

FACT SHEET

ADRENAL CRISIS: BE AWARE OF THE SYMPTOMS AND REACT QUICKLY

An adrenal crisis is caused by an extreme or sudden physical or emotional stress such as surgery, trauma, accident or an acute infection.

Between 5% to 10% of all people with diagnosed and treated adrenal insufficiency will experience at least one adrenal crisis per year. There is an uneven distribution in the occurrence of crises, as some people do not experience a single adrenal crisis for decades, while others do so recurrently. The incidence of an adrenal crisis increases with age, especially above 50 years of age.

The **most frequent causes** of adrenal crises in people with already diagnosed chronic adrenal insufficiency are **infections**, particularly gastroenteritis ("stomach flu" with diarrhoea and vomiting), **pneumonia / lower respiratory tract infections** and **urinary tract infections**. In addition, surgery, strenuous exercise, emotional stress, dehydration and accidents can contribute and/or lead to an adrenal crisis. An adrenal crisis usually takes several hours to develop but can occur more quickly.

Be prepared to deal with the onset of an adrenal crisis:

- Recognise the symptoms of the beginning of an adrenal crisis
 - Severe drop in blood pressure causing dizziness, light-headedness and possible loss of consciousness
 - Nausea and vomiting
 - Confusion and lethargy
 - Muscle weakness, joint pains, cramps, headaches
- Follow the stress dosing guidelines
- Should your condition rapidly decline (for instance if you cannot keep down your tablets due to vomiting), do not wait – immediately give yourself an emergency injection of hydrocortisone. Then call an ambulance or present to the nearest A&E department. If you are unsure whether or not to inject, it is better to err on the side of caution rather than risk an adrenal crisis. One injection won't harm you and may well save your life.

To ensure that emergency personnel recognise and verify your condition as quickly as possible:

- Wear a medical ID bracelet or necklace
- Carry a medical treatment letter from the AADAI and your endocrinologist
- Carry an emergency kit with injectable hydrocortisone, syringes and needles

In some states of Australia, ambulances carry injectable hydrocortisone while in other states paramedics will inject your own labelled hydrocortisone. Please check with your state ambulance service or members can find up to date information on the website www.addisons.org.au