

Fecal Occult Blood Test

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DESCRIPTION

A test for fecal occult blood searches for blood in feces. It can be an indication of a problem in the digestive system related to development, or polyp, or disease in the colon or rectum. The fecal occult blood test requires the assortment of 3 small feces tests. Typically the samples are a touch of stool gathered on the end of an applicator. The feces tests ought to be required one day separated, in light of the fact that colon malignancies might drain occasionally, rather than frequently. As small quantities of blood typically show up in the stool, tests for occult blood are intended to identify large amounts of blood. A positive fecal occult blood test implies that blood has been found in the stool. The primary care physician should decide the cause of bleeding, either by colonoscopy or by doing an assessment to decide whether the draining is from stomach or small intestine. A negative test outcome implies that no blood was found in the feces test during the testing time frame. Perpetual follow up with physician's advice and recommendations for regular screening is important. The leakage of blood in the feces can be due to various conditions in digestive system such as ulcers, colitis, polyps, hemorrhoids, and diverticulosis; in the serious stage the bleeding can be due to colorectal cancer and intestinal perforations. A fecal occult blood test is noninvasive tests that can be performed at home at ideal timing. There are two fundamental types of fecal occult blood tests: the Immunochemical Method (iFOBT or FIT) and Guaiac Smear Method (gFOBT). Certain food varieties and medications might influence the after effects of a Guaiac Smear Method (gFOBT) test. The health care provider may ask to avoid:

- Nonsteroidal anti-inflammatory drugs (NSAIDs) like naproxen, ibuprofen, etc for seven days preceding the test. In the event that you take ibuprofen for heart issues, converse with your medical care provider prior to halting medication.
- Acetaminophen can be used during this period, however prior consulting medical care provider is important.
- Excess of 250 mg of vitamin C every day from supplements, fruit juices can be taken for seven days before the test. Vitamin

C can influence the synthetic compounds in the test and cause an adverse outcome regardless of whether blood is present or absent.

- Red meat, like hamburger, sheep, and pork, for three days preceding the test. Traces of blood in these meats might cause a pseudo positive outcome. There are no exceptional arrangements or dietary limitations for a fecal immunochemical test (FIT).

Benzidine-based tests (e.g., Hematest) have been practically disposed from use due to their inordinate affectability, which brings about a high recurrence of pseudo positive responses, just as the cancer-causing nature of the reagent. The current standard is the Hemocult slide test (Smith-Kline Diagnostics), a guaiac-based test, in which one side of a guaiac-impregnated paper is smeared with stool and tried by expansion of a couple of drops of the developer solution i.e. stabilized peroxide reagent to the contrary side of the paper. In screening programs, the patient recover stool from the toilet bowl utilizing a wooden tool spreads a little part onto two windows of the card, and closes the cover. This is done on three progressive days, and the cards are sent for testing, as there is little degradation of receptive hemes in the dry, smeared specimen over a time of multi week (less than 15% of tests). Appearance of irregular blue tone, of any intensity, inside 30 seconds, is viewed as a positive test; whereas greenish tones are due to oxidation of feces bilirubin to biliverdin, ought not to be perused as sure. Positive and negative control spots are remembered for the card to be certain that the reagents are responsive with substrate and not receptive without even a trace of substrate. It has been discovered that diffusion of the hematin from the smeared stool into the paper is significant, so the response can be upgraded by wetting the covered side of the paper with a couple of drops of water a few minutes prior to adding the developer. However, such rehydration of samples additionally builds the pace of pseudo positive responses from plant peroxidases and meat hemes in the regimen, and isn't prescribed except if there is rigid adherence to a limited restricted diet.

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