ADRENAL CRISIS CARE LETTER FOR EMERGENCY STAFF

Dear Adrenal Insufficient (AI) Patient or AI Caregivers/Guardians:

The following letter and information sheets are provided to help provide awareness in your local medical community that you or your loved one lives with Addison’s disease or adrenal insufficiency. While these medical professionals may be familiar with Addison’s disease, we feel that it is helpful for Emergency Room and other medical staff to have information close at hand so they know how to treat a person with this rare disorder.

- The following NADF Emergency Care letter and instruction sheets can be personalized and distributed to emergency care facilities.

- We also suggest that copies be kept in purses/wallets, cars, work desks and at home. These sheets could help emergency healthcare providers save your or your loved one’s life.

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NADF does not engage in the practice of medicine. It is not a medical authority, nor does it claim to have medical knowledge. In all cases, NADF recommends that you consult your own physician regarding any course of treatment or medication.
Dear Emergency Personnel,

You are receiving this letter because a person in your area of service lives with Addison’s disease or adrenal insufficiency. While you are likely familiar with Addison’s disease, we feel that it is helpful for Emergency Room staff to have information on how to treat a person with this rare disorder close at hand when they present in the E.R. Therefore, we are providing the enclosed sheet on “How to Treat an Addisonian in an Emergency Situation” as prepared by the National Adrenal Diseases Foundation (NADF) and its medical advisors. We hope that you will share this information with all of your staff.

For further information regarding Addison’s disease or any other adrenal disease, please contact the National Adrenal Diseases Foundation using the contact information listed on this letterhead. For further information regarding the person in your area living with adrenal insufficiency or their needs, please use the information they have provided on the enclosed sheet.

Thank you for your help in educating your emergency personnel.

IMPORTANT EMERGENCY INFORMATION

The person carrying this emergency information sheet suffers from Addison’s disease or adrenal insufficiency. Appropriate care of such a person in a medical emergency is critical to their survival, as their body does not produce the stress hormone cortisol. This sheet and the educational information below are provided as a service by the National Adrenal Diseases Foundation and is edited for content by board certified medical endocrinologist, Paul Margulies.

WHAT IS ADDISON’S DISEASE?

Addison’s disease is a severe or total deficiency of the hormones made in the adrenal cortex. Classical Addison’s disease results from a loss of both cortisol and aldosterone secretion due to the near total or total destruction of both adrenal glands. This condition is also called primary adrenal insufficiency. If ACTH is deficient, there will not be enough cortisol produced, although aldosterone may remain adequate. This is secondary adrenal insufficiency, which is distinctly different, but similar to Addison’s disease, since both include a loss of cortisol secretion.

Sincerely,

Kalina Warren
Executive Director
NADF

Paul Margulies, MD
Medical Director
NADF
SYMPTOMS OF AN ADDISONIAN CRISIS or UNDIAGNOSED ADDISON’S DISEASE

Symptoms may include:
- low blood pressure (possibly with accompanying black outs)
- severe fatigue
- nausea
- vomiting
- diarrhea
- stomach pain
- extreme weight loss or appearance of anorexia
- unexplained fever
- salt craving
- darkened skin (especially mucous membranes and pressure points)
- confusion

Conditions which must be treated immediately:
- severe injury of any type
- blood loss
- fluid and/or electrolyte loss
- infection
- severe vomiting
- diarrhea

Treatment protocol prior to Emergency Room arrival:
- Give Hydrocortisone 100 mg. IM (intramuscularly) in buttocck or upper thigh.
- Patient then should be immediately admitted to the nearest Emergency Room, where adrenal crisis treatment should begin promptly.
- If transportation to emergency medical facility is impossible, treat patient on site as listed below.

Protocol for treatment of adrenal crisis in Emergency Room:
1) IV hydrocortisone
2) Administer IV isotonic saline
3) Continue IV hydrocortisone until oral medication is tolerated

Patient’s Name ________________________________________________________________

Call Dr. _____________________________ Office Phone # ________________________

Emergency # _______________________________________________________________

Patient’s Address _____________________________________________________________

City __________________________ State __________ Zip ____________