

# **Steroid tablets**

## **Introduction**

Steroids help many hospice patients in controlling pain and other symptoms. However, some people who take steroids develop side effects. This leaflet discusses the main possible side-effects and gives other useful information if you take steroids.

## **Why are steroid tablets used?**

Steroid tablets (cortisone or corticosteroids) work mainly by reducing inflammation. They are used to treat various conditions where inflammation occurs. For example, some auto-immune diseases; some types of muscle, skin and joint diseases; asthma; etc. Steroids are also used to treat cancers and cancer related symptoms. Prednisolone and dexamethasone (Decadron®) or betamethasone (Betanoid®) are the common steroid tablets used in South Africa.

In hospice steroids are used to manage certain pains, nausea, breathlessness, weakness, tiredness, low mood, loss of appetite, bowel obstruction, fever, sweating, raised pressure in the brain and any symptom caused by inflammation and swelling.

## **Some general points about steroid tables**

- A short course of steroids usually causes no side effects. For example, a 1-2 week course is often prescribed to ease a severe attack of breathlessness. This is usually taken without any problems.
- Side effects are more likely to occur if you take a long course of steroids (more than 2-3 months) or if you take short courses repeatedly.
- The higher the dose, the greater the risk of side effects. This is why the lowest possible dose which controls symptoms is aimed for if you need steroids long-term. Some diseases need a higher dose to control symptoms than others. Even for the same disease, the dose needed often varies from person to person.
- A common treatment plan is to start with a high dose to control symptoms. Often the dose is then slowly reduced to a lower daily dose that keeps symptoms away. The length of treatment can vary, depending on the disease. Sometimes the steroid treatment is gradually stopped if the condition improves. However, steroids are needed for life for some conditions as symptoms return if the steroids are stopped.
- The type of steroids used to treat disease are called corticosteroids. They are different from the 'anabolic' steroids which some athletes and body builders use. Anabolic steroids have very different effects.

## What are the possible side effects of steroids?

For many diseases, the benefits of taking steroids usually outweigh the side effects. Possible side effects include the following.

- **Weight gain**—you may also develop a ‘puffiness’ around the face or swelling of the feet.
- **Mood changes**—some people actually feel better in themselves when they take steroids. However, steroids may aggravate depression or anxiety and make some patients restless.
- **Skin problems**—such as poor healing after injuries, thinning skin and easy bruising. Stretch marks sometimes develop.
- **Increased chance of infections**—as steroids may suppress the immune system. In particular you are at risk of developing oral or vaginal thrush. Keep away from people with chickenpox or shingles. Tell a doctor if you come in contact with people with these conditions. Also, tuberculosis (TB) may flare up again if you had it in the past, even many years ago.
- **Muscle weakness**
- **High blood sugar**—which may mean extra treatment if you have diabetes. Steroids may occasionally cause diabetes. If you are on steroids your hospice sister will check your urine for sugar regularly.
- **An increased risk of duodenal and stomach ulcers**—tell your doctor if you develop indigestion or abdominal (stomach) pains. Hospice may prescribe a medication to protect the stomach if you are on steroids.
- **Osteoporosis**—(thinning of the bones). However, treatment can help to protect against this if the risk is high. For example, you can take a medicine to help prevent bone loss.
- **Increase in blood pressure**—have your blood pressure checked regularly. It can be treated if it becomes high.

The above are only **possible** side effects which may affect some people who take steroids. There is often a balance between the risk of side effects against the symptoms and damage that may result from some diseases if they are not treated.

## Stopping steroid tablets

**Do not stop steroid tablets suddenly if you have been taking them for more than a few weeks.** It probably does no harm to forget the odd tablet. However, stopping steroids may result in serious withdrawal effects if your body is used to the steroids. These may develop within a few days if you stop steroid tablets suddenly. Any change in dose should be supervised by your doctor or nurse. Any reductions in dose are done slowly, over a number of days or weeks.

**Why is it necessary to gradually reduce the dose before stopping steroid tablets?** Your body normally makes steroid chemicals by itself which are necessary to be healthy. When you take steroid tablets for a few weeks or more, your body may reduce or stop making its

own steroid chemicals. If you then stop taking steroid tablets suddenly, your body does not have any steroids. This can cause various 'withdrawal' symptoms until your body resume making natural steroids over a few weeks. The withdrawal symptoms can be serious, even life-threatening and include—weakness, tiredness, feeling sick, vomiting, diarrhoea, abdominal pain, low blood sugar and low blood pressure which can cause dizziness, fainting or collapse.

If the dose is reduced gradually, the body gradually resumes its natural production of steroids and the withdrawal symptoms do not occur.

### **Some other important points about steroid tablets**

- Do not take anti-inflammatory painkillers (such as ibuprofen, etc.) whilst taking steroids (unless advised by your hospice doctor). The two together increase the risk of a stomach or duodenal ulcer developing and you would require medication to protect the stomach.
- The dose of steroid may need to be increased for a short time if you are ill with other conditions. For example, if you have a serious infection, or have an operation. This is because you need more steroid during physical stress.
- Please ask your hospice sister or doctor if you have any concerns about your steroid treatment.

### **Steroid record sheet**

All hospice patients taking steroids are carefully monitored using a Steroid record sheet. Your hospice sister will ask you questions about how you are feeling on the steroids and about possible side effects. Your urine will be tested regularly.

### **Injectable steroids**

Steroids can be given in injectable form. At hospice steroids are occasionally injected intramuscularly but more commonly subcutaneously (under the skin) as regular injections or as an infusion using a syringe driver. This is for patients who have difficulty swallowing or keeping steroid tablets down.