York and Scarborough Teaching Hospitals
NHS Foundation Trust

Steroid tablets

(Prednisolone and dexamethasone)

Information for patients, relatives and carers

ⓘ For more information, please contact:

Medicines Information

01904 725960

yhs-tr.medicines.information@nhs.net

York Hospital
Wigginton Road, York, YO31 8HE

Scarborough Hospital
Woodlands Drive, Scarborough, YO12 6QL

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What are steroids tablets and what are they used for?

Prednisolone and dexamethasone tablets belong to a group of medicines called steroids. Prednisolone is the most commonly used steroid.

Steroids may be prescribed for a number of different allergies and inflammatory conditions for example:

- Eye conditions (e.g. uveitis).
- Lung conditions (e.g. asthma).
- Joint conditions (e.g. various types of arthritis).
- Skin conditions (e.g. eczema).
- Bowel conditions(e.g. ulcerative colitis or Crohn's).
- People who have had a transplant (as one of the anti-rejection medicines).
- People with cancer (used for a number of different reasons including reducing inflammation / swelling, increasing appetite. Dexamethasone is usually used rather than prednisolone).

How do steroids work?

Steroids decrease inflammation by suppressing the immune system's reaction. This reduces the unpleasant symptoms, such as pain and swelling that you may be experiencing from your condition.

How to take steroid tablets?

They should be swallowed with water and taken after a meal to reduce the risk of stomach irritation. They can cause difficulty with sleeping if taken at bedtime so are ideally taken in the morning. If you have been advised to take your steroid tablets more than once a day, the last dose should be taken no later than 6pm. Your doctor or pharmacist will tell you how many tablets to take at each dose.

It is important that you continue to take your steroid tablets regularly until you are advised to stop by your doctor. If you take steroid tablets regularly for a long time or at a high dose, stopping treatment suddenly can cause withdrawal symptoms.

Can steroids cause problems?

For many diseases, the benefits of steroids outweigh the side-effects. Not everyone will experience the side-effects, but if you do, please arrange to see your doctor for advice.

The common side-effects of steroids can include:

- Mood or behavioural changes.
- Difficulty sleeping.
- Feeling confused or tired.
- Muscle weakness.
- Abdominal pain or loose bowel motions.
- Feeling sick.
- Increased blood sugar level (closer monitoring of blood sugar level may be required in diabetic patients).

The common long-term side-effects of steroids can include:

- ‘Thinning’ of the bones (osteoporosis).
- ‘Thinning’ of the skin and easy bruising.
- Weight gain.
- Increased chance of infection, including thrush.
- High blood pressure.
- Increased risk of developing cataracts.
- Increased risk of stomach ulcers.

Your doctor may prescribe some additional medicines to prevent some of the side-effects. These **may** include:

- Medicine and/or calcium and vitamin D to help to protect your bones from thinning
- Medicine to help to protect your stomach from irritation or developing ulcers

Important information on infection risk

Whilst you are taking steroids and for several months after stopping steroid treatment you are more prone to infection and you should try and avoid contact with people with contagious conditions such as chicken pox, shingles or measles.

If you have **never** had chicken pox and you come into contact with someone who has chicken pox or shingles you should get medical advice as soon as possible. This is important for up to three months after stopping a course of steroids or for up to six months if you also take another immunosuppressant.

You should also get medical advice as soon as possible if you come into contact with someone who has measles.

Get medical advice as soon as possible if you think you may have been exposed to someone with an infection and you begin to feel unwell.

What if I become unwell whilst I am on steroids?

If you become unwell or feverish whilst taking steroids or **for up to 12 months** after stopping steroids, contact your GP promptly.

If you are in an accident or need emergency treatment you must let the doctor know you are taking steroids or have taken steroids in the **last 12 months.**

Important information on having vaccinations

Taking steroids may affect your immune system's response to **live virus vaccines**. Live vaccines include the shingles vaccine.

Your doctor will advise you how long after stopping steroids you need to wait until you can be given a live virus vaccine. This is commonly three months after stopping steroid treatment but can be longer. The time depends on the dose of steroid you have been taking and how long you have been taking it for.

You can have the "flu" vaccine (by injection only) if you are taking steroids.

Steroid card

You will receive a steroid card alongside this information leaflet. It is recommended that you carry this steroid card with you at all times and show the card to any healthcare professional looking after you (for example doctor, nurse, dentist, midwife or pharmacist).

Contact details

If you have any questions or concerns about your steroid treatment, please speak to your doctor during your consultation. You can also use the telephone numbers on the front of this leaflet if you have already had your consultation.

Further information on drugs which supress your immune system can be found via the link below https://www.nhs.uk/conditions.

You can search under both

- The medicine (A to Z) (S for steroid tablet) and
- The condition being treated i.e. Health (A to Z)

Examples:

- U for uveitis (an eye condition)
- A for allergies
- I for inflammatory bowel disease
- R for rheumatoid arthritis
- P for psoriasis or psoriatic arthritis

Oral steroid reducing dose card

Name .....

Hospital number.....

Name of steroid .....

Dose (mg)	**Number and strength of tablets to take every .....**	**Number and strength of tablets to take every .....**	**How long to take your tablets (number of days)**

(Note on completing – if the dose is just once a day e.g. morning. Score out column 2. This column is only to be used for twice daily doses).

Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact: Ophthalmology Department, York Hospital, Wigginton Road, York, YO31 8HE or telephone 01904 726758.

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.
PALS can be contacted on 01904 726262, or email yhs-tr.patientexperienceteam@nhs.net.

An answer phone is available out of hours.

Leaflets in alternative languages or formats

If you would like this information in a different format, including braille or easy read, or translated into a different language, please speak to a member of staff in the ward or department providing your care.

Patient Information Leaflets can be accessed via the Trust's Patient Information Leaflet website: www.yorkhospitals.nhs.uk/your-visit/patient-information-leaflets/

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