

ADRENAL INSUFFICIENCY

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ADRENAL CRISIS - PATHWAY OF EVENTS

Life Sustaining Cortisol replacement therapy needed with either:-
Hydrocortisone, Prednisolone or Dexamethasone



Defective production of

Vital Aldosterone replacement therapy with Fludrocortisone is needed to maintain a proper balance of body salts and fluid i.e. electrolytes and blood volume

GLUCOCORTICOIDS

MINERALOCORTICOIDS

CORTISOL
IMPAIRED OR NO PRODUCTION

ALDOSTERONE
IMPAIRED OR NO PRODUCTION

LIVER
Function decreases

Nausea and vomiting
Diarrhoea and cramps

KIDNEY
Water and Sodium loss

Hypoglycaemia
Low blood glucose

Low body fluid volume



Hyponatremia
Low sodium level

Seizures, convulsions
Loss of consciousness

Low Blood Pressure

Hyperkalaemia
Increase in potassium

SHOCK

HEART
Irregular output

BRAIN COMA
ORGAN FAILURE

DEATH

CARDIAC ARREST

Lifesaving Bolus of Solu-cortef urgently needed by intramuscular injection or IV.

UK standard recommendation

Hydrocortisone Emergency Bolus Dose

Dose (mgs)	Age (years)
25	0 – 1
50	1 – 5
100	over 5

25

50

100

Glucose as intravenous infusion also needed

Fludrocortisone is more of a problem as patient may not be able to swallow so it is better to concentrate more on IV fluids and close monitoring of electrolytes if this unwell

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