



Patient Information Leaflet

Corticosteroids in Pregnancy to Improve Preterm Birth Outcomes

Who is this information for?

Corticosteroids may be recommended for you by your doctor if there is a possibility that your baby could be born early. This information leaflet aims to answer some questions you may have.

What are corticosteroids?

Corticosteroids, or steroids, are a medication that may be offered to you to benefit your baby if there is a chance that your baby may be born early.

A single course of corticosteroids consists of two injections given 12 or 24 hours apart. Steroid injections are given into a muscle, usually in your thigh or upper arm.

Why have corticosteroids been advised?

Premature babies (born before 35 weeks of pregnancy) may have an increased risk of health problems including breathing problems, which are more serious the earlier the baby is born.

Steroid injections have been given for many years to women who are thought to have a high chance of having their baby early. Steroids help improve a baby's lung development which means they are less likely to have problems with their breathing after they are born.

A single course of steroids has also been shown to reduce the risks of other serious problems in babies that are born early, including bleeding into the brain, bowel inflammation and infection, and developmental delay in childhood. (Developmental delay means that a child might take a bit more time to learn and do things like talking, walking or playing, compared to other children their age.)

Who should be given corticosteroids in pregnancy?

Corticosteroids are recommended as a single course of two injections to women at risk of delivery at, or over, 23 weeks of pregnancy, and before 35 weeks of pregnancy.

This includes:

- If you are in active or suspected premature (also known as preterm) labour
- If your waters have broken early (even if you are not having contractions)
- If it may benefit your baby to be delivered early e.g. if your baby is not growing well
- If it may benefit you to deliver your baby early e.g. if you are seriously unwell, are experiencing heavy bleeding or have been diagnosed with severe pre-eclampsia (high blood pressure) in pregnancy.
- If your baby is at risk of being born around 23 weeks of pregnancy a senior doctor will discuss the benefits and risks of a course of corticosteroids with you. The evidence that they will be helpful for your baby at this stage of pregnancy is less clear.

What are the potential side effects for my baby and me?

Lots of research has been done around the world to ensure corticosteroids are a safe and beneficial treatment for you and your baby. Your healthcare team will discuss this fully with you.

Research teams continue to study this treatment to ensure safety for mothers and babies. There is no evidence that steroids cause any long-term health problems in either babies or mothers. Some studies suggest steroids may affect a baby's brain growth and behaviour but this mostly is in studies where multiple courses of steroids were used and more research is needed to clarify this.

You may experience some short term side-effects after your injections which could include:

- Soreness at the site of injection
- Flushing of face and chest
- Glucose appearing in your urine for 1-2 days
- Difficulty sleeping at night for 1-2 days
- Some reduction in your baby's movements for around 24 hours.

If you have been diagnosed with gestational diabetes during your pregnancy, or if you have a pre-existing diagnosis of diabetes, your blood sugar levels will be closely monitored by your healthcare team while you are receiving a course of corticosteroids as corticosteroids may increase your blood sugar level. If you are taking insulin, you may require a higher or additional dose following your steroid injection. Your healthcare team will advise you on this.

How long are corticosteroids effective for?

Steroids are of most benefit if the last dose is given to you between 24 hours and 1 week before the birth of your baby. There may still be some benefit even if your baby is born within 24 hours of the first dose.

Can I have more than one course of corticosteroids in this pregnancy?

If you do not give birth in the next 7 days after receiving a single course of steroids, a second dose may be considered by your doctor if your baby is still expected to be born prematurely, but the evidence to support the benefits of a second course is limited. Your doctor will discuss the potential benefits and risks of a second dose of steroids with you based on your individual situation.

When are corticosteroids not necessary?

It is not necessary to receive corticosteroids if you are unlikely to give birth within the next 7 days.

Steroids are not usually given after 35 weeks.

Steroids are no longer considered to be of enough benefit for babies if given after 37 weeks in the case of a planned Caesarean section.

Further Information:

<https://www.rcpi.ie/Faculties-Institutes/Institute-of-Obstetricians-and-Gynaecologists/National-Clinical-Guidelines-in-Obstetrics-and-Gynaecology>

<https://www.hse.ie/eng/about/who/acute-hospitals-division/woman-infants/clinical-guidelines/>

The Irish Neonatal Health Alliance <https://www.inha.ie/>