

Division of Endocrinology

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Stress Dose Instructions

Intended for patients taking glucocorticoid hormones, often called "steroids", on a routine and daily basis. Steroids may include oral medications such as hydrocortisone (cortef), prednisone, dexamethasone (decadron) or similar compounds. These steroid medications may suppress the ability of patient's own adrenal glands to respond to stress normally, and being unable to put out enough cortisol (the glucocorticoid steroid hormone our body makes). In cases of marked stress, such as illness-especially with high fever, or surgery, if our body cannot make enough cortisol, we will need to take extra **stress doses** of the steroid medication, to avoid severe consequences. If stress doses are not taken, the child may initially have mild symptoms such as lack of energy or feeling weak, progressing to lethargy, vomiting, or eventually shock and in rare cases even death. It is best to **inform your doctor** when your child is taking stress dosing.

The following instructions are also intended for patients who took high-dose steroids for over a week, or used steroids chronically at lower or "normal" doses for a few weeks or longer, sometimes within the last few months, since their adrenal glands may still be suppressed. Consult with your endocrinologist about it, to see if this applies.

In cases of illness with fever:

- 1. For fever *up to* 103 degrees, double-up on regular steroid dose. For example, if your child usually takes 5 mg cortef twice daily, take 10 mg twice daily as stress dosing.
- 2. For fever *over* 103 degrees, use triple dosing. Alternatively, if the fever is less than 103 but the child is lethargic, use triple doses. In both cases, alert your doctor
- 3. If your child is sick, without any fever, but is weak, consider double dosing. Please consult with your endocrinologist whether your child needs it, and for how long.

In cases of illness with vomiting and/or diarrhea, contact your doctor right away:

- 1. There is always risk of dehydration from loss of fluids
- 2. There is a risk your child may not retain (vomiting) or absorb (diarrhea) the oral steroid medication taken

*** For these situations, your child will benefit from getting an injection of hydrocortisone into the muscle (IM). Such a shot can be given at home before bringing the child for medical attention, usually an emergency room (ER), or given once in the ER. In the ER your child will likely need some hydration with fluids into the vein (IV).

The dose of the IM hydrocortisone injection is similar to the initial dose given at start of surgery:

- For children up to age 3 years: 25 mg; 3-10 years: 50 mg; and over age 10 years old, between 50- 100 mg, depending on the child's size.
- For children undergoing elective surgery, have the anesthesiologist or surgeon discuss with the endocrinologist, the stress dosing needed before, during and after the surgery, ahead of the surgery. This applies also to extensive or significant dental procedures.