

Prednisone (tablets)

(Information from the Waikato Rheumatology Unit, Waikato Hospital, Hamilton)

Treatment with prednisone

This information sheet should help you to understand the reasons for starting prednisone (cortisone tablets), the way in which prednisone works and how we will monitor the treatment so that it is safe. It will probably not answer all of your questions, but should be a helpful starting point.

If you have any questions please do not hesitate in contacting the Rheumatology nurse educator.

What is prednisone?

Prednisone is a man-made cortisone, one of the steroids naturally produced by our adrenal glands. Another naturally occurring hormone is anabolic steroid, which helps build muscle tissue. Anabolic steroids (used illegally by some athletes to build muscle) are NOT used to treat medical conditions.

Why do I need prednisone tablets?

Prednisone is used in many rheumatoid conditions because it reduces swelling and inflammation (e.g. rheumatoid arthritis, polymyalgia rheumatica, giant cell arteritis, and lupus). In rheumatoid arthritis prednisone can provide short-term control of inflammation while waiting for one of the slower-acting second line agents (methotrexate, hydroxychloroquine or sulphasalazine) to take effect. By contrast, prednisone works very quickly, usually within one to four days. It is not a painkiller, so you can continue taking Panadol (paracetamol) if needed.

How do I take prednisone?

Usually prednisone works best when you take the complete daily dose in the morning, with or after food. It is important to take exactly the amount prescribed by your doctor. The amount will depend on why prednisone is being used. Often your doctor will start you on a high dose and then reduce this as your symptoms improve. If you have been on steroids for a long time, then your doctor will make any reductions very slowly. You should not stop taking your steroid tablets unless advised by your doctor. If you run out of prednisone, don't assume you're to stop taking it; contact your doctor to be sure.

It can be dangerous to stop steroids suddenly. When prescribed steroid tablets over a long period you should carry a Steroid Card. The steroid card records how much prednisone you are on and how long you have been taking it. If you become unwell or are involved in an accident you will probably require extra steroids. Your rheumatologist, GP or rheumatology nurse can give you a steroid card.

Do I need any special checks while on prednisone?

You do not usually require any regular blood or urine checks. However, your doctor may wish to make certain checks for your general condition.

Can I take other medications along with prednisone?

It is important to tell any doctor treating you that you are taking prednisone. Phenytoin and rifampicin reduce its efficacy and antacids taken with prednisone may decrease its absorption. However, many drugs can be safely taken with prednisone.

May I drink alcohol while taking prednisone?

This is not a good idea. Alcohol and steroids can both upset the stomach. It is best to discuss this with your doctor.

Does prednisone affect pregnancy?

Tell your doctor if you are planning to start a family. If you become pregnant while taking prednisone, do not stop them, but contact your doctor. Never stop steroids abruptly. If you wish to breast-feed check with your doctor.

Can I have immunisation injections while on steroid tablets?

You should avoid immunisation injections, which involve any of the live vaccines such as polio and rubella. These are used in immunisation against polio infection and German measles. Flu vaccines are safe.

Are there any side effects?

Prednisone is most often prescribed in low doses (10mg or less per day) and is well tolerated. If side effects do occur, they're usually related to high-dose or long-term therapy (more than three months).

Symptoms	Low dose	High dose	Call GP or Rheumatology Nurse
increased appetite - weight gain	*		Only if this is a problem
Nausea/dyspepsia	*	*	Yes - if symptoms are severe
Easy bruising/thin skin/cuts slow to heal	*	*	
fluid retention	*	*	Yes - always
increased urination	*	*	
lower resistance to infection		*	
muscle weakness		*	
excessive thirst & urination - diabetes		*	Yes - if symptoms severe yes - monitor blood or urine sugar levels
insomnia/restlessness/tremor/depression	* Long	*	Yes - if symptoms are severe
Cataracts/glaucoma	term use	* Long	
Osteoporosis/bone fractures	Long term	term use	Monitor with bone density scan
Adrenal suppression	use	Long	Carry steroid card in case of emergency
	Long term	term use	
	use	Long	
		term use	
	* dose		
	dependent		

What should I know about osteoporosis and how can I reduce the risks?

Osteoporosis means thinning of the bones, making breaks more likely. As mentioned above, long term treatment with steroid tablets can cause osteoporosis. To reduce the risk it is a good idea to follow the general recommendations below. However, you should also ask your GP or Rheumatologist for advice on your particular case:

- Keep the dose of prednisolone as small as possible, ideally less than 7.5mg per day.
- Make sure your calcium intake is at least 1500mg per day. One glass of high-calcium milk provides over 400mg of calcium. Other foods high in calcium are cheese, yoghurt, vegetables like broccoli, baked beans and nuts.
- Do at least 30 minutes of weight bearing exercise each day (that is, exercise, which involves walking, or running).
- Avoid smoking and reduce the amount of alcohol you drink.
- Hormone Replacement Therapy (HRT) can be useful for women around the time of the menopause.
- In men, testosterone replacement can be useful if the levels of this hormone are low.
- Your doctor may advise the use of bisphosphonate drugs (Etidronate or Fosamax), Rocaltrol or Vitamin D.
- Vitamin D is needed for your body to absorb calcium. Spend 30 minutes outdoors every day and you should get enough from sunlight on your skin.
- A special x-ray known as a bone scan can be used to measure bone mass and is useful for monitoring people on long term steroids. Your rheumatologist may decide to ask for this.