Introduction

- You have been asked by the Doctor or Nurse to take ‘Steroid’ tablets as your body is unable to make enough of its own steroid.

- It is very important that you take these tablets exactly as they are prescribed.

- These tablets should **never** be stopped abruptly as this may make you feel very unwell and it can be very dangerous.

- When you are unwell, it is important to increase your tablets to help your body cope with your illness. Please refer to ‘Recommendations for change in dose’

- It is advisable for a close relative or friend to also be aware of what to do if you are unwell.

- Please take time to read the enclosed information.

- Any Questions, please call:

  **The Endocrine Investigation Unit on 020 8725 0923 / 0929.**

Hydrocortisone

**Why do I need to take Hydrocortisone?**
Your body needs a steroid called cortisol to survive. It helps you cope with physical and emotional stress. It helps release glucose from your body cells for energy and it also helps to keep your blood pressure normal. Hydrocortisone tablets replaces the body’s cortisol, which is not being produced by your body.

**What side effects are there?**
As with other medicines it has some side effects. The main side effects are, thinning of your bones and weight gain. However, you will be carefully monitored so that you have the least amount needed by your body.

**How often do I need to take it?**
It is taken as a tablet, usually two to three times a day.

**What happens if I do not take it?**
It is very important to take your tablets exactly as the doctor or nurse has advised. If you do not take your tablets after several hours you may feel very poorly and will need to go straight to casualty.

**What happens if I am unable to take the tablets when I am ill?**
You will need to either give yourself an emergency injection or go straight to the casualty department. Please tell them you are dependent on steroids. Always carry your blue steroid card with you.
Addisonion crisis

When you are ill, have an accident or a physical/emotional stress, the body requires more cortisol to cope. An Addisonion crisis occurs when your body does not have enough cortisol and cannot cope. See below:

Causes of an Adrenal crisis
- Severe physical / emotional shock
- Severe infection
- Severe dehydration

Signs and symptoms
- Extreme weakness
- Confusion
- Dizziness
- Nausea/Vomiting
- Low blood pressure
- Abdominal tenderness
- Drowsiness
- Feeling very cold
- Severe headache

If you get any of these symptoms, please take extra hydrocortisone. See ‘Recommendations for change in dose’

<table>
<thead>
<tr>
<th>Illness or procedure</th>
<th>Dose adjustment</th>
<th>Increase for</th>
<th>When do I seek help?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cold – no fever</td>
<td>No</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Fever, flu</td>
<td>Double dose</td>
<td>Duration of fever</td>
<td>See GP if still unwell after 48 hrs</td>
</tr>
<tr>
<td>Vomiting, diarrhoea/severe illness</td>
<td>Double dose until emergency injection given</td>
<td>Resume on usual dose when well again</td>
<td>Phone GP, go to A&amp;E. Administer injection (yourself, relative or GP)</td>
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<tr>
<td>Minor operation e.g Tooth extraction</td>
<td>20mgs before procedure</td>
<td>Resume usual dose after procedure</td>
<td>See GP if still unwell</td>
</tr>
<tr>
<td>Small operation (Hernia)</td>
<td>100mg injection every 6 hrs for 24hrs</td>
<td>Resume usual dose afterwards</td>
<td>See GP if still unwell</td>
</tr>
<tr>
<td>Major operation</td>
<td>100mgs Hydrocortisone at time of anaesthet.</td>
<td>Resume usual dose afterwards</td>
<td>Tell the surgeon and anaesthetist that you take hydrocortisone before the operation.</td>
</tr>
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<tr>
<td>Colonoscopy or Barium enema</td>
<td>Double usual dose the day before. Usual dose on day of procedure. Colonoscopy only- Hydrocortisone injection given by Dr.</td>
<td>Resume usual dose on third day</td>
<td>Drink plenty of fluids. Tell Dr that you are taking hydrocortisone prior to procedure</td>
</tr>
<tr>
<td>Severe shock e.g Accident or Bereavement.</td>
<td>Hydrocortisone injection or double usual dose if able to.</td>
<td>Consult GP or Endocrinologist for advice</td>
<td>If you feel unwell, go to your GP or A&amp;E.</td>
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<tr>
<td>Long haul flight</td>
<td>Double usual dose on day of flight.</td>
<td>Take usual dose every 6-8 hours until you arrive at your destination</td>
<td>If unsure, contact the Endocrine Team on 020 8725 0923</td>
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</table>

Taken with permission from the “Pituitary Foundation Hydrocortisone Advice for Patients©” leaflet

How to give an emergency injection of hydrocortisone

Powder Version: Solo-Cortef (Part 1 of 2)

- Wash and dry your hands.
- Snap open the sterile water – use a small piece of tissue to protect your fingers.

- Attach the green needle to the syringe and remove the cover.
- Withdraw 2ml of sterile water into the syringe.

- Remove the cap off the vial of hydrocortisone powder.
-Inject the water into the vial of powder.
How to give an emergency injection of hydrocortisone.

Powder Version: Solo-Cortef (Part 2 of 2)

- Swirl the vial until all the powder is mixed with the water.
- Withdraw the contents of the vial into the syringe.
- Pull the needle and syringe of the vial.
- Exchange the green needle for the blue needle. Use an alcohol wipe to clean the bare skin at injection site – right or left upper thigh.
- Remove the needle cover and hold the syringe between your thumb and index finger.
- Stretch the skin slightly and push the needle in the selected site with a steady motion.
- Push plunger down so that all the liquid is injected.
- Grasp syringe and pull needle out of the thigh.
- Apply pressure to the injection site with a clean tissue for 2 minutes.

Liquid Version: Efcortesol (Part 1 of 2)

- Wash and dry your hands.
- Break open the ampoule at the dot, using a small piece of tissue to protect your fingers. Push firmly to attach the needle to the syringe and remove the cover.
- Hold the ampoule with your non-dominant hand and draw up the solution into the syringe with your other hand.
- Expel any air by pressing the plunger until a drop of liquid forms at the end of the needle.
- Remove the needle cover and hold the syringe between your thumb and index finger.
How to give an emergency injection of hydrocortisone

Liquid Version: Efcor tesol (Part 2 of 2)

• If you are giving yourself the injection, you need to inject yourself on the same side, eg: right handed – right thigh.

  • Stretch the skin slightly and push the needle in the selected site with a steady motion.
  • Push plunger down so that all the liquid is injected.

• Grasp syringe and pull needle out of the thigh.
• Apply pressure to the injection site with a clean tissue for 2 minutes.

Letter for Airlines

Name: ____________________________
Address: __________________________

Passport No: ______________________

I have a medical condition (adrenal failure) that I need to take steroid tablets for. In an emergency or if I am unwell, I may need to take a Hydrocortisone injection urgently; therefore I will need to take this onto the plane with me in case I need it.

Hospital Stamp
Support Groups & Further Information

Addisons Disease Self-Help Group
PO Box 45445
Sydenham
London
SE26 6YR
Web: www.addisons.org.uk

Pituitary Foundation
PO Box 1944
Bristol
BS99 2UB
Tel: 0845 450 0375
Web: www.pituitary.org.uk

For further advice please call
Endocrine Clinical Nurse Specialists
The Endocrine Investigation Unit
Tel: 020 8725 0923 / 020 8725 0929

Alternatively contact Endocrine Registrar (if it’s out of office hours) on 020 8672 1255 Bleep 7778
Or NHS Direct on 0845 4647

Important Contact Details

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<tr>
<td>Address</td>
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<tr>
<td>NOK Name</td>
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<td>NOK Tel:</td>
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<tr>
<td>Medication</td>
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<tr>
<td>Allergies</td>
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