



The MGFA mission is to facilitate the timely diagnosis and optimal care of individuals affected by myasthenia gravis and closely related disorders and to improve their lives through programs of patient services, public information, medical research, professional education, advocacy and patient care.

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PREDNISONE

Answers to questions you
may have about prednisone



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What is prednisone?

Prednisone is a synthetic hormone commonly referred to as a steroid, specifically a glucocorticoid type of steroid. Prednisone is very similar to the hormone cortisol, which is naturally produced by your own body. Prednisone is used to treat many illnesses and medical conditions.

There are several types of steroids with different actions. Glucocorticoid steroids *are very different from* androgenic steroids that have received publicity as “performance enhancing” drugs that have been misused by athletes. Brand names for prednisone include Deltasone, Rayos, Sterapred, and Prednicot .

There are other synthetic steroid medications that are sometimes used:

Prednisolone Brand Names:

Delta Cortef Cotonone, Flo-Pred, Millipred, Orapred, Pediapred

Dexamethasone Brand Names:

Decadron, Ozurdex

Hydrocortisone Brand Names:

Solu-cortef, Anucort-hc, Cortaid, Cortef, Pandel, Locoid,

Triamcinolone Brand Names:

Aristocort, Kenacort

How does prednisone work?

In part, prednisone acts as an immunosuppressant. The immune system protects you against foreign bacteria and viruses. In some illnesses, the immune system becomes overactive and attacks the body. These illnesses are referred to as “autoimmune diseases.” Some autoimmune diseases, including myasthenia gravis, are caused by antibodies. Prednisone suppresses

the production of antibodies. This suppression can make it slightly harder for you to fight off infection, but also reduces the over-activity of the immune system.

When beginning prednisone, there is a small chance that it may cause serious increased weakness for a short period of time and your physician should be alerted if you experience worsening symptoms of myasthenia gravis. Most physicians try to prevent this by starting prednisone at a low dose and working up to a therapeutic level.

What are the possible adverse effects of prednisone?

Adverse side effects do not occur in all patients and are usually related to the amount and length of time prednisone is used. Potential adverse effects will be monitored by your physician and include:

- **Insomnia and mood changes.** Euphoria or depression may occur. The cause is uncertain. It is best to take prednisone in the morning to reduce the chances of insomnia at night.
- **Increased appetite and weight gain.** People with MG cite weight gain as the most frustrating side effect of taking this medication. Prednisone increases your appetite. Just being aware of this can help with management. Keeping healthy, low calorie snacks available can help.
- **Susceptibility to infections.** Prednisone slightly decreases your resistance to infection. Avoid individuals with infectious illnesses if possible. Notify your physician if you develop persistent signs of an infection.
- **Fluid retention.** Prednisone can cause you to retain fluid. Your physician will

monitor this process. Fluid retention can be caused by sodium retention and potassium depletion through frequent urination. A salt-restricted/potassium-rich diet may help reduce fluid retention.

- **Hypertension.** Prednisone may cause a rise in blood pressure. Your physician can treat this, if necessary.
- **Skin changes.** Prednisone can cause a change in the condition of your skin. You may notice that your skin bruises more easily, or that wounds take longer to heal.
- **Change of physical appearance.** These changes may include swelling of the face or the back of the neck or ankles; increased belly fat; acne; thinning of skin; or skin stretch-lines.
- **Osteoporosis.** Prednisone can make your bones become fragile by increasing calcium loss. This usually occurs after taking prednisone for a prolonged time. It may be recommended that you take a calcium and vitamin D supplement or increase the amount of calcium-rich foods in your diet and that you have regular bone-density screenings.
- **Cataracts and worsening of glaucoma.** After prolonged use of prednisone, cataracts or glaucoma may develop. This condition can be detected and monitored by periodic regular eye examinations.
- **Hyperglycemia or diabetes (elevated blood sugar).** Prednisone may increase the amount of sugar (glucose) in your blood. With periodic blood work, your physician can monitor this. Alterations in hair growth. Prednisone can cause a darkening and/or increase in hair growth. This usually disappears when the dose of prednisone is decreased.

- **Stomach upset (indigestion, stomach burning or ulcer).** Prednisone may cause gastrointestinal irritation. Take prednisone with meals, milk or antacids. Do not take on an empty stomach. Your physician may prescribe an acid reducing medication such as Prilosec, Prevacid, or Protonix to protect your stomach.

How long will the side effects last?

If adverse effects develop, they will usually persist as long as the medication is continued. As the dose decreases, so will the adverse effects. Some adverse effects such as bone-thinning may be permanent and will not reverse after the medication is discontinued.

Are there any special dietary considerations?

Adopting a high protein/ low salt/low carbohydrate diet and eating well-balanced meals can help to control weight.

What should I do if I miss a dose of prednisone?

You should try to avoid missing a dose of prednisone. If you do, follow these guidelines:

- If you forget to take your prednisone at the usual time but remember later the same day, take the missed dose immediately.
- If you forgot to take yesterday's dose, skip yesterday's dose and take your usual dose for the day.
- If you are on an alternate day schedule and forgot yesterday's dose, take yesterday's dose today. Tomorrow, resume the alternate day schedule.

- Since prednisone suppresses the natural production of steroids by your body, stopping prednisone too quickly can lead to serious, even life-threatening effects including low blood pressure, low body temperature, heart failure, confusion, and other effects.
- Rapidly tapering or stopping prednisone can also be associated with worsening of the symptoms of myasthenia gravis, nausea, vomiting, pain, or fever.
- Never stop or change your prednisone dose without your doctor's consent. If you are planning a trip, always carry an extra supply.
- “High Day” and “Low Day” refer to the dosages you take on the alternate day schedule usually used when beginning to taper the drug.
 - “High Day” is the day when you take the higher dose of prednisone.
 - “Low Day” is the day when you take the lower dose of prednisone.

Example:

<i>Sun</i>	<i>Mon</i>	<i>Tue</i>	<i>Wed</i>	<i>Thu</i>	<i>Fri</i>	<i>Sat</i>	<i>Sun</i>
<i>60</i>	<i>20</i>	<i>60</i>	<i>20</i>	<i>60</i>	<i>20</i>	<i>60</i>	<i>20</i>
<i>High</i>	<i>Low</i>	<i>High</i>	<i>Low</i>	<i>High</i>	<i>Low</i>	<i>High</i>	<i>Low</i>

The above dose would be described as 60/20. 60 mg. is the dose being taken on the high day; 20 mg. is the dose taken on the low day. It may be helpful to write the dosage on a calendar to help you remember the correct dosage for the day.

- Off Day describes a day when your prednisone dose is 0 mg (when you don't take any prednisone).

How are the dosages of prednisone determined?

Schedules are determined by the body's response to the prednisone. Severity of myasthenia gravis, control of myasthenia gravis symptoms, and the development of adverse effects are all taken into consideration when your physician determines your dosage of prednisone. You and your physician will work together to try to reach the lowest dose possible to keep you strong enough to manage your daily activities. You may also discuss the addition of “steroid sparing” strategies, such as adding other immunosuppressants such as mycophenolate (Cellcept) or azathioprine (Imuran).

What is meant by the terms “Alternate Day,” “High Day,” “Low Day” and “Off Day”?

These are terms used to describe typical dosage patterns of prednisone.

- “Alternate Day” is when you take prednisone every other day (for example 10 mg today, take nothing tomorrow, take 10 mg the following day, etc.)

Is it important for others to know that I am taking prednisone?

Yes. Any doctor or dentist who is taking care of you should know you are taking prednisone. In case of an emergency, your family or close friends should also know you are taking prednisone. Carry an identification card stating that you are taking prednisone and any other medications, and include your doctor's name and phone number. This is all valuable information should an emergency occur.