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Charlotte's Story Diagnosis and Stabilisation

Charlotte went to her GP six months ago, not because of symptoms that were concerning her, but because she needed a medical certificate to start a diving course.

A couple of years previously her GP had put her on thyroxine for low thyroid function, but had taken her off again after a few months. Aware of that history, and because of her "healthy tan" in May, [Had she been sunbathing? No, no, no...!], her GP referred her to a specialist. A constant stream of people had commented to Charlotte, perhaps enviously, that she looked so brown, where had she been?

Charlotte expected something like a Molemap would be needed, and was surprised that her appointment was with an endocrinologist about 6 weeks later, on a Monday. She had some blood tests, an ACTH stimulation test, and saw the specialist again on the Friday. She filled the prescription for hydrocortisone and fludrocortisone on the way home, and started them Saturday morning.

"When telling me the diagnosis, my endocrinologist said that I'd think I hadn't been feeling bad, but I'd feel "1000%" better than I was feeling then, and realize just how bad I had been feeling. I didn't believe that was possible. But within 24-36 hours of starting hydrocortisone I found out that was indeed true."

"Looking back, I did have several characteristic symptoms, but I had rationalised them. For three months I hadn't been sleeping well, and couldn't last beyond 9pm. But I put my tiredness down to not sleeping well. My weight had been stable for many months despite not dieting." She didn't consider herself particularly weak, and although her blood pressure at diagnosis was low [especially on standing], she had only occasionally felt dizzy. And she had dismissed those occasions as "just headrush" from getting up too quickly.

"For the first 3 months I took 15mg hydrocortisone and 0.1mg fludrocortisone on awakening at about 6.00am, and 10mg hydrocortisone at 3.00pm. For the second 3 months my endocrinologist has me taking 5mg prednisone on awakening, and 1mg at bedtime, as a comparison. I haven't felt any difference between taking hydrocortisone or prednisone. But it is much easier not to miss a dose of prednisone! When I am going to bed, I prepare my pills for the morning, and take one literally as I turn out the light. In the six months since diagnosis, I have had only 3 nights broken sleep.

"For the first three months, I had monthly B12 injections, and daily iron tablets as well. At my 3-monthly appointment I was put back on thyroxine, and am taking

50 mcg in the morning.”

Was she pleased she'd participated in the NZAN meeting in December? “Yes! I came away feeling more relaxed, and lucky I'd been diagnosed early, and stabilized easily. The only depressing thing about Addison's for me [so far!] has been the weight gain. I now weigh 73-74kg, that's 5kg more than I was before – I am 5'8” tall.” That's something to raise at her next specialist's appointment in the new year. Charlotte recognizes that “family genes” probably don't help, as other members of her family tend to put weight on easily. She has done Weight Watchers in the past, and will probably do that again.

Charlotte is now 44. She was born in the UK, and was a detective in the London police force for 20 years. When she came to NZ in 1999 she became an investigator for the serious fraud office. Now she works from home, investigating insurance fraud. Home is a boat. She and her partner are involved in charters also, which involves catering, which Charlotte enjoys... food.... Yes, Weight Watchers again in the new year, she says. It's better to stay ahead of those potential extra kg.

And the diving course? “I haven't yet done it, only because of an unrelated ear problem which hasn't resolved yet.”

