

Addisonian crisis is an endocrine emergency triggered by an acute episode of adrenal insufficiency.

Common Causes of Adrenal Crisis

- Progression of undiagnosed adrenal insufficiency
- Known adrenal insufficiency complicated by a stressful event and failure to adjust chronic steroid dose
- Sudden discontinuation of long-term systemic corticosteroid therapy
- Chronic infection, such as tuberculosis, leading to infectious adrenalitis

Nursing Considerations

- Maintain suspicion for adrenal crisis in any client presenting in a critically ill state with signs of shock.
- Collect a thorough history, including:
 - History of Addison disease
 - History of chronic steroid therapy
 - Recent illness, injury, or stressor
 - Family or personal history of autoimmune conditions such as hypothyroidism or diabetes mellitus
- Efficiently facilitate diagnostic lab work, blood cultures, ECG, and imaging as ordered.
- Definitive diagnosis is not always possible in the moment of acute adrenal crisis. If suspected, treatment should not be delayed.

Treatment

- Fluid resuscitation normal saline or 5% dextrose in NS, in the setting of hypoglycemia
- IV glucocorticoid replacement

If caused by adrenal insufficiency, symptoms should resolve quickly with fluid replacement and IV steroid administration.

NOTES



