

腎上腺危症

Adrenal crisis

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Adrenal crisis is a life-threatening emergency partly explaining the increased mortality of patients with adrenal insufficiency. The risk of adrenal crisis occurring in a patient with adrenal insufficiency has been estimated to be approximately 5–10 adrenal crises/100 patient years and suggested a mortality rate from adrenal crisis of 0.5/100 patient years. Patients with adrenal crisis typically present with hypotension or hypovolemic shock, but other symptoms and signs such as weakness, anorexia, nausea, abdominal pain, fever, vomiting, fatigue, electrolyte abnormalities, confusion, coma, and marked laboratory abnormalities can also occur. Since many such situations are of rapid onset, concepts that allow for quick response to emergencies are particularly important. Gastrointestinal illness and other infections are the major precipitating causes of adrenal crisis. Treatment of adrenal crisis is simple and highly effective consisting of i.v. hydrocortisone therapy and normal saline replacement. Prevention of adrenal crisis requires appropriate hydrocortisone dose adjustments to stressful situations such as major surgery or infection. Patient education is a key for such dose adjustments. Optimal education for patients and relatives, improved awareness on the part of health professionals and the development of easy-to-use drugs such as parenteral hydrocortisone self-administration for acute therapy are necessary