



WHAT ARE THE AIMS OF THIS LEAFLET?

This leaflet has been written to help you understand more about oral treatment with corticosteroids. It tells you what it is, what it is used for, what its effects are, and where you can find out more about it.

WHAT IS ORAL TREATMENT WITH CORTICOSTEROIDS?

Oral treatment with corticosteroids is also known as 'oral cortisone therapy' or 'systemic steroid therapy'. The word 'oral' means that the steroids are taken by mouth, usually in tablet or liquid form.

Corticosteroids (also known as steroids) are naturally produced cortisone-like hormones. They have numerous roles in the body which include decreasing inflammation and lowering the body's immune system. Corticosteroid medicines are created pharmacologically but are similar to the natural hormones produced in the adrenal glands which sit on top of each kidney.

It should be noted that corticosteroids are different from the type of steroids (anabolic steroids) used for bodybuilding.

WHAT IS THE USE OF ORAL TREATMENT WITH CORTICOSTEROIDS?

Corticosteroids treat many skin conditions. They reduce inflammation and can help to clear a rash, or at least help to control it. They are commonly used for various blistering skin conditions, 'autoimmune' conditions such as **lupus**, inflammatory conditions of skin blood vessels (**cutaneous vasculitis**), other skin problems such as **sarcoidosis**, or as short-term treatment for severe **eczema** or **lichen planus**.

WHEN SHOULD I TAKE CORTICOSTEROIDS?

- You should take corticosteroids by mouth exactly as directed by your healthcare professional.

- If prescribed corticosteroids by mouth, unless your doctor or pharmacist gives you different instructions, it is best to take it as a single dose once a day, with breakfast. For example, if your dose of corticosteroid, for example prednisolone, is 40 mg daily, your healthcare professional may tell you to take 8 tablets (8 x 5 mg) all at the same time.
- Taking corticosteroids alongside your morning meal can help to prevent stomach upset. It also reduces the potential effect it could have on your quality of sleep. For further information, please visit <https://www.nhs.uk/medicines/prednisolone/how-and-when-to-take-prednisolone-tablets-and-liquid/>

WHAT DOSE OF CORTICOSTEROIDS SHOULD I TAKE?

- The dose of corticosteroid will depend on your health condition and whether you are taking it as a short course or for longer.
- The usual dose of prednisolone varies between 5 mg and 60 mg daily, but occasionally higher doses may be prescribed.
- You should only take the dose advised by your healthcare professional.
- The duration of treatment depends on your condition and will be advised by your healthcare professional.

WHAT ARE THE EFFECTS OF ORAL TREATMENT WITH CORTICOSTEROIDS?

Before starting oral corticosteroids, your healthcare professional will balance the potential benefits of treatment on your skin condition against the risk of side effects.

The dose of corticosteroid will be adjusted to reduce the risk of side effects. First, a high dose may be needed to bring your skin



condition under control. The dose will then be reduced slowly and when appropriate, stopped altogether.

If you have been taking the tablets for more than 3 weeks, it is important NOT to stop the medication suddenly. Your body may have stopped making its own natural corticosteroids and have become dependent on the tablets for its daily needs. They must be phased out gradually under the instructions of your doctor.

If you develop a new illness (for example, a chest infection) within a week of finishing a short course of corticosteroid tablets (3 weeks or less), you may need to restart treatment temporarily. This is to help your body cope with the extra physical stress caused by the illness, and you should be guided by your healthcare professional.

WHAT ARE THE SIDE EFFECTS OF ORAL TREATMENT WITH CORTICOSTEROIDS?

When taken for long periods (more than 2-3 months), corticosteroids can cause a range of side effects; the higher the dose and the longer the course, the greater the chances of side effects. They will be discussed with you, and you will be monitored for side effects while receiving treatment. Inform your healthcare professional if you develop side effects whilst taking the treatment.

Possible side effects include the following:

- Fluid retention (for example, swollen ankles)
- Increased appetite and weight gain
- High blood pressure (hypertension)
- Raised blood sugar or worsening of pre-existing diabetes
- Indigestion, or worsening of a peptic (stomach) ulcer
- Changes in mood, sleep disturbance and insomnia
- Increased risk of infection. You should inform your doctor if you have had tuberculosis in the past or if you have never had chicken pox
- Thinning or softening of the bones (osteoporosis)

- Skin - slow healing of cuts, risk of stretch marks, skin thinning, bruising, increased growth of facial hair, [acne](#)
- Muscle and tendon weakness
- Joint pain, particularly in the hip, may be due to damage to an area of bone. This is a very rare side-effect known as 'avascular necrosis'
- Cataracts, glaucoma, and other eye conditions. You should inform your doctor if you develop any changes in your vision.

The risks of these side effects must be balanced against the benefits of treatment for your skin condition. Bear these points in mind:

- These side effects are unlikely to occur if you are taking the treatment for a short period only, 3 weeks or less.
- If they do occur, most of these side effects, such as high blood pressure, can be treated.
- In some cases, it is best to use preventative treatment to reduce the chances of side-effects such as osteoporosis. A healthy diet and regular exercise will help to protect the bones. In addition, tablets known as bisphosphonates, together with calcium and vitamin D, may be recommended by your doctor to treat and prevent osteoporosis if the corticosteroid treatment is going to last for more than 3 weeks.
- The main way to avoid side effects is by using the lowest effective dose. In some of the conditions that are treated with corticosteroids, a 'steroid-sparing effect' can be achieved by the addition of other tablets that affect the immune system such as [azathioprine](#), [methotrexate](#), [dapson](#), [mycophenolate mofetil](#), cyclophosphamide, or [ciclosporin](#). The potential benefits and drawbacks of adding one of these immune-suppressive steroid-sparing medications to long-term corticosteroid treatment will be discussed with you by your doctor.



ORAL CORTICOSTEROIDS AND VACCINATIONS

If you need any vaccinations, it is important to inform your healthcare provider that you are taking a steroid.

Non-live vaccines, such as the coronavirus (COVID-19) vaccine, the injected 'flu vaccine or the Shingrix shingles vaccine, are safe to have while you are taking corticosteroids like prednisolone (see Patient Information Leaflet on [immunisations](#)).

In most cases, 'Live' vaccines should be avoided whilst taking oral corticosteroids. You should discuss this with your doctor if you think you require a live vaccine. These include:

- polio (oral drops only, the injections are safe)
- mumps
- measles
- German measles (rubella)
- oral typhoid
- BCG
- Varivax (chickenpox)
- Zostavax (shingles)
- yellow fever

If they require vaccination, other members of your household should be given inactive (rather than live) polio vaccine to avoid accidentally exposing you to a live vaccine.

If you have never had chickenpox your doctor may recommend vaccination against this before starting oral corticosteroids. If a vaccination is not possible and you come into contact with a person with chickenpox or shingles whilst you are taking oral corticosteroids, you should go to your doctor straight away as you may need special preventative treatment.

IS TREATMENT WITH ORAL CORTICOSTEROIDS SAFE IN PREGNANCY AND DURING BREASTFEEDING?

Oral corticosteroids are only recommended in pregnancy if the potential benefits outweigh the risks. High doses or long-term use may affect the unborn baby's growth. If you take

prednisolone during pregnancy, your baby's growth will need to be checked regularly.

You can usually take oral corticosteroids while you are breastfeeding; however, small amounts can pass into breast milk. If you are taking a high dose of corticosteroid the baby should be monitored for side effects.

CAN I DRINK ALCOHOL WHILST TAKING ORAL CORTICOSTEROIDS?

- Alcohol can safely be consumed whilst taking corticosteroids however, it is advisable to keep alcohol consumption within the recommended guidelines.
- The national guidelines for safe consumption advise that men and women should not drink more than 14 units a week.
- Further information is available at: <http://www.nhs.uk/Livewell/alcohol/Pages/alcohol-units.aspx>

WHAT SHOULD I DO?

- If you are on long-term corticosteroid treatment, you should carry a steroid emergency card and/or wear a medical alert bracelet or necklace. If you were to become unconscious (for example, after a road traffic accident) and needed to go to a hospital, the emergency team would be alerted to your treatment and the need for it to continue. The dose might even have to be increased temporarily.
- Remember that for courses longer than 3 weeks, it is dangerous to stop the corticosteroid tablets suddenly (see above) and you should never do this without discussion with your doctor or pharmacist.
- If you have diabetes you may need to check your blood sugar (glucose) more frequently, as corticosteroid tablets may affect the levels of sugar in your blood. Your doctor will be able to advise you about this.
- Talk to your doctor before taking oral corticosteroids if you have ever had severe depression or bipolar depression.
- If you buy any medicines or herbal remedies, check with the pharmacist to



see if they are suitable for you to take with corticosteroids. Some anti-inflammatory painkillers (such as ibuprofen) can increase the risk of side effects and may not be suitable.

- If you are pregnant or breastfeeding, think you may be pregnant or are planning to have a baby, ask your doctor or pharmacist for advice before taking corticosteroids.
- Have an annual preventive vaccination against influenza ('flu') and follow the national recommendations regarding the Covid-19 vaccination.
- Do not start oral corticosteroids if you have an untreated infection.
- If you have any worries or concerns, please do not hesitate to ask your doctor.

WHERE CAN I GET MORE INFORMATION?

About Medic Alert bracelets:

Medic Alert Foundation

MedicAlert House

Email: info@medicalert.org.uk

Web: <https://www.medicalert.org.uk/>

Weblinks to other relevant sources:

<https://patient.info/treatment-medication/steroids/oral-steroids>

<https://www.skinhealthinfo.org.uk/support-resources/jargon-buster/>

Please note that the British Association of Dermatologists (BAD) provides web links to additional resources to help people access a range of information about their treatment or skin condition. The views expressed in these external resources may not be shared by the BAD or its members. The BAD has no control of and does not endorse the content of external links.

This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.

This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel

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