Neonatology **Dexamethasone treatment** Information for patients, relatives and carers

Premature babies who need prolonged breathing support on a breathing machine (ventilator) are at risk of developing a condition called chronic lung disease or bronchopulmonary dysplasia. This is because immature, fragile lungs can easily become inflamed and scarred. Babies who have chronic lung disease or bronchopulmonary dysplasia need more help with their breathing and are more likely to stay longer in hospital and/or have problems with their development when they go home.

Why is dexamethasone being suggested?

Your baby currently needs a considerable amount of support and oxygen on the breathing machine. Unfortunately, this means that your baby is at higher risk of developing severe chronic lung disease (CLD) or bronchopulmonary dysplasia (BPD).

Although your baby needs to be on a breathing machine at the moment, support from the machine itself can damage the lungs. Therefore, the doctors would like to start a steroid medication called dexamethasone to help your baby come off the breathing machine and their lungs can start the long process of healing and repair.

We have written this leaflet to answer the most frequently asked questions and we hope it is helpful. If you have any questions, please ask us.

Why is dexamethasone used?

Dexamethasone is a steroid that is used in many conditions to reduce inflammation.

When does dexamethasone get started?

Generally doctors will start dexamethasone when the baby is over one week of age and needing a high level of breathing support and oxygen. Research shows that starting dexamethasone after one week of age is the best time for the baby as the benefits then outweigh the side-effects.

Are there any side-effects of starting dexamethasone?

We may see side-effects when the baby is having dexamethasone but not every baby has them. The side-effects stop when the dexamethasone is stopped. All the side-effects can be treated.

The side-effects include:

- High blood sugars
- High blood pressure
- Stomach irritation

- Poor growth this gets better once the baby is no longer on dexamethasone
- A small increased risk of infection we would always make sure that your baby shows no signs of infection before we start dexamethasone.

There is some suggestion that there may be an increased risk of cerebral palsy (weakness or stiffness of one more limbs) and / or slower development compared to children of the same age. This has not yet been confirmed, however, it is important to know about. The risk of cerebral palsy and slower development is increased in premature babies, but dexamethasone may add to this risk. In these situations, we do need to weigh the risks of continued stay on the breathing machine with those of giving your baby dexamethasone.

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3313 0088** (Charing Cross, Hammersmith and Queen Charlotte's & Chelsea hospitals), or **020 3312 7777** (St Mary's and Western Eye hospitals). You can also email PALS at **imperial.pals@nhs.net** The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Alternatively, you may wish to complain by contacting our complaints department: Complaints department Fourth floor Salton House St Mary's Hospital Praed Street London W2 1NY

Email: ICHC-tr.Complaints@nhs.net Telephone: 020 3312 1337 / 1349

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team: imperial.patient.information@nhs.net

Wi-fi

We have a free wi-fi service for basic filtered browsing and a premium wi-fi service (requiring payment) at each of our five hospitals.

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