

# Notice regarding novel coronavirus and COVID-19

We understand the concern our pediatric patients with adrenal insufficiency and their families have experienced regarding the possible impact of the novel coronavirus and the COVID-19 infection on their child's or family's health.

Individuals with adrenal insufficiency may be at higher risk to contract a COVID-19 infection, and in addition, their risk is higher to have more severe complications.

Adrenal insufficiency encompasses a number of different conditions that impair the ability of the adrenal glands to respond to fever and infections by increasing the production of cortisol in the body. These conditions include: Addison's Disease, congenital adrenal hyperplasia (CAH), X-linked congenital adrenal hypoplasia, X-linked adrenoleukodystrophy (XALD), P450 oxidoreductase deficiency (P450ORD), and various forms of pituitary disease that affect the adrenal glands (septo-optic dysplasia (SOD), DeMorsier's Syndrome, empty sella syndrome, panhypopituitarism, isolated *central* hypoadrenalism, and ACTH deficiency). If not treated promptly during illness, adrenal crisis may develop rapidly with low blood pressure and shock, low blood glucose, and unconsciousness.

Two national organizations provide highly reliable and updated information about COVID-19 for patients with adrenal insufficiency: the American Association of Clinical Endocrinologists (AADE) (<https://www.aace.com/recent-news-and-updates/aace-position-statement-coronavirus-covid-19-and-people-adrenal>) and the National Adrenal Diseases Foundation (NADF) (<https://www.nadf.us/news.html>) Please use these resources as your first line resource to access to the best information for your situation.

As you have been taught in clinic:

- a) fever control is essential to reduce the body's need for extra steroids. Lots of fluids and non-steroidal anti-inflammatory drugs (NSAIDS)
- b) steroid stress dosing (usually at 2-3 times your usual dose of steroid) should be continued until the patient is fever-free for at least 24 hours
- c) at any time that the patient begins to vomit or develops low blood glucose, evaluation and treatment at an emergency room is essential

- d) wear your adrenal insufficiency ID always in case of emergencies
- e) contact us if you aren't sure what to do: 615-322-7427

The Pediatric Endocrinology Program at Children's Hospital remains ready to serve you with the highest quality care and attention should you need help with specific problems relating management of adrenal insufficiency in your home.