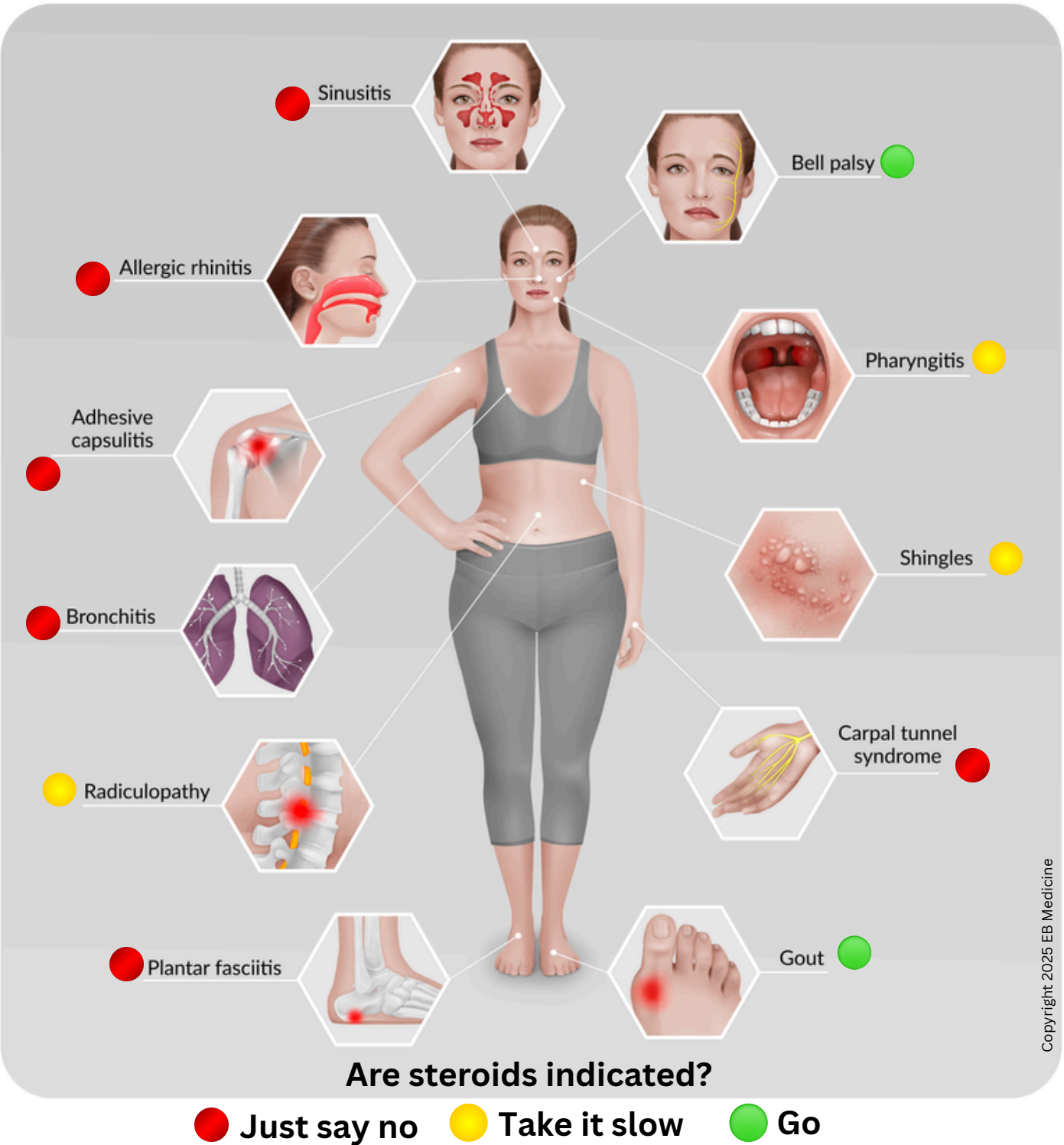


# Evidence-Based Medical Decision Making Guide for Prescribing Systemic Steroids

- Do not prescribe systemic corticosteroids for patients with **acute sinusitis**.<sup>1-3</sup>
- Do not prescribe systemic corticosteroids for patients with **allergic rhinitis**.<sup>1,4-6</sup>
- Systemic corticosteroids are not recommended for **adhesive capsulitis**.<sup>7</sup>
- Do not prescribe systemic corticosteroids for patients with **acute bronchitis**.<sup>1-3</sup>
- There is insufficient evidence to support routine use of systemic corticosteroids for patients with **lumbar radiculopathy**.<sup>1,8,9</sup>
- Systemic corticosteroids have not been studied and are not recommended for **plantar fasciitis**.<sup>1</sup>



- Systemic corticosteroids are recommended for patients within 3 days of the onset of symptoms of **Bell palsy**.<sup>1,10-12</sup>
- There is insufficient evidence to support routine use of systemic corticosteroids for patients with **acute pharyngitis**.<sup>1,13,14</sup>
- There is insufficient evidence to support routine adjunct use of systemic corticosteroids for patients with **herpes zoster**.<sup>1,15,16</sup>
- Do not prescribe systemic corticosteroids for patients with **carpal tunnel syndrome**.<sup>1,17-19</sup>
- Treatment with systemic corticosteroids appears to be a safe and effective alternative to nonsteroidal anti-inflammatory drugs in patients with **acute gout**.<sup>1,20,21</sup>



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*Many thanks to Evan Dvorin, MD, for his contribution to this resource.*



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# Evidence-Based Medical Decision Making Guide for Alternatives to Systemic Steroids

## Acute Sinusitis and/or Acute Bronchitis

*Alternatives:* Ask about most bothersome symptoms and tailor treatment accordingly . Guide patients on over-the-counter treatments tailored to symptoms and educate that typical duration of cough is 10 to 20 days.

## Allergic Rhinitis

*Alternatives:* Intranasal corticosteroids are first line. Educate patients on need to take nasal sprays daily for at least 14 days.

## Adhesive Capsulitis

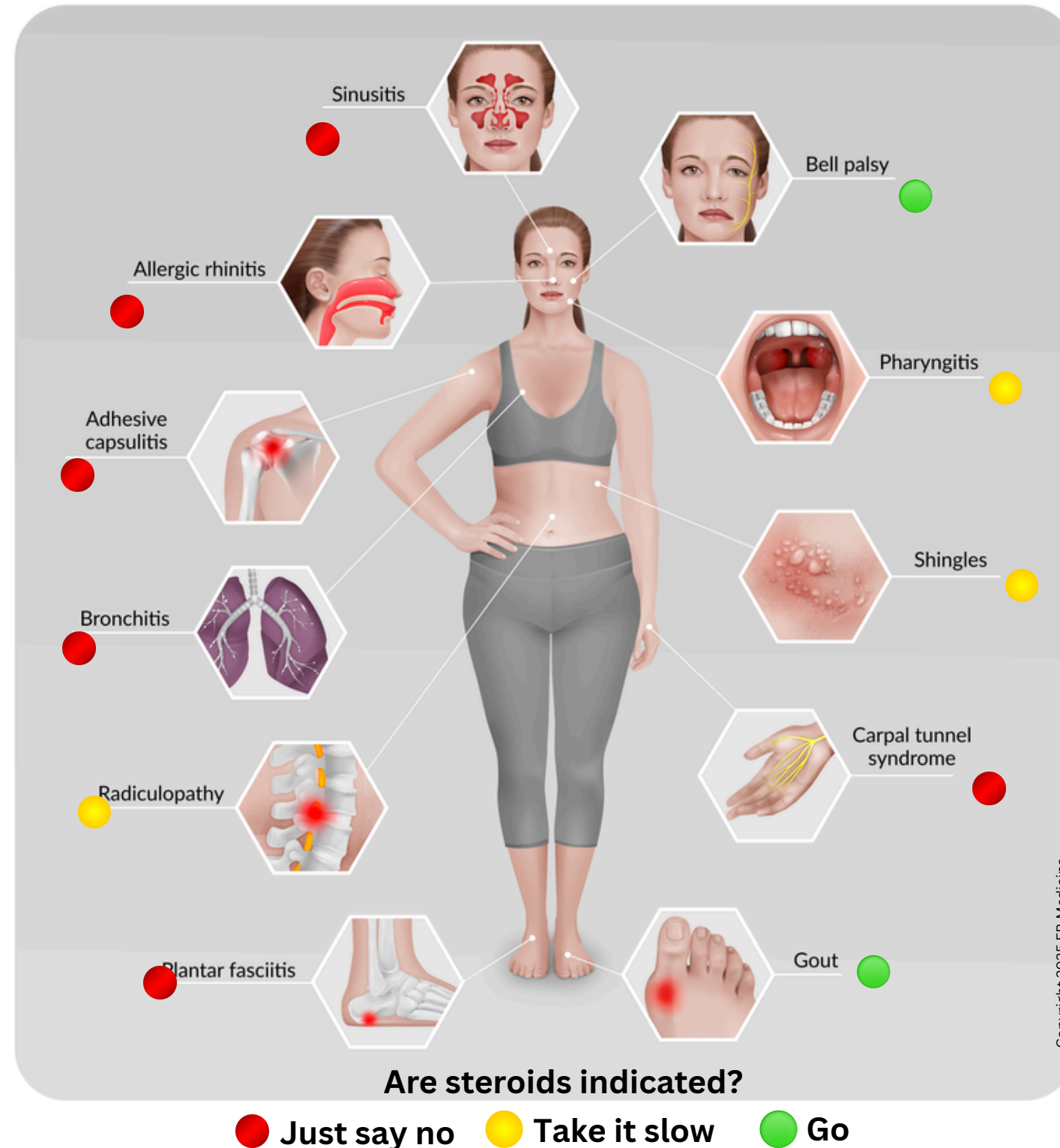
*Alternatives:* Intra-articular corticosteroid therapy, physical therapy, acupuncture, and suprascapular nerve blocks.

## Lumbar Radiculopathy

*Alternatives:* Pain control, physical therapy. Evaluate for acute neurological impairment. Educate patients that acute sciatica symptoms usually resolve in 1 to 2 months.

## Plantar Fasciitis

*Alternatives:* Rest, activity modification, stretching, strengthening exercises, physical activity, ice, and nonsteroidal anti-inflammatory drugs.



For reference only. Clinicians are responsible for all prescribing decisions.

## Bell Palsy

*Alternatives:* No current effective alternatives to systemic corticosteroids within 3 days of symptom onset.

## Acute Pharyngitis

*Alternatives:* Help with pain control, favoring over-the-counter medications. Evaluate for streptococcal pharyngitis.

## Shingles (Herpes Zoster)

*Alternatives:* Antiviral agents for varicella-zoster virus, pain control.

## Carpal Tunnel Syndrome

*Alternatives:* Wrist splints. Educate patients that mild symptoms often resolve within 2 months. Occasionally, patients need surgical decompression.

## Gout

*Alternatives:* Nonsteroidal anti-inflammatory drugs, colchicine.



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