

Adrenal Crisis Alert

EMERGENCY ROOM TREATMENT PROTOCOL

For treatment of a suspected adrenal crisis:

Initiate treatment immediately.

1. Start IV if available, hydrate with isotonic saline solution and draw blood sample for Lab. If the diagnosis of adrenal insufficiency is established, blood sample is not required.
2. If IV is available, administer hydrocortisone 100 mg IV bolus. If no IV, administer hydrocortisone 100 mg IM or SC.
3. Continue hydrocortisone 200 mg over 24 hours, with either continuous IV infusion, or with 50 mg boluses IV, IM or SC every 6-8 hours until oral medication is tolerated.

ADDISON'S DISEASE DIAGNOSIS DURING AN EMERGENCY

Measurement of blood ACTH and cortisol during the crisis, BEFORE GLUCOCORTICOIDS ARE GIVEN, is enough to make a preliminary diagnosis.

Low serum sodium and glucose, and high potassium are also usually present at the time of an adrenal crisis. Once the crisis is controlled, an ACTH (cosyntropin) stimulation test can be performed to obtain specific diagnosis.

Do not delay treatment while waiting for laboratory confirmation.

Signs & Symptoms:

Acute Adrenal Failure

- Orthostatic Hypotension
- Severe vomiting/diarrhea
- Severe dehydration
- Sudden penetrating pain in lower back, abdomen or legs
- Loss of consciousness

Chronic Symptoms & Signs of Addison's Disease

- Hyperpigmentation of exposed and non-exposed parts of the body
- Extreme weakness
- Salt craving
- Unintentional weight loss
- Loss of appetite
- Chronic diarrhea
- Nausea/vomiting

Provided with compliments by: The National Adrenal Diseases Foundation, a non-profit organization providing information, education and support to all persons affected by adrenal disease.

Additional Resources:

- <https://tinyurl.com/endocrine-guidelines-PAI>
- [Adrenal Crisis- Stat Pearls - NCBI Bookshelf \(nih.gov\)](#)
- [Table. Treatment / Management - Stat Pearls - NCBI Bookshelf \(nih.gov\)](#)