

Adrenal Crisis

Assessment

Adrenal crisis occurs in susceptible patients whose ability to synthesise cortisol is impaired.

Signs and symptoms include:

- ✓ Nausea, vomiting and diarrhoea.
- ✓ Abdominal pain.
- ✓ Fever.
- ✓ Loss of appetite/anorexia.
- ✓ Mottled appearance, peripherally shut down.
- ✓ Lethargy, fatigue and weakness.
- ✓ Tachycardia.
- ✓ Light headedness/dizziness.
- ✓ Hypoglycaemia.
- ✓ Hyperkalaemia.
- ✓ Hypotension, exacerbated by standing.

Consider adrenal crisis only in patients presenting with at least one of each of:

1. A diagnosed adrenal insufficiency condition:
 - » Addison's disease
 - » Congenital adrenal hyperplasia
 - » Suprasellar tumours or brain injuries.
and
2. The patient is currently experiencing:
 - » Infection
 - » Trauma
 - » Stress response (e.g. dehydration, AMI, intense physical exertion).
and
3. The patient is:
 - » Hypoperfused and/or

Adrenal Crisis

» Decreased LOC.

Management

- » IV/IO fluids for hypoperfusion as per [CMG 14 Shock and Hypoperfusion: Distributive Shock](#).
- » **ICP:** Hydrocortisone.
- » Treat hyperkalaemia as per [CMG 27 Hyperkalaemia](#).
- » Treat hypoglycaemia as per [CMG 10 Diabetic Emergencies](#).