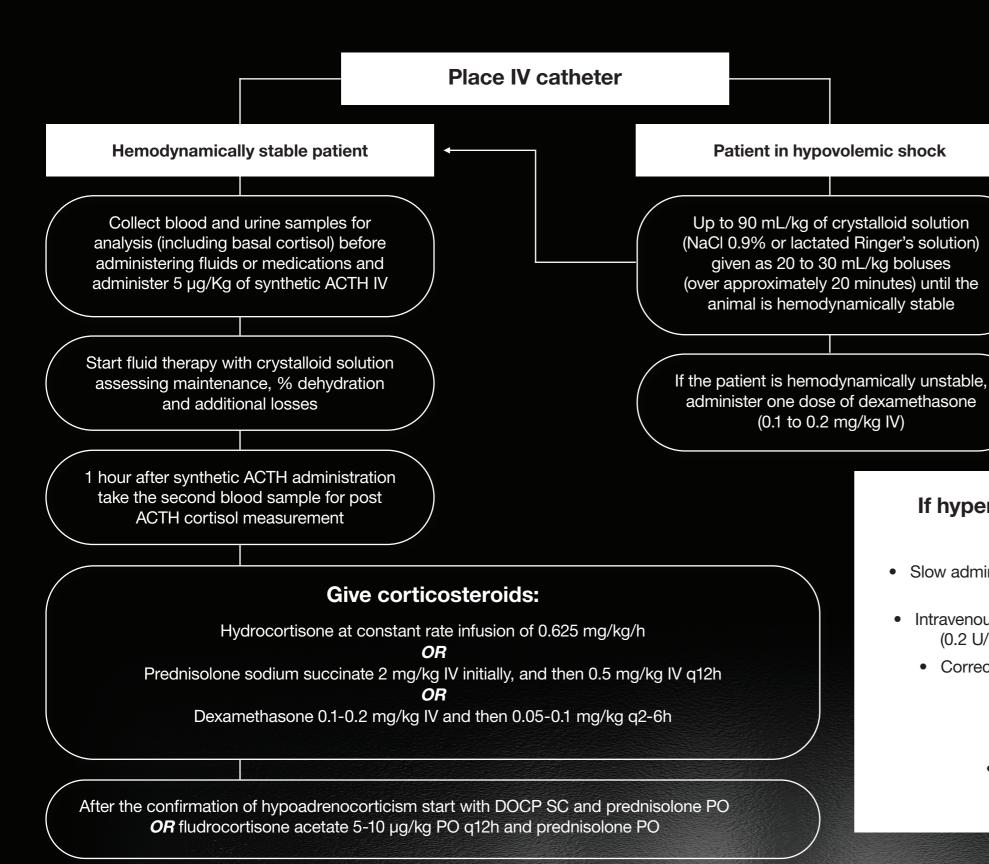
Treatment of the Adrenal Crisis







Monitoring:

- Blood electrolytes (q 4-12h)
 - Blood glucose
 - Acid base status
 - Blood pressure
 - Urine output
 - ECG (if hyperkalemia)

If hyperkalemia is severe (>7 mEq/L and/or bradycardia or other ECG abnormalities):

- Slow administration of 10% calcium gluconate (0.5 mL/kg) to protect myocardium from effects of hyperkalemia
- Intravenous administration of dextrose (1 to 2 g/unit of insulin) and regular insulin (0.2 U/kg) decreases the hyperkalemia by driving potassium intracellularly
 - Correction of metabolic acidosis will also promote intracellular movement of potassium

If hypoglycemia is present:

 50% dextrose solution should be added to the IV fluids to produce 5% dextrose solution





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Canine Hypoadrenocorticism: Treatment with DOCP and Monitoring





