

FELINE DEXAMETHASONE SUPPRESSION TEST

SAMPLE REQUIRED:
Serum (0.5 mL) or
Clotted blood (1.5 mL)

BLOOD TUBE REQUIRED:
Plain (red top) tube or Gel (yellow top) tube

INDICATIONS:

To assist in the diagnosis of hyperadrenocorticism (Cushing's disease) in cats.

PROTOCOL:

- If glucocorticoids have been administered recently, refer to Notes below.
- Maintain the cat in a stress free environment, especially in the 72 hours prior to testing.
- 8 am: Collect a resting blood sample and label it "0 h".
- 8 am: Administer dexamethasone sodium phosphate at 0.1 mg/kg IV.
- 12 noon: Collect a 4-hour post-dexamethasone blood sample and label it "4 h".
- 4 pm: Collect an 8-hour post-dexamethasone blood sample and label it "8 h".
- Store samples at 4°C and submit all 3 samples together to the laboratory. If transport to the laboratory will be delayed (> 12 hours), the samples should be centrifuged and the serum separated.
- On the laboratory submission form, list samples and collection intervals.

Notes:

- The time of day is not critical but serves as a guide.
- The dexamethasone dose rate is 10x higher in cats than dogs.
- Specific testing for hyperadrenocorticism should not be performed in unwell or significantly stressed animals, which may yield false positive results in adrenal function tests. In potentially hyperadrenocorticoid cats with significant intercurrent disease such as diabetic ketoacidosis or pancreatitis, adrenal function testing should be delayed until intercurrent disease is controlled.
- Any form of corticosteroid therapy may interfere with adrenal function tests, by (a) cross-reacting in the cortisol assay (**except for** dexamethasone), or (b) affecting the pituitary/adrenal axis via suppression of ACTH production. As a guide, the minimum periods for which corticosteroid therapy should be withheld before a LDDS test are:

Injectable (short acting)	7 days (48 h if dexamethasone)
Oral	2 weeks
Topical	2 weeks
Injectable (depot)	2 months