NHS
Lancashire Teaching Hospitals
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# Information for patients and carers

## Steroids for Radiotherapy During Brain Cancer Treatment

# Overview

Radiotherapy can sometimes cause some swelling in the brain in and around the treatment area. Steroids are usually prescribed to counteract this.

The steroid we most commonly use when patients are having radiotherapy is Dexamethasone. Steroids are prescribed with a reducing course, meaning the quantity of steroid that you take will reduce in time. Your steroid regime will be decided by your Neuro-Oncology Consultant to ensure that you reduce the steroid dose gradually.

# Side effects of taking steroids

Side effects of steroid tablets can include:

Short term usage

- Indigestion or heartburn
- Increased appetite, which could lead to weight gain
- Difficulty sleeping
- Changes in mood and behaviour, such as feeling irritable or anxious
- High blood sugar or diabetes.

Long term usage

- Increased risk of infections such as chickenpox, measles and shingles
- Weakening of the bones (osteoporosis)
- High blood pressure
- Cushing's syndrome – which can cause symptoms such as thin skin that bruises easily, a build-up of fat on the neck and shoulders; and a red, puffy, rounded face
- Eye conditions, such as glaucoma and cataracts
- Mental health issues, such as depression or suicidal thoughts - get an urgent GP appointment or call 111 if this happens.

Most side effects will pass once treatment stops.

## Coping with side effects of taking steroids

The following tips may help reduce the side effects of steroid tablets:

- **take your tablets in the morning with breakfast** (although some specially coated tablets

can be taken without food) – this may help prevent indigestion, heartburn and sleeping difficulties

- **eat a healthy, balanced diet and exercise regularly** – this may help prevent weight gain and osteoporosis

- **avoid close contact with people who are ill; especially people who have measles, chickenpox or shingles** – get medical advice as soon as possible if you think you may have been exposed to someone with an infection

- **ensure your vaccines are up-to-date** – but do not have any "live" vaccines, such as the shingles vaccine.

We may need to reduce the dose or suggest taking the tablets less often (for example, every other day) if you are having side effects.

We may also sometimes recommend other medicines to take alongside steroids to protect you from some of the side effects. For example, Lansoprazole/Omeprazole should always be taken alongside steroids to protect the stomach until your course of steroids is complete.

## Reducing steroids

Never stop taking steroids suddenly, please follow the reducing course that has been prescribed to you. If you start to experience an increase in neurological symptoms such as headaches or dizziness whilst reducing your steroids, seek medical advice as your steroid dose may need to be increased again. Sometimes patients may need to stay on a low dose of steroids for longer. This will be managed by your primary oncology team.

# Your regime

**Dexamethasone tablets**

Start Date: _____

Take_____mg each morning and _____mg each lunchtime for____ day(s), then

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Take_____mg each morning and _____mg each lunchtime for____ day(s), then

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Take_____mg each morning and _____mg each lunchtime for____ day(s), then

## Contact details

Should you require further advice or information, please contact:
Radiotherapy Reception **(01772) 522923**
Appointments **(01772) 522931**
Transport **(01772) 522295**

**If you would like to watch a short information video about radiotherapy, please scan the QR code below.**

## Sources of further information

www.lancsteachinghospitals.nhs.uk
www.nhs.uk
www.accessable.co.uk
www.patient.co.uk
www.lancsteachinghospitals.nhs.uk/veteran-aware
https://bepartofresearch.nihr.ac.uk/

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Our patient information group review our leaflets regularly, if you feel you would like to feedback on this information or join our reading group please contact on email address: patientexperienceandinvolvem@LTHTR.nhs.uk

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