes of interrupted catching of breath).

What are the alternatives?

There are no recommended alternatives to this test.

What are the potential risks and side effects?

There is a risk of allergic reaction to this test, although this is extremely rare. Please tell the endocrine team of any previous allergic reactions you have had.

If you have diabetes, this test might cause a temporary rise in your blood glucose levels after the test for about a day.

Please inform the endocrine team if you have been diagnosed with reactive hypoglycaemia. If you are pregnant or think you may be, please let your specialist endocrine nurse know prior to your appointment on the number below.

A cannula (tiny plastic tube) will be inserted into a vein in your arm or hand using a needle. The cannulation process is similar to that of a blood test.

Associated risks with cannulation or a blood test may include:

- multiple punctures to locate veins
- bleeding from puncture site
- bruising
- haematoma (blood build up under the skin)
- · fainting or feeling lightheaded
- infection (a slight risk any time the skin is broken)
- phlebitis (inflammation of the vein)

Keeping pressure on the puncture site for a few minutes after the needle is removed will help to reduce bruising

What are the expected benefits of having the test?

This test will help your doctor find out if you have a condition called acromegaly – an excess secretion of growth hormones causing abnormal growth on some parts of your body which may include enlargement of your lips, nose and tongue.

Preparation for your test

Please come fasting (nothing to eat or drink from midnight except sips of water)

Please avoid smoking on the day of the test.

You can take all your normal medications as usual, but please bring them with you for us to document. You will be offered a drink and something to eat at the end of the test.

If you have diabetes, please let us know before you attend for this test.

What happens during the test?

You should expect your stay at the hospital to last about three and half hours. You may wish to bring a book or magazine to read. You may bring someone to stay with you during the test but there is not enough space for more than one person.

During the test, blood samples will be taken at half hourly intervals and to allow this to happen easily, with the minimum of discomfort for you, we will be inserting a small tube (a cannula) into a vein in your arm at the start of the test. Baseline samples of blood to measure glucose (sugar) levels and growth hormone levels are taken. You will be given a drink of chilled glucose solution, which you will be asked to drink within ten minutes. Following this, further samples of blood are taken over a two-hour period.

Will I have an anaesthetic?

No

How will I feel afterwards?

This test should not affect your normal activities of daily living.

How long will I be in hospital?

You will be in the hospital for approximately 3 hours for the duration of the test.

What should I do when I go home?

In most cases, patients resume their normal activities.

How soon will I be able to resume normal activities?

In most cases, this test should not affect your normal activities.

Will I have to come back to hospital?

Depending on the test results, further tests may be required.

When can I return to work?

There are no work restrictions involved for this test as in most cases, patients resume their normal activities after the test

Consent

Although you consent for this test, you may at any time withdraw such consent. Please discuss this with your endocrine team.

Sources of information

For queries concerning this leaflet or your procedure please contact:

Endocrine Team at ESHT

Telephone: 0300 131 5910 - EDGH and CQ

Opening Hours: 8am – 4pm (Monday – Friday except Bank Holidays)

Important information

This patient information is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4731 (direct dial) or by email at: esh-tr.patientexperience@nhs.net

Hand hygiene

The trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4434 Email: esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? and ask your nurse or doctor.	Please list below

Reference

The following clinicians have been consulted and agreed this patient information:

Consultant Endocrinologists (ESHT):

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Endocrine Specialist Nursing Team (ESHT):

Mrs Maria Ravelo (Senior Endocrine Specialist Nurse) Miss Angel Johnson (Endocrine Specialist Nurse) Mrs Debby Gordon (Endocrine Assistant Practitioner)

The Endocrinology Department has agreed this patient information leaflet.

Next review date: February 2025

Responsible clinician/authors: Mrs Maria Ravelo (Senior ESN)

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