

Courses of prenatal corticosteroids not associated with increased death of children

October 14 2013

Multiple courses of prenatal corticosteroids, compared with a single course, taken by pregnant women to help prevent preterm birth was associated with no increase or decrease in the risk of death or disability for their children at age 5, according to a study published by *JAMA Pediatrics*.

Preterm birth (between 24 and 33 weeks) is a significant health problem and a single course of prenatal (also known as antenatal) corticosteroid therapy is recommended for women at risk of [preterm birth](#). Questions remain about whether additional courses of [corticosteroids](#) might be safe and beneficial, the authors write in the study background.

Elizabeth V. Asztalos, M.D., of the Sunnybrook Health Sciences Centre, Toronto, Canada, and colleagues examined the effects of single vs. multiple courses of corticosteroids on the risk of [death](#) and neurodevelopmental disability (including cerebral palsy, blindness, deafness or abnormal attention or behavior) in children of mothers who participated in the Multiple Courses of Antenatal Corticosteroids for Preterm Birth Study (MACS). The follow-up study included more than 1,700 mothers and their children.

Study findings indicate no difference in the risk of death or neurodevelopmental disability: 217 of 871 children (24.9 percent) in the multiple-courses group vs. 210 of the 848 [children](#) (24.8 percent) in the single-course group.

"Multiple courses, compared with a single course, of antenatal corticosteroid therapy did not increase or decrease the risk of death or disability at 5 years of age. Because of a lack of strong conclusive evidence of short-term or long-term benefits, it remains our opinion that multiple courses should not be recommended in women with ongoing risk of preterm birth," the study concludes.

More information: *JAMA Pediatr.* Published online October 14, 2013. [DOI: 10.1001/jamapediatrics.2013.2764](https://doi.org/10.1001/jamapediatrics.2013.2764)

Provided by The JAMA Network Journals

Citation: Courses of prenatal corticosteroids not associated with increased death of children (2013, October 14) retrieved 19 April 2024 from <https://medicalxpress.com/news/2013-10-courses-prenatal-corticosteroids-death-children.html>

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