

SYSTEMATIC ORAL STEROIDS

Treatment for SSNHL

Systemic steroid pills (prednisone or methylprednisolone) are often used for the treatment of hearing loss. Steroids help to reduce swelling and inflammation. Steroid use can lead to some negative side-effects, especially if they are used continuously or often.

Steroids are naturally produced by our bodies as a vital part of our daily functioning. When systemic steroids are used our body's natural production of steroids decreases. At the end of a steroid treatment the doctor will lower the daily dose slowly before ending its use completely. This is because if the steroid use is ended suddenly the body may not be able to quickly increase the natural steroid level to normal.

Common side effects

It's common to have some increased appetite or to retain some fluid when you are using oral steroid therapy. You should carefully manage your diet. The first dose may also make you feel hyperactive, and you may feel somewhat weepy or "blue" as the dose is decreased. With proper management of the dose level these effects can usually be minimized. If you have indigestion or heartburn it may be necessary to take special precautions to protect your stomach. If you have had a history of duodenal ulcer you should let your doctor know and she or he will prescribe medication to protect your stomach.

Negative side effects

Steroid use can show signs if your body is likely to develop:

- + Cataracts
- + Glaucoma
- + High blood pressure
- + High blood sugar (as with diabetes)
- + Mood swings
- + Stomach irritation or ulcer disease
- + Bone-thinning (osteoporosis)
- + Menstrual irregularities

A very rare but also very serious reaction to use of oral steroids can be a condition called **avascular necrosis**. It can result in permanent damage to a joint (disintegration). Tell your doctor if you develop significant joint pains while taking oral steroids.

Except in unusual circumstances, use of systemic steroids is avoided if you:

- + Are pregnant or plan to become pregnant.
- + Have a history of abnormal bleeding, tuberculosis, glaucoma or cataract disease, significant clinical depression, immune deficiency, avascular necrosis, or severe osteoporosis.

DIRECTIONS FOR TAKING STEROIDS

- + Take your steroids on a **full stomach**, after breakfast in the morning. This will help decrease the side effects of stomach irritation and insomnia.
- + Do not keep this medicine in the bathroom because of the heat and moisture
- + Eat a banana every day while taking steroids to help replace potassium in your body.
- + Monitor your blood pressure or glucose levels carefully if you have high blood pressure or diabetes
- + Supplement your diet with calcium 1200mg/day and vitamin D 800 IU/day. Calcium citrate is preferred to calcium carbonate to reduce unwanted side effects (GI upset, kidney stones).

Cautions during steroid use

If you are taking quinolone antibiotic (Cipro, Levaquin, or Avelox) and steroids at the same time, avoid strenuous activity as there is a small increased risk of tendonitis and Achilles tendon rupture.

If it is recommended that you use steroids on a frequent or continuous basis and you are at risk for glaucoma, cataract formation, or osteoporosis, you should:

- + Perform weight-bearing exercises daily
- + Have bone density exams as ordered by your doctor
- + Keep annual eye examinations

As with other medications:

- + DO NOT drink alcohol or smoke
- + DO NOT take more than one dose at a time
- + DO NOT increase the amount of the dose unless directed by your healthcare provider
- + DO NOT start taking any new medicine without telling your healthcare provider or pharmacist