



**Lubbock**  
SINUS DOCTOR

## CORTICOSTEROIDS

You have been prescribed a corticosteroid called prednisone. Corticosteroids have an effect on the production of cells and cell proteins that control inflammation. In this way, prednisone has potent anti-inflammatory properties on many different tissues. It may be a very effective medication for many different problems. In many cases, corticosteroids are the only class of medication that will provide benefit. These medications are associated with side effects and complications. Complications are usually related to duration and frequency of use. For ear, nose, and throat problems, prescriptions are usually limited to a two week treatment duration. A high dose is prescribed the first week followed by a tapering dose until completed. Short term side effects and complications resolve after completing the course of treatment. This may include elevated blood glucose, upset stomach, mood changes, fast heart rate, water weight gain, increased appetite, acne, and difficulty sleeping. Prednisone should be taken in the morning with food. Diabetics must follow blood glucose levels closely and treat elevated levels with medications as needed. Diabetics should limit carbohydrate intake while taking prednisone. Diabetics that do not have good control of blood glucose levels should not take prednisone. If you have a prior history of peptic ulcer disease, take medication to protect your stomach while taking prednisone. These medications include Nexium, Aciphex, Protonix, Prevacid, or Prilosec. Patients with a recent or current history of peptic ulcer disease should not take prednisone. There is always a chance that someone without a history of peptic ulcer disease will develop a new ulcer problem from prednisone. This may present with a bleeding ulcer. Patients with glaucoma probably should not take prednisone. Patients that require repeated treatment with prednisone may develop cataracts and decreased bone density. The most devastating potential complication of corticosteroid use is hip bone degeneration. This is called avascular necrosis of the hip. I have not seen this occur, but there are cases whereby someone developed avascular necrosis of the hip after one course of prednisone. If this occurs, hip replacement surgery may be necessary. On a similar note, a corticosteroid called Decadron is frequently given during ear, nose, and throat surgery in the operating room. Studies have shown Decadron helps with post operative symptoms and recovery. Although unlikely, it is theoretically possible to develop hip necrosis after one dose of Decadron. This is not a common complication but it is important to realize it is a possibility. As is always the case, deciding to prescribe or take medications is based on the benefit versus risk ratio. Corticosteroids are important medications for many medical problems. Usually, the benefits outweigh the risks.

I, \_\_\_\_\_, confirm that I have read and understand the information provided before taking corticosteroids.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date