



Corticosteroid treatment in COVID-19

A patient's guide



After treatment

If you are at risk of diabetes, you may need to continue monitoring your blood sugar levels after your steroid treatment has finished.

If you have diabetes, your usual diabetes medications might have been altered during your hospital stay. Once your steroids are stopped, you will need to monitor your blood sugar levels closely and your medication may need to be readjusted. You will need a plan for follow-up with the diabetes team in the community.

If you have had a longer steroid course (over 10 days), you may need to reduce the dose of steroids gradually at home – known as weaning. Your medical team or pharmacist will advise on how to do this.

More information

For more information on steroid use, please visit the following site:

<https://www.nhs.uk/conditions/steroids/>

For more information on the RECOVERY trial, which showed that corticosteroid treatment is effective in COVID-19, please visit the following site:

<https://www.recoverytrial.net/>

Authors: Daniel Burrage, Stephanie Ghartey, Harriet Robinson

Patient advice and liaison service (PALS)

If you have a compliment, complaint or concern please contact our PALS team on 020 7288 5551 or

whh-tr.whithealthPALS@nhs.net

If you need a large print, audio or translated copy of this leaflet please contact us on 020 7288 3182. We will try our best to meet your needs.

[Twitter.com/WhitHealth](https://twitter.com/WhitHealth)

[Facebook.com/WhittingtonHealth](https://facebook.com/WhittingtonHealth)

Whittington Health NHS Trust

Magdala Avenue

London

N19 5NF

Phone: 020 7272 3070

www.whittington.nhs.uk

Date published: 12/08/2021

Review date: 12/08/2023

Ref: EIM/AcutMed/CTC-19/01

© Whittington Health

Please recycle

What are corticosteroids?

Corticosteroids, commonly called 'steroids', include medications called dexamethasone, prednisolone and hydrocortisone.

They work by reducing inflammation in the body and are regularly used to treat many conditions, including asthma, different types of arthritis and skin conditions.

Why are corticosteroids used in COVID-19?

In COVID-19 infection, steroid treatment has been shown in trials to improve outcomes for people who require hospital admission. Based on these results 1 death would be prevented by treatment of around 8 ventilated patients or around 25 patients requiring oxygen alone.

It is thought that steroids help by reducing the lung inflammation that can lead to serious breathing difficulties in some patients with COVID-19 infection.

When are they given?

If you are admitted to hospital with COVID-19 infection and require additional oxygen or any form of ventilation therapy, you will be offered corticosteroids to help your breathing.

How are they given?

Usually, a tablet of dexamethasone (6mg) is given once daily. This can be crushed and mixed with water, if necessary.

Alternatively, dexamethasone can be given as an injection in the vein, also once daily.

Dexamethasone is usually given for 10 days or until you are discharged from hospital, whichever is sooner.

What monitoring will I need?

You will need to have your blood sugar level monitored at least four times a day while being treated with steroids.

You will need to have your blood sugars monitored even if you are not known to have diabetes.

This is because both COVID-19 infection and steroid can cause raised blood sugar levels, which sometimes need additional treatment.

Side effects?

Common side effects of corticosteroids include:

- Sleep disturbance
- Stomach and gut inflammation
- Mood disturbance – feeling unusually high or low in mood

There are other side effects of steroids, but these are generally seen with more long-term use.

Pregnancy and Breastfeeding

For women who are pregnant or breastfeeding and have COVID-19 infection requiring hospital admission, we recommend taking a tablet called prednisolone once daily. If you are unable to take tablet medication, a medication called hydrocortisone can be given twice daily via the vein.

Steroids are sometimes given during pregnancy for other conditions, including exacerbations of asthma. Short-term use of prednisolone or hydrocortisone is not known to be harmful in pregnancy. In severe COVID-19 infection, it is felt that the benefits of steroid treatment outweigh any potential downsides. There is no clear evidence that use of corticosteroids increases the risk of congenital abnormalities in unborn babies.

Breastfeeding is not known to be harmful for children whose mothers are taking prednisolone or hydrocortisone.