

For More Information

Please contact the University of Maryland
Hospital for Children at **410-706-2443**
or **1-800-492-5538**.

You may also visit umm.edu/pediatrics.

SWEAT TESTING FOR **Cystic Fibrosis**

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Cystic Fibrosis

Cystic Fibrosis (CF) is a **chronic disease that causes the body to produce extremely thick and sticky mucus** that can cause harm to the body's respiratory system (the lungs), digestive system (the pancreas, intestines and liver), and reproductive system. The symptoms of cystic fibrosis can be mild or severe and can include poor weight gain, pneumonia, wheezing or diarrhea. In very young infants there may be few if any symptoms at all.

CF is a genetic condition. Each year, about 1000 children are diagnosed with CF. An estimated 12 million Americans have one copy of an altered gene for CF, and most of these people do not know they are carriers. If both parents are carriers, there is a 25% chance their infant will have CF. In recent years, some pregnant women have chosen to be tested to see if they are carriers. However, the carrier screening test does not pick up all carriers, and a baby can be born with CF even if one parent had a normal screening result.

NEWBORN SCREENING

Shortly after birth, babies in the state of Maryland are tested for a variety of metabolic and genetic disorders. This newborn screening testing panel now includes cystic fibrosis. About 95% of babies with CF have a positive newborn screen, but not all will. If an infant's newborn screen tests positive for possible CF, the family will be notified by the state and the child will then need to have a "sweat test" to determine if he or she does have CF. About 10% of those children who test positive on the newborn screen have CF. So a positive test does not mean the baby has CF, but it is a reason to have the sweat test done as soon as possible.

SWEAT TESTING

Sweat testing is used to diagnose CF. The sweat test is **a painless, non-invasive procedure** that includes collecting sweat from a baby and then testing its salt content. The test can usually be performed in about one to two hours. No preparation is needed for the test except that no creams, powders or lotions should be applied to the child's skin for 24 hours prior to the test. A special machine is used to help generate sweat on a baby's arm or leg. The sweat is then collected and sent to the laboratory for testing.

By the next business day, physicians from the University of Maryland Hospital for Children will contact the referring physician with the test result and the referring physician will then contact the family.

Sweat testing should be done at a special, accredited location, experienced in doing this test in very young children. The University of Maryland Hospital for Children is recognized by the Maryland Dept. of Health and Mental Hygiene as a referral site for sweat testing.

A POSITIVE DIAGNOSIS

For children who are diagnosed with CF, **the University of Maryland Hospital for Children offers high-quality specialty care** provided by a comprehensive team that includes physicians, nurses, nutritionists and genetic counselors. Following a positive sweat test, a child can be seen within 72 hours by the pediatric pulmonology and pediatric gastroenterology teams.

An early diagnosis of CF is an important first step in getting these children the proper therapy they need for healthier and happier lives.