

The Myton Hospices

Steroid Medication



This information is about steroids. It describes how and why they are given and some of the side effects that may occur.

You have been given this leaflet because you have been prescribed steroids to help your symptoms.

Important to remember about steroid medication

- If you have been on steroids for a longer period of time, you should not stop them suddenly, because your body might not make as much natural steroid as it did before you started on the treatment. If you are unable to take your steroid tablets or vomit shortly after taking a steroid tablet, you should contact your doctor or nurse for advice.
- If you become more poorly (especially with an infection) when you have been on long term steroid medications, your dose of steroids may need to be increased. Make sure that you tell your doctor that you are on long term steroids if you are more unwell.
- If you are worried about your medication, contact your doctor or nurse who will be able to advise you.

What are steroids?

Steroids (sometimes called corticosteroids) are substances that are naturally produced in the body. They are made by the adrenal glands (small glands above the kidneys). They have many natural functions in the body including regulation of our immune system and the balance of salt and water in our bodies. They also help to reduce inflammation.

Steroids can also be manufactured as medicines. There are different types of steroids which have different names. Common types of steroids that are used in medical treatment are dexamethasone, hydrocortisone and prednisolone.

Steroids can be given by mouth, by injection or in creams. This leaflet is intended for patients receiving steroids by mouth or injection.

Steroids are used as part of treatment in many different illnesses, including cancer and diseases which cause breathlessness such as

COPD and lung fibrosis. They are also used in other illnesses where they may be useful to stimulate appetite or improve general wellbeing. In most situations steroids are used only for a short period of time, in which case side effects are unlikely to occur.

Possible side effects

It is important to remember that each person's reaction to a medicine is different and some people have very few side effects. The effects will also vary according to the dose of the steroid and the duration of treatment.

Outlined below are the most common side effects and some of the less common ones. We have not included those that are rare and therefore unlikely to affect you. If you notice any of the side effects listed, or if you notice effects that you think may be due to the medicines, but which are not listed here, please discuss them with your doctor, nurse or pharmacist.

Irritation of the stomach lining: Steroids can irritate the lining of the stomach and may cause a stomach ulcer, or make one worse. The tablets should be taken with meals or a drink of milk to help reduce this side effect. Tell your doctor if you have indigestions, stomach pains, or abdominal discomfort. You may be prescribed additional medication to reduce irritation of the stomach.

Temporary changes in blood sugar levels: Whilst you are having your steroid therapy, your blood-sugar levels may be checked by blood tests or you may be asked to test your urine for sugar. Tell your doctor if you get very thirsty or if you are passing more urine than usual. If you have diabetes, you should be more careful than usual about checking your blood sugar levels. Speak to your doctor if there is any problem with controlling your diabetes.

Fluid retention due to a change salt and water balance: You may notice that your ankles and / or fingers swell. Some people have a bloated feeling in the abdomen.

Increased appetite: You may notice that you want to eat more than usual while taking steroids. Some people put on weight when on steroid medication.

Increased chance of infection and delayed hearing: Tell your doctor if you notice signs of infection (inflammation, redness, soreness or a temperature) or if cuts take longer than usual to heal.

Menstrual changes: Women may find that their periods become irregular or stop.

Behavioural changes: You may notice mood swings, difficulty in sleeping and perhaps anxiety or irritability. These effects happen mainly with high-dose or longer-term treatment and should stop when the steroid therapy ends. Difficulty in sleeping may be helped by taking the steroids in the early part of the day.

Less common side effects

Eye changes: Cataracts or glaucoma may develop with long-term use of steroids. There is also an increased risk of eye infections.

Cushing's syndrome: This is usually caused only by long-term use of steroids. It can cause acne, puffiness of the face, facial hair in women and dark marks on the skin.

Muscle wasting: With long-term use of steroids (more than a few months) your legs may feel weaker. When the steroid use is stopped some people have muscle cramps for a short time.

Bone thinning (osteoporosis): This may happen with long-term use of steroids (more than a few months). Let your doctor know if you have any pain in your bones, especially in the lower back.

Additional information

You will be given a blue steroid card if you have to take the steroids at home. The card should be carried with you at all times so that in an emergency a doctor will know you are having steroid treatment.

A card is not necessary if the steroids are just being given as a short course, such as for 3 weeks.

If long-term steroid use is suddenly stopped, withdrawal effects can occur. For this reason it is important to take the prescribed dose at the times recommended by your doctor. When the steroid treatment is over, the dose is gradually reduced. Your doctor will advise you on this.

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