

DRUG:	HYDROCORTISONE
PRESENTATION:	Vial: 100mg Oral Solution: 1mg/mL, 10mg/mL (Prepared in Pharmacy). Tablet: 4mg Topical: 0.5%, 1% (cream or ointment)
ACTION & INDICATION:	Corticosteroid Used in:- (i) intractable hypoglycaemia (ii) replacement therapy in adrenal insufficiency (iii) anti-inflammatory (including dermatitis) (iv) hypotension refractive to inotropic agents (v) stress/crisis/severe hypotension
DOSE:	<u>Intractable hypoglycaemia¹</u> IV/Oral: 1-2mg/kg/dose 6 hourly Titrate dose according to clinical response <u>Anti-inflammatory²</u> IV: 2 - 4 mg/kg/dose 6 hourly for 24 hours Taper over several days <u>Physiological replacement⁵</u> Oral : 8 to 18 mg/m ² per day divided into 3 doses IV: 8 to 18 mg/m ² per day divided into 4 hourly doses See next page for Body Surface area calculation <u>Early neonatal hypotension⁴</u> IV: 2mg/kg/dose stat, then 1mg/kg/dose 6 hourly <u>Stress/crisis/severe hypotension⁵</u> IV: <3kg 12.5mg stat >3kg 25mg stat Maintenance : 100 mg/m ² per day divided into 4 hourly doses <u>Topically</u> Apply sparingly 1 - 3 times daily
PREPARATION:	Diluent: Water for Injections or sodium chloride 0.9% Add 1.5mL of diluent to each vial, then withdraw and dilute to 2mL = 100mg/2mL May be further diluted if required, that is; Take 2mL of the above solution and dilute it to 10mL = 10 mg/mL

ADMINISTRATION:	<p>Intramuscularly</p> <p>Intravenously: Over 3-5 minutes</p> <p>Oral: Given with or immediately after feeds.</p> <p>Topical: Apply sparingly to the affected areas only.</p>																
ADVERSE EFFECTS:	<p>Hypokalaemia, abdominal distension, oesophagitis, impaired wound healing, thin fragile skin, petechiae, convulsions, manifestations of latent diabetes mellitus, growth suppression in children, hypertension, hyperglycaemia.</p> <p>Contraindication - Systemic Fungal infection.</p> <p>Topical hydrocortisone is contraindicated in untreated bacterial, fungal or viral skin lesions.</p>																
COMMENTS:	<p>Discard reconstituted parenteral solution immediately after use.</p> <p>Body Surface Area³</p> <table border="1" data-bbox="772 797 1249 1140"> <thead> <tr> <th>Weight(Kg)</th> <th>Surface Area (sq.metres)</th> </tr> </thead> <tbody> <tr> <td>0.6</td> <td>0.08</td> </tr> <tr> <td>1</td> <td>0.1</td> </tr> <tr> <td>1.4</td> <td>0.12</td> </tr> <tr> <td>2</td> <td>0.15</td> </tr> <tr> <td>3</td> <td>0.2</td> </tr> <tr> <td>4</td> <td>0.25</td> </tr> <tr> <td colspan="2">*BSA (m²) = (0.05 x kg)+0.05</td> </tr> </tbody> </table>	Weight(Kg)	Surface Area (sq.metres)	0.6	0.08	1	0.1	1.4	0.12	2	0.15	3	0.2	4	0.25	*BSA (m ²) = (0.05 x kg)+0.05	
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REFERENCES:	<ol style="list-style-type: none"> 1. Pediatric Dosage Handbook 14th Ed Lexicomp 2. Paediatric Pharmacopoeia 13th Ed Royal Children's Hospital Melbourne 3. Neofax 2008 4. Neonatal Pharmacopoeia 2nd Ed Royal Women's Hospital Melbourne 5. Sperling Pediatric Endocrinology 2006 Lifshitz Pediatric Endocrinology 2007 Brook Clinical Paediatric Endocrinology 2007 																
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