

Seventy-Eighth Oregon Legislative Assembly - 2015 Regular Session
STAFF MEASURE SUMMARY
House Committee On Health Care

MEASURE: SB 874 A
CARRIER: Rep. Keny-Guyer

Fiscal: Has minimal fiscal impact

Revenue: No Revenue Impact

Action Date: 05/29/15

Action: Do Pass.

Meeting Dates: 05/20, 05/29

Vote:

Yeas: 9 - Buehler, Clem, Greenlick, Hayden, Kennemer, Keny-Guyer, Lively, Nosse, Weidner

Prepared By: Sandy Thiele-Cirka, Committee Administrator

WHAT THE MEASURE DOES:

Requires Oregon Health Authority to disseminate information to health care professionals and public related to adrenal insufficiency.

ISSUES DISCUSSED:

- Background on adrenal insufficiency events
- Emergency room protocols and treatment
- Rarity of adrenal insufficiency disease
- Consequences if treatment is delayed
- First Responders role and responsibilities

EFFECT OF COMMITTEE AMENDMENT:

No amendment.

BACKGROUND:

Adrenal insufficiency is an endocrine or hormonal disorder that occurs when the adrenal glands (located above the kidneys) do not produce enough of certain hormones. Primary adrenal insufficiency, also known as Addison's disease, occurs when the adrenal glands are damaged and cannot produce enough cortisol. Secondary adrenal insufficiency occurs when the pituitary gland (located at the base of the brain) fails to produce enough adrenocorticotropin, a hormone that stimulates the adrenal glands to produce cortisol. This can lead to shrinkage of the adrenal glands. Typical causes of primary adrenal insufficiency are autoimmune disorders and tuberculosis. Secondary adrenal insufficiency is more common and is related to stoppage of corticosteroid medication and surgical removal of pituitary tumors.

Hormones have functions such as regulating blood pressure, metabolism, digestion and stress. Common symptoms of adrenal insufficiency are chronic fatigue, loss of appetite, weight loss, abdominal pain and muscle weakness. Other symptoms may include depression, vomiting, headache, sweating, craving salty foods, low blood pressure and irregular or absent menstrual periods. A person is considered to be in adrenal crisis when they experience symptoms of sudden and severe pain, dehydration and loss of consciousness. Corticosteroid injections or oral doses of a mineralocorticoid hormone are used as treatment to replace or substitute hormones that the adrenal glands fail to make.