

The following is a list of the systemic (oral and injectable) corticosteroids that are available in the United States: Glucocorticoids: hydrocortisone (Cortef) cortisone ethamethasoneb (Celestone) prednisone (Prednisone Intensol) prednisolone (Orapred, Prelone)



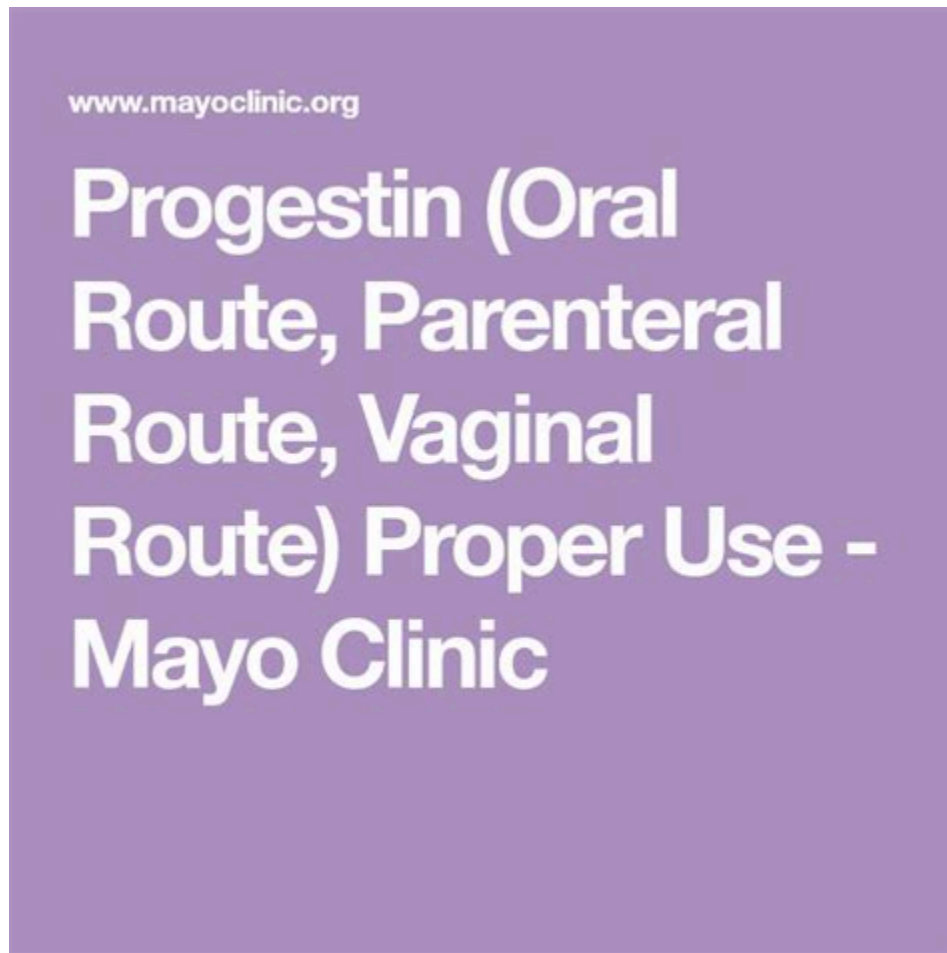
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### Know the Ins and Outs of Oral Steroids - Review of Optometry

TABLE 1. RECOMMENDED TAPERING SCHEDULE FOR ORAL STEROIDS <sup>10</sup>	
Dose	Appropriate Taper
>40mg prednisone/day	5mg-10mg/day every 1-2 weeks
20mg-40mg prednisone/day	5mg/day every 1-2 weeks
10mg-20mg prednisone/day	2.5mg/day every 2-3 weeks
5mg-10mg prednisone/day	1mg/day every 2-4 weeks
<5mg prednisone/day	0.5mg/day every 2-4 weeks

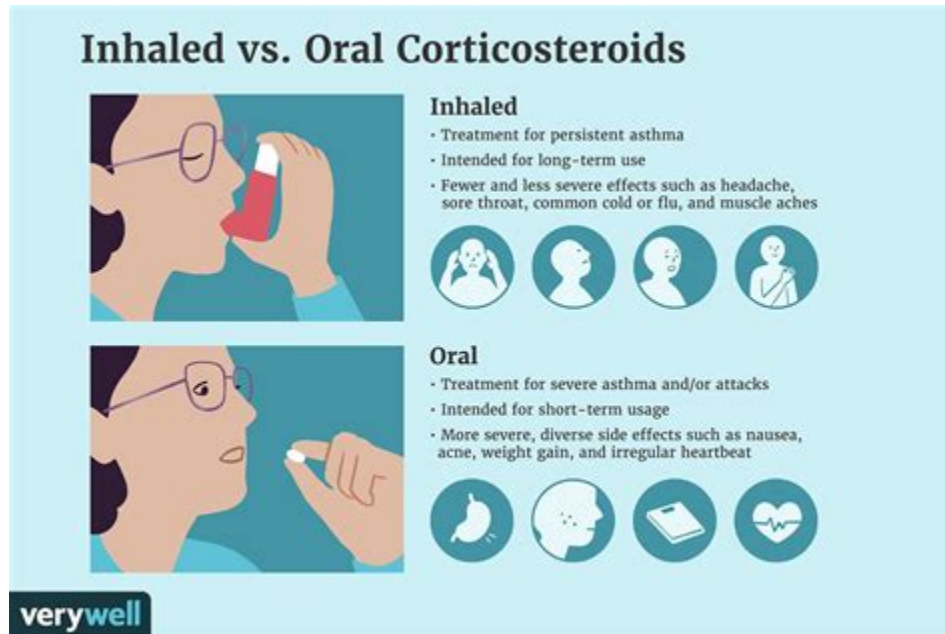
Talk to your doctor right away if you have more than one of these symptoms while you are using this medicine: blurred vision, dizziness or fainting, a fast, irregular, or pounding heartbeat, increased thirst or urination, irritability, or unusual tiredness or weakness. This medicine may cause you to get more infections than usual.

## Corticosteroid (Oral Route, Parenteral Route) - Mayo Clinic



Prednisone is used to treat allergic disorders, skin conditions, ulcerative colitis, Crohn's disease, arthritis, lupus, psoriasis, asthma, chronic obstructive pulmonary disease (COPD) and many more conditions.  
Warnings

# Oral Steroids: Types and Side Effects | Patient



Prednisone (Oral Route) Description and Brand Names Drug information provided by: Merative, Micromedex ® US Brand Name Deltasone Prednicot predniSONE Intensol Rayos Sterapred Sterapred DS Canadian Brand Name APO-predniSONE Teva-predniSONE Winpred Descriptions Prednisone provides relief for inflamed areas of the body.

## Inhaled Corticosteroids - StatPearls - NCBI Bookshelf

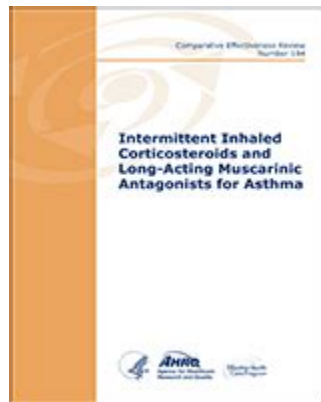


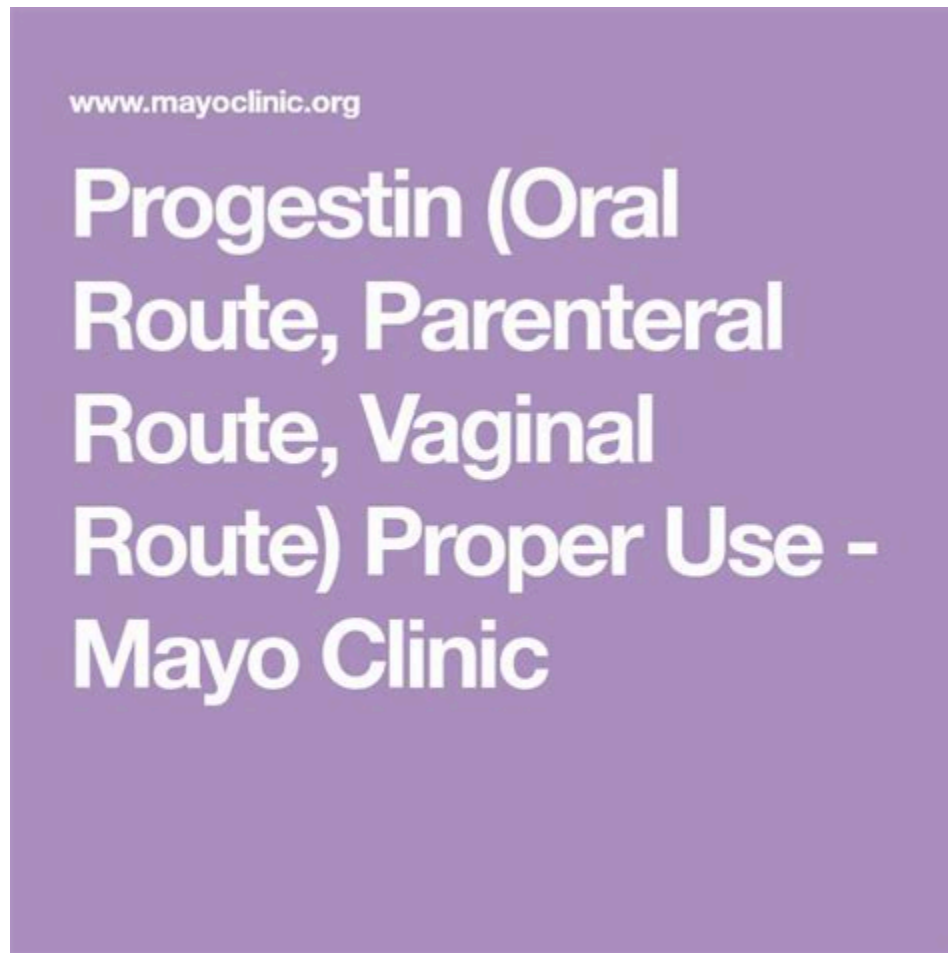
Fig. 1. This map displays the 43 US states where optometrists are currently authorized to prescribe oral steroids. 1 Click image to enlarge. Corticosteroids affect the immune and inflammatory responses at many points along their pathways.

## prednisone: Dosing, contraindications, side effects, and . - Epocrates



The Oral Steroids for Acute Cough trial was a multicenter, randomized controlled trial (RCT) of 401 adults with acute cough, 6 including approximately one-third with audible wheeze at baseline;.

## Corticosteroid (Oral Route, Parenteral Route) - Mayo Clinic



Nausea, vomiting, loss of appetite, heartburn, trouble sleeping, increased sweating, or acne may occur. If any of these effects last or get worse, tell your doctor or pharmacist promptly. Remember.

## Methylprednisolone - StatPearls - NCBI Bookshelf



Methylprednisolone is an FDA-approved medication for the management and treatment of allergic conditions, arthritis, asthma exacerbations, long-term asthma maintenance, acute exacerbation of multiple sclerosis, and as an anti-inflammatory and immunosuppressive agent. It is in the systemic

corticosteroid class of medications. This activity outlines the indications, action, and contraindications .

## Medrol Dosepak Uses, Side Effects & Warnings - Drugs



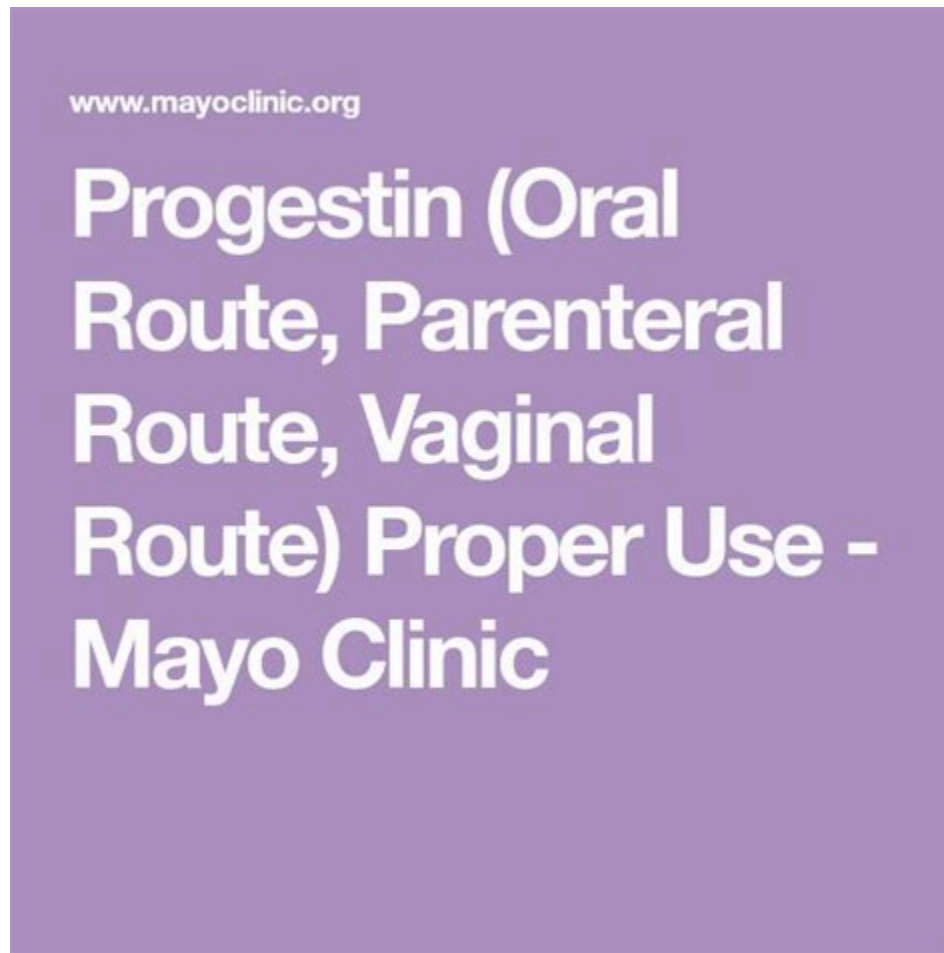
Allergy and Pulmonology: asthma exacerbation, COPD exacerbation, anaphylaxis, urticaria and angioedema, rhinitis, pneumonitis, sarcoidosis, interstitial lung disease. Dermatology: contact dermatitis, pemphigus vulgaris

## Prednisone (Pak) Oral: Uses, Side Effects, Interactions . - WebMD



Contraindications and cautions for steroids. Before prescribing corticosteroids, it is important to screen for any contraindications. . Oral steroids should be taken with or soon after a meal, typically breakfast, as they can irritate the stomach. Patients should take all their prescribed tablets in a single administration. Sometimes, this is .

## Corticosteroid (Oral Route, Parenteral Route) - Mayo Clinic



[2] Go to: Mechanism of Action Prednisone decreases inflammation via suppression of the migration of polymorphonuclear leukocytes and reversing increased capillary permeability. It also suppresses the immune system by reducing the activity and the volume of the immune system.

### **Prednisone - StatPearls - NCBI Bookshelf**



This activity reviews the must-know properties of this group of drugs, their broad indications and contraindications, ways of administration, adverse event profile, practical aspects of the



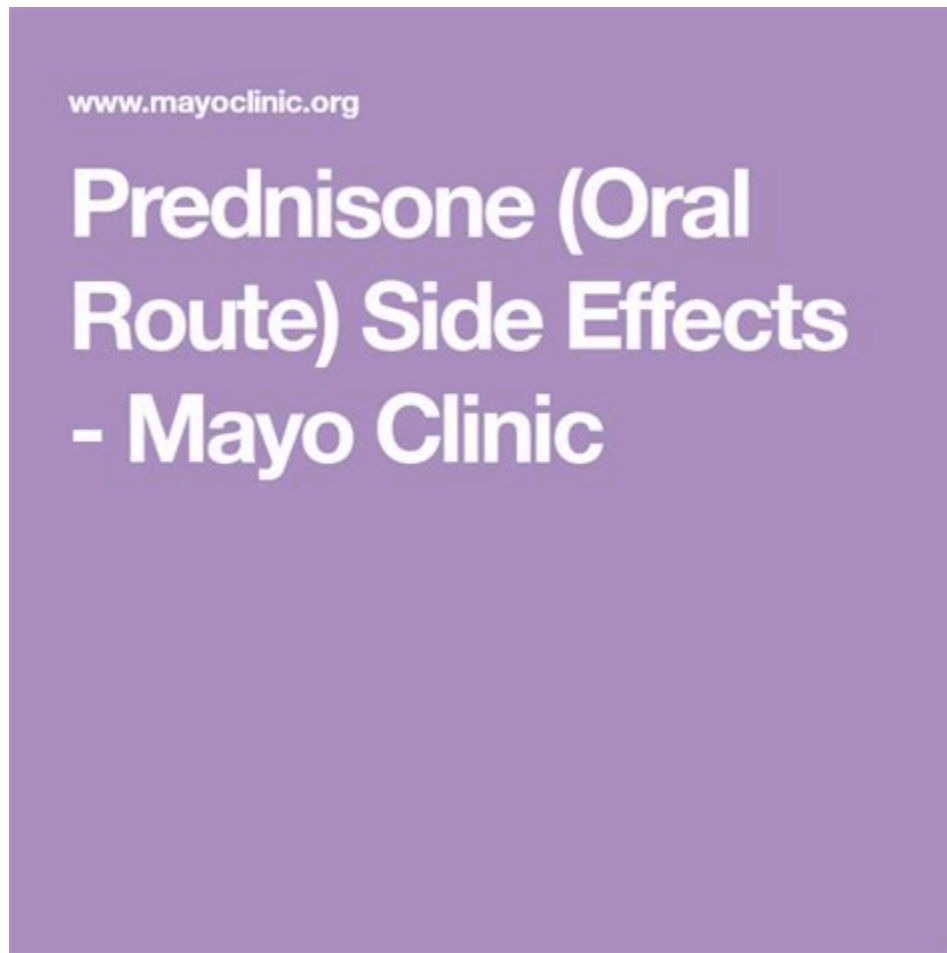
pharmacokinetics of different molecules, monitoring essentials, approach to maximize the benefit and minimize adverse effects, and clinically relevant drug-i.

## **Management | Corticosteroids - oral - CKS | NICE**



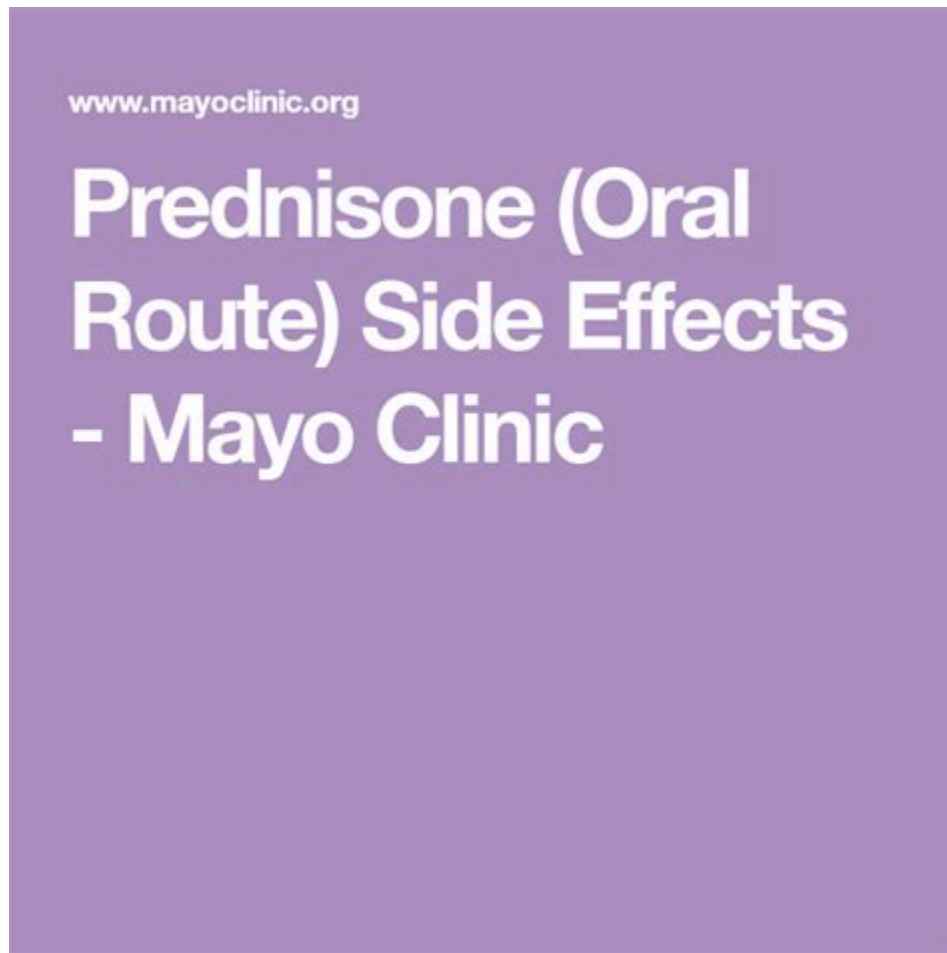
Corticosteroid medicines include cortisone, hydrocortisone and prednisone. They are useful in treating rashes, inflammatory bowel disease, asthma and other conditions. But corticosteroids also carry a risk of side effects. How do corticosteroids work? When prescribed in certain doses, corticosteroids help reduce inflammation.

## Prednisone (Oral Route) Precautions - Mayo Clinic



Drugs Alt Meds Formulary No Formulary Selected prednisone generic Drug Monograph Black Box Warnings Adult Dosing Peds Dosing Contraindications/Cautions Drug Interactions Adverse Reactions Safety/Monitoring Pregnancy/Lactation Pharmacology Formulary Manufacturer/Pricing Patient Education Pill Pictures Add to Interaction Check Dosing Calculator

## Prednisone (Oral Route) Precautions - Mayo Clinic



For oral dosage form (tablets): Adults and teenagers—25 to 300 milligrams (mg) a day, as a single dose or divided into several doses. Children—Dose is based on body weight or size and must be determined by your doctor. For injection dosage form: Adults and teenagers—20 to 300 mg a day, injected into a muscle.

## Corticosteroids: Drug List, Uses, Side Effects, Interactions - MedicineNet



Prednisolone. Betamethasone. Dexamethasone. Hydrocortisone. Methylprednisolone. Deflazacort. The other group are called mineralocorticoids. Mineralocorticoids are usually used for replacing steroids the body isn't producing itself. The one commonly used is fludrocortisone. What are oral steroids used for?

## Steroid Emergency Card (Adult)

**IMPORTANT MEDICAL INFORMATION FOR HEALTHCARE STAFF**  
**THIS PATIENT IS PHYSICALLY DEPENDENT ON DAILY STEROID THERAPY** as a critical medicine. It must be given/taken as prescribed and never omitted or discontinued. Missed doses, illness or surgery can cause adrenal crisis requiring emergency treatment.


Patients not on daily steroid therapy or with a history of steroid usage may also require emergency treatment.

Name.....  
Date of Birth ..... NHS Number .....  
Why steroid prescribed .....  
Emergency Contact .....

When calling 999 or 111, emphasise this is a likely adrenal insufficiency/Addison's/Addisonian crisis or emergency **AND** describe symptoms (vomiting, diarrhoea, dehydration, injury/shock).

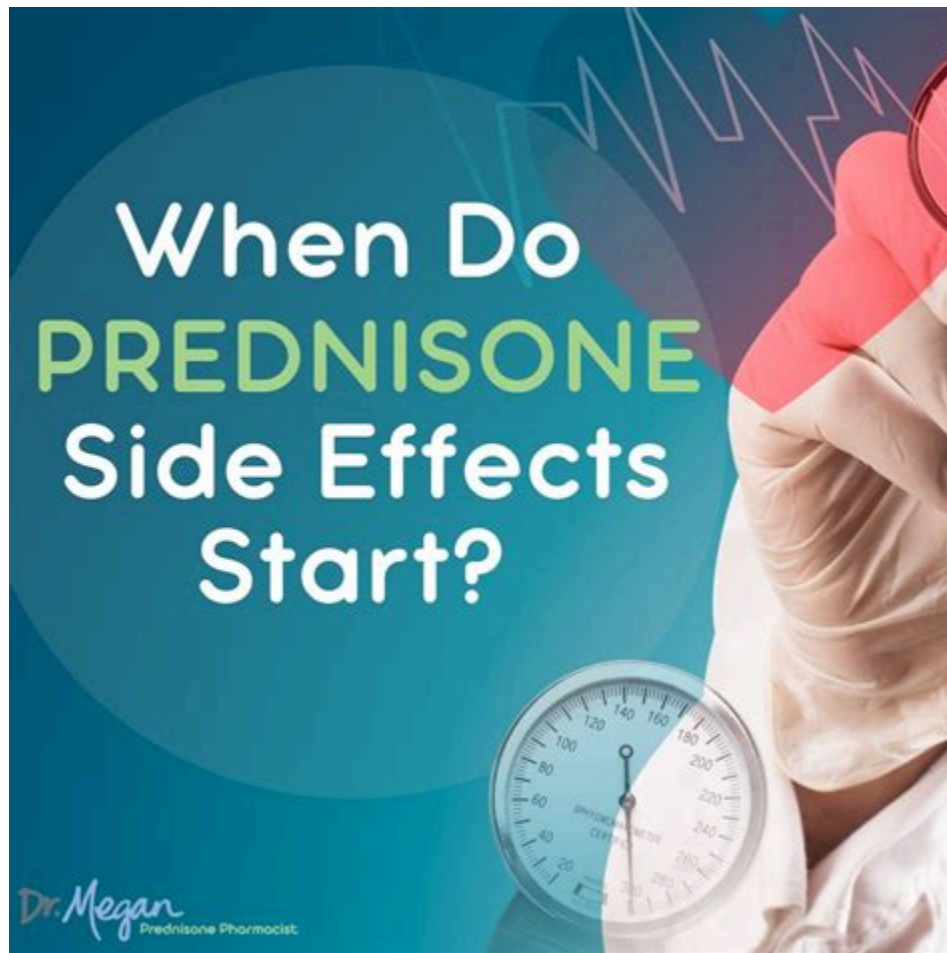
**Emergency treatment of adrenal crisis**

- 1) **Immediate** 100mg Hydrocortisone i.v. or i.m. injection.  
Followed by 24 hr continuous i.v. infusion of 200mg Hydrocortisone in Glucose 5% **OR** 50mg Hydrocortisone i.v. or i.m. qds (100mg if severely obese).
- 2) Rapid rehydration with Sodium Chloride 0.9%.
- 3) Liaise with endocrinology team.

 Scan here for further information or search <https://www.endocrinology.org/adrenal-crisis>

Descriptions. Corticosteroids (cortisone-like medicines) are used to provide relief for inflamed areas of the body. They lessen swelling, redness, itching, and allergic reactions. They are often used as part of the treatment for a number of different diseases, such as severe allergies or skin problems, asthma, or arthritis.

## Prednisone Uses, Dosage, Side Effects, Warnings - Drugs



Inhaled corticosteroids (ICS) are the FDA-indicated treatment of choice in preventing asthma exacerbations in patients with persistent asthma. [1]

# Short-Term Systemic Corticosteroids: Appropriate Use in Primary Care - AAFP

## Short-Term Systemic Corticosteroids: Appropriate Use in Primary Care

Evan L. Dvorin, MD, Ochsner Health System, New Orleans, Louisiana  
Mark H. Ebell, MD, MS, University of Georgia, Athens, Georgia

Short-term systemic corticosteroids, also known as steroids, are frequently prescribed for adults in the outpatient setting by primary care physicians. There is a lack of supporting evidence for most diagnoses for which steroids are prescribed, and there is evidence against steroid use for patients with acute bronchitis, acute sinusitis, carpal tunnel, and allergic rhinitis. There is insufficient evidence supporting routine use of steroids for patients with acute pharyngitis, lumbar radiculopathy, carpal tunnel, and herpes zoster. There is evidence supporting use of short-term steroids for Bell palsy and acute gout. Physicians might assume that short-term steroids are harmless and free from the widely known long-term effects of steroids; however, even short courses of systemic corticosteroids are associated with many possible adverse effects, including hyperglycemia, elevated blood pressure, mood and sleep disturbance, sepsis, fracture, and venous thromboembolism. This review considers the evidence for short-term steroid use for common conditions seen by primary care physicians. (*Am Fam Physician*. 2020;101(2):89-94. Copyright © 2020 American Academy of Family Physicians.)

Published online December 16, 2019.

**An analysis** of national claims data found that 21% of adults received at least one outpatient prescription for a short-term (less than 30 days) systemic corticosteroid over a three-year period, even after excluding patients who had asthma, chronic obstructive pulmonary disease, cancer, or inflammatory conditions for which chronic steroids may be indicated. The most common diagnoses associated with outpatient prescribing of short-term corticosteroids included (from most frequent to least frequent) upper respiratory infection, spine conditions, allergic rhinitis, acute bronchitis, connective tissue and joint disorders, asthma, and skin disorders.<sup>1</sup> Most of these short courses of corticosteroids were prescribed by family medicine and internal medicine physicians.<sup>1</sup> Several recent studies have confirmed high rates of prescribing systemic corticosteroids for patients with acute respiratory tract infections,

ranging from 11% of all outpatient respiratory infections in a national study<sup>2</sup> to 70% of patients with at least one week of cough in a small study at two urgent care clinics.<sup>3</sup> Prescribing oral corticosteroids in short courses may seem to be free from significant adverse effects; however, a large national data set of private insurance claims, which included approximately 1.5 million people, showed that a short course of oral steroids was associated with an increased risk of sepsis (relative risk [RR] = 5.3), venous thromboembolism (RR = 3.3), and fracture (RR = 1.9) in the five to 30 days after steroid initiation compared with those who had not received a short course of steroids.<sup>1</sup> The estimated number needed to harm after a short course of steroids was 140 for fracture, 454 for venous thromboembolism, and 1,250 for sepsis. There are also case reports of avascular necrosis developing after even one course of systemic steroids.<sup>4,5</sup> It is well understood that short-term systemic steroids can cause hyperglycemia, elevated blood pressure, immunocompromised state, mood and sleep disturbance, and fat necrosis when injected. This review summarizes the evidence base for the effectiveness of short-term systemic (either oral or injected intramuscularly) steroid use in adults in the outpatient primary care setting (Figure 1).

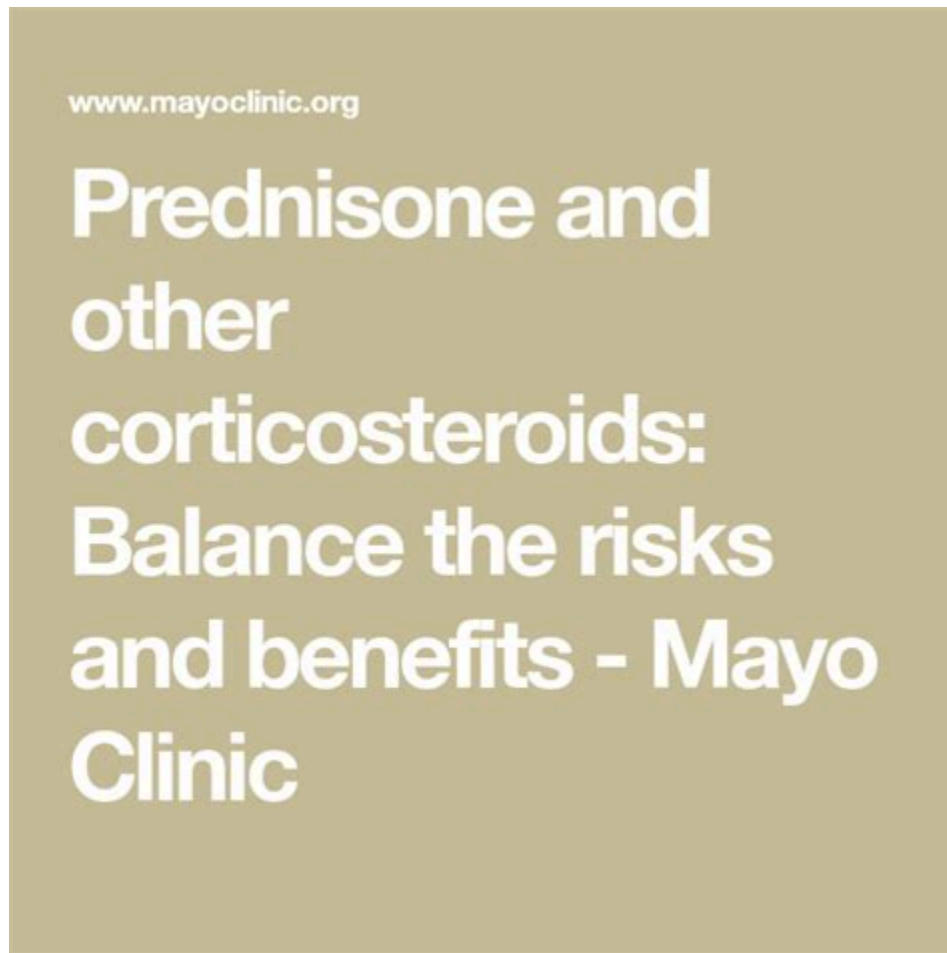
**CME** This clinical content conforms to AAFP criteria for continuing medical education (CME). See CME Quiz on page 79.

**Author disclosure:** No relevant financial affiliations.

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Your doctor may want you to follow a low-salt diet and/or a potassium-rich diet. Your doctor may have you take a bisphosphonate (alendronate [e. g. , Fosamax], risedronate [e. g. , Actonel]) to help prevent and treat bone problems while you are taking a corticosteroid. Your doctor may want you to watch your calories to prevent weight gain.

## **Prednisone and other corticosteroids - Mayo Clinic**



Prednisolone is a corticosteroid drug that can be used to treat various inflammatory and immune conditions, such as asthma, rheumatoid arthritis, ulcerative colitis and nephrotic syndrome. The BNF provides the dose, uses, side-effects, renal impairment, pregnancy, breast feeding, contra-indications and monitoring requirements for prednisolone tablets, oral liquid and injection.



## Prednisolone | Drugs | BNF | NICE



Medrol Dosepak is a steroid that prevents the release of substances in the body that cause inflammation. Medrol Dosepak is used to treat many different inflammatory conditions such as arthritis, lupus, psoriasis, ulcerative colitis , allergic disorders, gland (endocrine) disorders, and conditions that affect the skin, eyes, lungs, stomach .

## Steroids: side effects

mnemonic: **BECLOMETHASONE**

- **B**uffalo hump
- **E**asy bruising
- **C**ataracts
- **L**arger appetite
- **O**besity
- **M**oonface
- **E**uphoria
- **T**hin arms & legs
- **H**ypertension/ Hyperglycaemia
- **A**vascular necrosis of femoral head
- **S**kin thinning
- **O**steoporosis
- **N**egative nitrogen balance
- **E**motional liability



Oral corticosteroids are contraindicated in: People with acute infections uncontrolled by appropriate antimicrobial therapy — they may mask the symptoms of infection. Oral corticosteroids should be used with caution in people with: Hepatic impairment — plasma concentrations of oral corticosteroids may be increased in hepatic impairment.

- <https://noti.st/tojagavrilovin/XUISxf/somatotropina-bovina-preco>
- <https://blog.libero.it/wp/bogdandmitrievpi/wp-content/uploads/sites/88273/2024/01/Biotest-Mag-10-Cleanse.pdf>
- <https://telegra.ph/Dhea-Plus-02-09>