

Parent and Carer's Information Leaflet

Prednisolone

Individual Prednisolone Plan for (Name of child/young person)

mg	times per day	For	week/s
mg	times per day	For	week/s
mg	times per day	For	week/s
mg	times per day	For	week/s
mg	times per day	For	week/s
mg	times per day	For	week/s
mg	times per day	For	week/s
mg	times per day	For	week/s
mg	times per day	For	week/s
Now stop medication			

Special Instructions:.....

.....

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Professional's Signature..... **Professional's Name**..... **Date**.....

For further advice:

Children's Epilepsy Nurse Specialists:

Derby Rachael Wheway
 Mansfield Kirsten Johnson
 Nottingham Catie Picton & Ann Brown
 Leicester

☎ 01332 785103
 ☎ 01623 622515 ext 6178
 ☎ 0115 9249924 ext 63328
 ☎ 0116 2586908

CEWT website

www.cewt.org.uk

Epilepsy Action Website:

www.epilepsy.org.uk

Prednisolone

Prednisolone (corticosteroid) is a medicine that is sometimes used in the treatment of epilepsies which are not controlled well by other antiepileptic (anticonvulsant) medicines. This includes the treatment of Infantile Spasms / West syndrome, severe worsening of other epileptic encephalopathies, and non-convulsive status. It is also used to treat other conditions such as asthma, croup and rheumatoid arthritis. Prednisolone is available as a tablet, soluble tablet or injection. It is usually given as a number of 5 mg tablets.

How do I use it?

- Prednisolone is given in a high dose for the first two weeks and then the dose is tailed off for 5-8 weeks.
- The usual maximum dose is 60 mg per day.
- The tablets should be taken with or soon after food.
- The tablets may be crushed and can be taken with water, fruit juice or milk. They can be dispersed in water.
- If a dose of prednisolone is forgotten and you remember later that day, the dose is taken then. If you only remember the missed dose the next day, do not give extra, just give the next day's dose as planned.
- If your child vomits within 15 minutes of taking a dose of the medicine then give the dose again; if your child vomits after 15 minutes of taking the dose, then **do not** give it again.

Use with other medicines?

Most over-the-counter medicines, antibiotics and Paracetamol (Calpol) can be taken safely with Prednisolone. Prednisolone can be taken safely with other anti-epileptic medicines. Prednisolone may have an effect on how well other medications work in the body. For example, it may reduce the effect of insulin in people with diabetes. There is an increased risk of stomach bleeds, reflux and ulcers if taken with aspirin or NSAIDs (e.g. ibuprofen).

If your child is seeing a health professional for any reason mention that your child is taking prednisolone.

Keep a seizure diary if you can and remember to always bring all the medicines with you to clinic appointments.

What are the common side-effects?

If you are concerned about any side effects discuss with your doctor or nurse.

1. People who take prednisolone for a long period of time are more prone to infections as their immune system can become weak. These infections may be much more severe than usual. The symptoms of infection may be masked by the prednisolone. Avoid direct contact with people with chickenpox and measles whenever possible.

Chicken pox infection can be fatal to those on prednisolone. If in contact with this infection occurs while on prednisolone you should contact your doctor or nurse immediately. They will consider the need for zoster immune globulin. If your child shows signs of infection they will need aciclovir intravenously (by 'drip').

Measles exposure is treated with intravenous immunoglobulin.

2. **Fever.** If your child is unwell with a high temperature it is important to get them seen by a doctor. Children on steroids are more likely to need antibiotics.
3. **Immunisations.** Live vaccines (e.g. MMR) must not be given to children on prednisolone. They should not be given until prednisolone has been stopped for at least 3 months.
4. Some patients develop stomach ache, indigestion and may develop peptic or oesophageal ulcers which may be treated with medication.

5. **Candida** infection (thrush) of the mouth or around the bottom may occur and can be treated with medication.
6. **Blood pressure** may increase, but is usually not dangerous. Your doctor should check for this.
7. **Potassium** levels in the body may fall and a blood test (U&E's) can be performed 5-10 days after starting Prednisolone.
8. Prednisolone can lead to problems with raised **glucose** in the blood (diabetes). Your doctor will normally monitor this with urine tests.
9. Occasionally prednisolone may cause an increase in appetite.
10. Some children get mood changes on Prednisolone, e.g. a bit miserable and irritable during the first few days or even some get strangely happy and "bubbly" (euphoric).

For further information please refer to the manufacturer's patient information leaflet.