

Prednisone

Immunosuppressive medicine

*Pronounced: **pred**-nuh-zone (no brand names)*

What is prednisone?

Prednisone is in a group of medicines called *steroids*. Your body makes small amounts of steroids naturally. Large amounts of some kinds of steroids can suppress your immune system and reduce inflammation. Prednisone helps prevent rejection and also helps reverse rejection after it starts.

Your Dose

Prednisone comes in different strengths, including 1 mg, 2.5 mg, 5 mg, and 10 mg. Your prednisone dose is based on 3 main factors:

- Your body weight
- If you have had rejection episodes before
- How long it has been since your transplant

At first, you will take prednisone 2 times a day. As time goes on, your dose will be lowered to once a day. After a while, some transplant patients are able to stop taking prednisone. Prednisone is also given in high doses as a treatment for rejection.

After the period of high doses right after transplant, most people take one 5 mg tablet a day. Your dose may change.

How do I take it?

Take prednisone with food so that it does not upset your stomach.

How is it stored?

Store prednisone in a closed container at room temperature.

What are the side effects?

Prednisone has several side effects. Many occur soon after starting the medicine and should improve or go away as your doses are lowered. The most common side effects are:

Many patients can stop taking prednisone when their immune system is stabilized. It is important to lower your dose slowly. You should never stop taking prednisone all at once.

Risk of Infection

Prednisone reduces your immune system's ability to recognize and attack foreign organisms or tissue (such as your new heart). Because of this, it also reduces how well your body fights infections.

You will need to follow the infection prevention guidelines in Chapter 4, "Infections." Also, if you are wounded, your body will heal more slowly while you are taking prednisone.

Mood Changes

You may find that you are very emotional after your transplant. This is to be expected after any life-changing event or stress, such as major surgery. Prednisone – especially when it is taken at the high doses that are given right after transplant – can cause mood swings, or make your feelings more intense. Some patients may feel anxious or nervous, depressed, irritable, angry, or even joyful.

High Blood Sugar

High blood sugar (*hyperglycemia*) usually occurs soon after surgery when your prednisone dose is high. If you have diabetes, you may find it harder to control your blood sugar. If you do not have diabetes, you may still have high blood sugar, but this should improve as your dose is lowered.

Some people who have never had trouble with their blood sugar will have ongoing problems after their transplant. These people will need long-term treatment with either oral medicine or insulin shots.

Retaining Sodium

When your body holds on to sodium, it also holds on to fluids. This can cause your blood pressure to go up. To reduce this effect, eat a low-sodium diet. See Chapter 7, "Nutrition," to learn more about how to reduce sodium in your diet.

Upset Stomach or Ulcers

Take your prednisone with food to lessen stomach upset or irritation.

Increased Appetite

Prednisone can make you feel hungry all the time. You will need to resist the urge to eat more, since prednisone also increases fat deposits in your cheeks, back, and abdomen.

Skin Changes

There are several skin changes that can occur with prednisone. Please see the section on skin care in Chapter 5, “General Health Guidelines,” for tips on taking care of:

- Acne
- Thinning of the skin
- Stretch marks
- Easy bruising
- Increased hair growth

Eye Problems

You will most likely have some blurry vision right after your transplant when you are taking very high doses of prednisone. Long-term use of prednisone can also increase your risk of cataracts. We advise you to have an eye exam every 6 to 12 months after your transplant.

Muscle and Bone Changes

Prednisone can cause muscle weakness and the thinning of bone tissue. The best way to prevent these side effects is to exercise on a regular basis to strengthen your muscles and bones. Get plenty of calcium in your diet to help keep your bones strong. Exercise and a healthy diet can help prevent bone loss (*osteoporosis*).

Precautions

Long-term use of prednisone reduces your body’s ability to make its own steroids. **NEVER** stop taking your prednisone suddenly. Your transplant team will slowly lower your doses so that your body has a chance to start making its own steroids again.

Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns.

Cardiology Clinic:
Weekdays 8 a.m. to 5 p.m.,
call 206-598-4300.

After hours and on weekends and holidays, call 206-744-2500. Say you are a heart transplant patient. A nurse will assess your problem and help you.