

# 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

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» 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.](#)