Antenatal Steroids for Expected Preterm (Early) Birth Information leaflet

Who is this leaflet for?

You have been given this leaflet because there is a chance your baby may be born early (before 34 weeks of pregnancy), and you have been offered a treatment called antenatal steroids.

This leaflet gives you information you may need to make an informed decision about having a course of antenatal steroids. It is an important decision that should be made by you, after a discussion with your maternity and neonatal team.



What are antenatal steroids?

Antenatal steroids (Corticosteroids) are a type of anti-inflammatory medicine given to a mother before she gives birth to increase the survival of her premature baby or babies and reduce the chances of health problems that may happen when a baby is born early.



Who should be offered antenatal steroids?

You will be offered steroids if there is an increased chance that your baby will be born before 34 weeks of pregnancy.

This includes:

- If you are in labour or might be in labour
- If your waters break early, even if you are not having contractions
- If you are advised to have your baby early. This may be because your baby is not growing well or because you have developed a problem in your pregnancy such as severe pre-eclampsia

Babies born between 22 and 35 weeks benefit most from steroids.



What are the benefits of steroids for my baby?

- Increases the chance of your baby surviving by **30%**
- Reduces the chance of brain bleeds by **45%**
- Reduces the chance of a preterm gut condition by **50%**
- Reduces the chance of breathing problems after birth

What are the potential side effects of steroids?

A course of steroids is considered safe for you and your baby

Short-term side-effects for you can include:

- Changes to your baby's movements, increased or decreased for 1-2 days (Please tell your maternity team immediately if this happens)
- Higher blood sugars if you have diabetes
- Discomfort where you had the injection

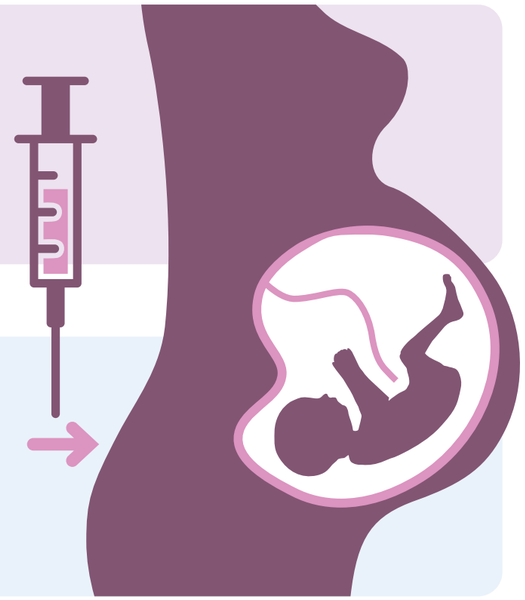
Some evidence has shown side effects in babies, including:

- Low blood sugars that need monitoring
- Reduced birth weight if born after 37 weeks

Some babies who receive steroids but are not born early have shown a small difference in their longer-term development in some studies. However, it's not clear if this is directly due to the steroids, related to the reason the steroids were given, or unrelated to the steroids. More research is needed to understand the exact cause.

How are steroids given?

Aim to give a full course of steroids more than 24 hours before birth. Courses lasting less than 24 hours are not currently recommended.



How long after having a course of steroids are they effective for?

They are most effective when given between 24 hours and 7 days before birth.

The positive effects of steroids are reduced if given more than 2 weeks before birth.

Can I have more than one course of steroids?

A second course of steroids can sometimes be given two weeks or more after the first course. This decision should be made between you and your maternity team. It is not recommended to have more than two courses of steroids.



Are there any reasons why I couldn't have steroids?

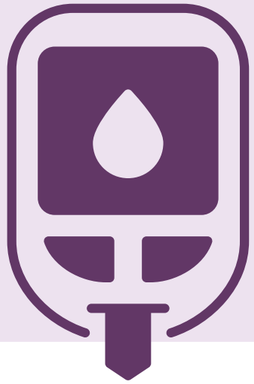
A personalised assessment will be done by your maternity team and discussed with you.

Steroids may not be appropriate in some situations, the risks and benefits would be discussed with you.

Pre-existing and Gestational Diabetes

If you have pre-existing or gestational diabetes steroids can affect your blood sugar control. You can find further information on RCOG patient information on Gestational Diabetes CLICK HERE.

If you have diabetes, you will be offered increased monitoring of your blood sugar levels while you have the steroids and may need to be admitted to hospital to be offered additional insulin treatment.



Making an informed choice

This information leaflet gives you a summary of information to help you to make an informed choice.

Making an informed choice means finding the best available information on your options, the benefits and possible risks of having or not having the treatment or care and using that information to decide what is right for you and your baby.

Using the **BRAIN** tool may help you to have conversations with your maternity and neonatal team and make an informed decision.



B How might this BENEFIT me or my baby?
R What are the known RISKS or side effects for me or my baby?
A What are the possible ALTERNATIVES to this option?
I What do I feel and think about these options? My INTUITION
N Doing NOTHING or NEXT STEPS What else do I need to know?
What questions can I ask to help me decide? What may happen if I do nothing?
How long do I have to decide?

If you have any questions or want to discuss your choices, please talk to your maternity and neonatal team.

Additional Information

Several charities provide information and resources for parents of babies born premature or sick in the UK including:

www.bliss.org.uk

www.tommys.org

www.little-heartbeats.org.uk

Related Patient Information

RCOG patient information - Corticosteroids in pregnancy to reduce complications from being born prematurely

RCOG patient information - When your waters break early

RCOG patient information - Having more than one baby (Multiple pregnancy)

RCOG patient information - Gestational diabetes

RCOG patient information - Pre-eclampsia

NICE guideline - Preterm labour and birth

