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Diabetes - Weight/Metabolic Clinic - PCOS - Thyroid - Osteoporosis - General Endocrinology

Dr G Alie Ajam 43 King Street Warrawong, NSW 2502

13-05-2020

Dear Alie.

RE: Emma Carlon - DOB: 06-12-1991

I phoned Emma today for a telehealth consent. My trial of Hydrocortisone made her much more irritable and had no benefit in terms of energy. She probably doesn't have adrenal insufficiency. Importantly, when she stopped her Pregnenolone she noticed a decrease in her well being, worsening hair loss, libido and her energy.

You have recorded some blood pressure readings and she has a postural drop from 122/61 to 108/76 with some dizziness but she is not collapsing. Her anxiety has been worse during the isolation.

I learnt today about hypoglycaemic symptoms which she shares with her father. This can be several times a month.

DIAGNOSES

MEDICATIONS AS OF TODAY

1. Pregnenolone 50 mg daily.

- 1. Anxiety.
- 2. Fatigue.
- 3. Poor concentration.

SUGGESTED PLAN:

- 1. I have asked her to try and catch some low glucose readings with a glucometer when they occur and to have fasting insulin, Cpeptide and glucose with you on a prolonged fast by taking her breakfast along with her when she goes for the bloods and trying to wait as long as she can for the bloods to be taken or when symptoms occur.
- 2. If the postural symptoms persist, please try her on Florinef 0.1 mg mane.
- 3. She will continue on Pregnenolone that you have started and I will review her over the next few months to see if we could try something else such as Prometrium 100 mg daily.

Please do not hesitate to contact me if you have any concerns with this plan.

Kind regards,

SOJI SWARAJ

Consultant Endocrinologist Concord Hospital Sighted but not signed

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