

Dear Senator Monnes Anderson and Members of the Health Committee:

My name is Joel Ehrenkranz MD and I am the director of diabetes and endocrinology for Intermountain Healthcare in Salt Lake City, Utah.

I am writing in support of SB874. Children and adults with adrenal insufficiency are at risk of an adrenal crisis which can be brought on by accident, injury, illness or other events stressful on the body. An adrenal crisis is a life threatening event. Depending on the health of the individual and the cause of the adrenal crisis, death can occur in a matter of minutes. Presenting features are variable and may include but are not limited to hypotension (low blood pressure), hypoglycemia (low blood sugar), profound weakness, vomiting, abdominal pain, and altered level of consciousness.

Immediate intervention with Solu-Cortef® can be life saving. An injection of a glucocorticoid, such as Solu-Cortef®, will start working in 15 minutes or less, so the sooner a patient is given the injection the better their chance of recovery. Although large volumes of intravenous saline can increase blood pressure, until the glucocorticoid injection is given other treatment will not be effective.

One third of adrenal crisis events occur outside the home. Most EMT-staffed emergency-response vehicles carry a glucocorticoid already for the treatment of severe allergic reactions. In a patient with known adrenal insufficiency and acute illness, it's always better to give a dose of a glucocorticoid than to withhold it.

Giving a dose of a glucocorticoid to an adrenal insufficient patient who is not experiencing a crisis will do no harm. Delay in the administration of a glucocorticoid to a patient with acute adrenal insufficiency could result in the patient's death.

EMT's must examine the patient for emergency identification bracelets or necklaces and listen to the family members and friends. If a patient is known to have adrenal insufficiency, an immediate injection can save the person's life and lessen the chance of severe complications.

Acute adrenal crisis is a life-threatening condition. In a patient who is known to have adrenal insufficiency, administering a glucocorticoid, such as Solu-Cortef, is life-saving. I personally have taken care of scores of patients with acute adrenal insufficiency whose lives have been saved by the immediate administration of a glucocorticoid. I am also aware of patients who die every year because their adrenal crisis is not immediately treated.

I support the passage of SB874. Giving EMT's, nurses, and other intermediate-level practitioners the authority to administer a glucocorticoid, such as Solu-Cortef, to patients with adrenal insufficiency and a possible adrenal crisis is life-saving. Withholding or delaying treatment can result in the patient's death. The benefits of treatment so outweigh the risks that there is no basis to not permit this practice.

Please let me know if you would like any additional information.

Respectfully,

Joel Ehrenkranz MD  
Director, Diabetes and Endocrinology  
Intermountain Healthcare