

# QUICK REFERENCE FOR THE MOST COMMON SYMPTOMS OF ADRENAL HORMONE REPLACEMENT EXCESS AND DEFICIENCY

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**Most common symptoms of  
glucocorticoid (cortisol) deficiency:**

Severe fatigue, weakness, weight loss, hyperpigmentation,  
nausea, loss of appetite.

**Most common symptoms of  
glucocorticoid (cortisol) excess:**

Weight gain, fatigue, easy bruising, muscle weakness,  
redness in the face, pink stretch marks, mood swings,  
inappropriate hunger.

**Most common symptoms of  
mineralocorticoid (fludrocortisone  
acetate) deficiency:**

Reduced blood pressure, nausea (sometimes to the point of  
vomiting), dizziness (sometimes to the point of passing out),  
salt craving, muscle cramps.

**Most common symptoms of  
mineralocorticoid (fludrocortisone  
acetate) excess:**

Hypertension, ankle swelling, exertion headache.

## **ADRENAL HORMONE REPLACEMENT PROTOCOL**

In treating adrenal insufficiency, NADF would like to stress its position that all hydrocortisone and fludrocortisone acetate dosing should be personalized, with the following dosage ranges:

- Hydrocortisone 15 mg to 40 mg
- average dose 20 to 30 mg

**PLEASE NOTE:** Hydrocortisone dosing should be given in divided doses, with most on awakening and the remainder in one or two doses at midday or afternoon, to mimic the normal daily cycle.

- Fludrocortisone Acetate 0 to 0.4 mg
- average dose 0.05 to 0.2 mg

To manage Addison's Disease (adrenal insufficiency), patients should learn how to adjust cortisol hormone replacement medication (Cortef®/hydrocortisone/cortisone acetate/prednisone) to their situation's need (with their physician's oversight).

The current philosophy is to stay as low as possible with cortisol hormone replacement dose, BUT STILL FEEL COMFORTABLE, while keeping oneself out of adrenal crisis.

Ingesting more glucocorticoid than your body needs can cause cataracts, glaucoma, osteoporosis and reactive diabetes.



***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.***