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Dear Representative Greenlick and members of the Health Committee,

The Pediatric Endocrinology Division at Doernbecher Children's Hospital is in support of SB874. An adrenal crisis is a potentially fatal event. Proper training and procedures could save a life. If a patient is known to be adrenal insufficient and suspected to be suffering a potential crisis an injection of glucocorticoids should be given immediately.

Our Division alone has over 100 patients with adrenal insufficiency caused by conditions such as Addison's Disease, Congenital Adrenal Hyperplasia and Panhypopituitarism. Although there are other conditions which can cause adrenal insufficiency, these three in particular always come with AI. Since these conditions are lifelong, the numbers of all those affected by these conditions including adults in Oregon are higher.

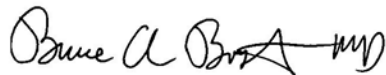
Delays in treatment can cause more complications, disability and even death. It is important that emergency service personnel in the pre-hospital and ER setting be trained in the signs and symptoms of adrenal crisis. EMTs and ER nurses should be enabled to give the injection or IV glucocorticoids immediately. Medications that treat adrenal crisis should also be carried on emergency vehicles.

Emergency protocols can reduce the likelihood of additional complications and save lives. Oregon has protocols for other life threatening events such as heart attack, stroke, drowning, overdose etc. and should have

protocols for adrenal insufficiency too. The medication to treat an adrenal crisis is inexpensive, but the cost of not treating a crisis quickly could be thousands of dollars. If glucocorticoids are given to a patient in error no harm will come to that patient, however if they are delayed or not given the results could be fatal.

Thank you for your attention to this issue,

Sincerely,



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