



## **ORAL TREATMENT WITH CORTICOSTEROIDS**

### **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?**

Your body produces corticosteroids naturally, on a daily basis. Without them it would not be possible to survive. Corticosteroids are produced in the cortex of the adrenal glands (hence the 'cortico-' part of the name). The ones used most often in medical treatment (prednisolone and dexamethasone) are not exactly the same as the ones produced in the body. It is convenient to refer to them just as 'corticosteroids' or 'steroids', but you should be aware that they are different from the type of steroids (anabolic steroids) used for body building.

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

### **What is oral treatment with corticosteroids used for?**

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

### **What are the effects of oral treatment with corticosteroids?**

Before starting on this treatment, your doctor will assess the risk of side effects against the damage that your skin disorder might cause if it is not properly treated and will have discussed this with you.

The dose of steroid will be adjusted to reduce the risk of side effects. At first a high dose may be needed to bring the skin under control; the dose will then be reduced slowly, and phased out if possible.

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

If you become seriously unwell within a week of finishing a short course of steroid tablets (3 weeks or less) you may need to re-start steroids temporarily. This is to help your body cope with the extra physical stress caused by the illness.

### **What are the side effects of oral treatment with corticosteroids?**

When taken for long periods (more than 2-3 months), or in higher doses, corticosteroids can cause a range of side effects; the higher the dose, the greater the chances of side effects. Your doctor will tell you about these, and will monitor them carefully whilst you are taking the steroids.

Possible side effects include the following:

- Fluid retention.
- Increase in weight, and 'puffiness' around the face.
- High blood pressure (hypertension).
- Raised blood sugar or worsening of pre-existing diabetes.
- Indigestion, or worsening of a peptic ulcer - inform your doctor if you develop abdominal pain.
- Changes in mood - inform your doctor if this occurs, or if you have had previous problems with your nerves.
- Increased risk of infection. You should inform your doctor if you have had tuberculosis in the past, and if you have not had chicken pox or shingles before then you should seek advice if you come into close contact with them when taking steroids.
- Thinning/softening of the bones (osteoporosis).
- Skin - impaired 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'.
- Cataract of the eye.

The risks of these side effects must be balanced against what would happen if you did not have proper treatment for your skin condition. Bear these points in mind:

- These side effects are very unlikely to occur if you are taking the treatment for a short period only.
- If they do occur, most of these side effects, such as high blood pressure, can be treated.
- In some instances it is best to use preventative treatment to reduce the chance of side-effects such as osteoporosis. A good diet and regular exercise help to protect the bones. In addition, tablets known as bisphosphonates, together with calcium and vitamin D, are recommended if the steroid treatment is going to last for more than a few weeks.
- The main way to avoid side effects is by keeping the dose to the lowest one needed. In some of the conditions that are treated with steroids, a 'steroid sparing effect' can be achieved by adding in other tablets that affect the immune system such as azathioprine, methotrexate, dapsone, mycophenolate mofetil, cyclophosphamide, or ciclosporin. The potential benefits and drawbacks of adding an immune-suppressive steroid-sparing medication to long-term steroid treatment will be discussed with you by your doctor.

### **What should I do?**

- If you are on long-term steroid treatment, you should carry a steroid card and/or wear a Medic Alert bracelet or necklace (see below). If you were to become unconscious (for example, after a road traffic accident) and had to go to hospital, the doctors there would be made aware that your steroid treatment would need to continue, and the dose might even have to be increased temporarily.
- Remember that it is dangerous to stop the corticosteroid tablets suddenly (see above); never do this without discussing the matter with your doctor or pharmacist.
- If you have any worries or concerns, please do not hesitate to ask your doctor.

- Have an annual preventive vaccination against influenza ('flu') at your GPs surgery.

## Where can I get more information?

*Other useful websites:*

<http://arthritis.about.com/cs/steroids/index.htm>  
[www.patient.co.uk/health/steroid-tablets.htm](http://www.patient.co.uk/health/steroid-tablets.htm)

*About the Medic Alert bracelets:*

*Medic Alert Foundation*

MedicAlert House

327-329 Witan Court

Upper 4th Street

Milton Keynes, MK9 1EH

Tel: 0800 581420

Email: [info@medicalert.org.uk](mailto:info@medicalert.org.uk)

Web: [www.medicalert.org.uk](http://www.medicalert.org.uk)

For details of source materials use please contact the Clinical Standards Unit ([clinicalstandards@bad.org.uk](mailto:clinicalstandards@bad.org.uk)).

**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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