

HYDROCORTISONE (A)

(Revised: October 2020)



TYPE:	Adrenocorticosteroid [S4]
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PRESENTATIONS:	100mg powder in 2ml vial (reconstitute with 2ml normal saline)
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ACTIONS:	Numerous and widespread. ACTAS administration for: 1. Anti-inflammatory effects on the airways 2. Stimulates the normal increase in cortisol secretion in response to stress
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USES:	ICP	1. Moderate to severe respiratory distress due to asthma or exacerbation of COPD
	ICP	2. Patients with a diagnosed adrenal insufficiency who experience a stress response and exhibit altered conscious state and/or refractory hypotension

ADVERSE EFFECTS:	Nil significant with single use
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CONTRA-INDICATION:	Known previous reaction to corticosteroids
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DOSES:

ASTHMA and COPD

ADULT:

ICP	100mg IV—slowly over 2 minutes.
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PAEDIATRIC:

ICP	4mg/kg IV (to a maximum of 100mg) - slowly over 2 minutes.
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ADRENAL CRISIS

ADULT:

ICP	100mg IV—slowly over 2 minutes. May be administered IM
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PAEDIATRIC:

ICP	<3 years—25mg IV—slowly over 2 minutes. 3-12 years —50mg IV—slowly over 2 minutes. >12 years —100mg IV—slowly over 2 minutes. May be administered IM
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NOTES:

- Hydrocortisone is not a first-line priority drug in the management of severe respiratory distress. It is only to be given after aggressive oxygenation, inhaled bronchodilators, and (where necessary) adrenaline.