Diabetes and Steroids---What patients should know:

What are corticosteroids?

Corticosteroids are man-made drugs that closely resemble cortisol, a hormone that your adrenal glands produce naturally. Corticosteroids are often referred to by the shortened term "steroids." Corticosteroids are different from the male hormone-related steroid compounds that some athletes abuse.

What are some types of steroids?

Some corticosteroid medicines include cortisone, prednisone, and methylprednisolone. Prednisone is the most commonly used type of oral steroid. Many times persons may receive something commonly known as a “medrol dose pack” when they visit a urgent care or E.R. clinic.

What type of illnesses are treated with steroids?

Steroids are the most powerful medication we have to reduce inflammation and swelling and are used in conditions that have this symptom. Steroids are used frequently for breathing problems including asthma and emphysema (COPD). They are used for many different types of joint or muscular skeletal illnesses including some types of arthritis & back pain. Steroids are also used for allergic reactions and sometimes in some respiratory infections along with an antibiotic. Steroids are frequently used in some types of rashes like poison ivy or eczema.

How are steroids given?

Steroids can be given in pill form, in the muscle as a shot, in the vein (IV) and in joints (like knee or back injections). Steroids are also contained in many inhalers, creams and nasal sprays but these forms have very limited effect on blood sugar and the body as a whole and are not the subject of this handout.

Diabetes and steroids...what’s the problem?

Steroids increase blood sugar in persons with diabetes. The higher the amount or dose the more it raises blood sugar. It is not unusual for someone with well controlled blood sugars to have blood sugar readings 200 or more points higher than their usual blood sugar readings when they take steroids.
What do I do if steroids are recommended or prescribed?

Remind the doctor that you have diabetes and ask if your condition can be controlled without steroids. (Sometimes steroids can be an optional treatment that helps illnesses but is not absolutely necessary). If the health care provider feels that your problem does need steroids then have a plan to manage your sugars if they get high. Many times steroids are given in a tapering dose ....meaning you start on a higher dose then “wean down” the dose over 5-10 days. Your sugar will be higher on the higher doses of the steroids.

Diabetes and Steroids..your plan:

1. Plan to take your blood sugar more frequently while taking steroids (3-6x/day)

2. Be especially careful with maintaining your eating plan designed for your diabetes. If you eat a lot of carbohydrates or larger portions your sugar will rise faster.

3. If on oral pills to treat your diabetes know what pill to increase if blood sugars get above a certain level.

4. If on insulin be sure to have a sliding scale of how to dose your insulin if your blood sugar gets above a certain level.

5. If on an insulin pump frequent correction boluses may need to be done.

6. The healthcare provider may need to call the person that manages your diabetes for exact information if at a urgent care or emergency room.

7. If recommended to take steroids for a extended time (more then 5-10 days) make an appointment with your diabetes provider to develop a long term plan.

What are some common ways the high blood sugars are managed?

If on oral pills, sometimes a Sulfonylurea such as glimepiride (Amaryl), glipizide (Glucotrol), glyburide (DiaBeta) may be given to take if blood sugar goes over 200. If the person already takes these medications they may be instructed to take a higher dose then their normal dose.

Some patients with more complex diabetes may be given short acting insulin to take on a sliding scale for high blood sugars.

Questions:

Call your health care provider that manages your diabetes if you have high blood sugars and are taking steroids for further individual instructions.

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