

Glucocorticoids associated with increased risk for infection, even at low doses

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Glucocorticoids are associated with an increased risk for infection, even at doses as low as 5 mg or less per day. These findings are significant, as low-dose glucocorticoids are generally considered safe and are widely prescribed. Physicians should consider this information when weighing the benefits and risks of glucocorticoid treatment for patients with RA. An observational cohort study is published in *Annals of Internal Medicine*.

Glucocorticoids are effective for the treatment of RA when added to disease-modifying antirheumatic drugs (DMARDs). The goal is short-term use, yet up to 60 percent of patients with RA remain on long-term glucocorticoids, especially at low doses. While the risk for infection at high doses is well-established, the risk with low-dose [glucocorticoid](#) therapy is less clear.

Researchers from the University of Pennsylvania used claims data to study more than 200,000 patients with RA who had been receiving stable DMARDs, including biologics, for the preceding 6 months and then compared them to patients not receiving glucocorticoids. The study population included an older, Medicare population and a younger, generally healthier, mostly commercially insured population. They found that patients receiving higher dose glucocorticoids (>10 mg/day) had more than twice the risk of serious infection as patients not receiving glucocorticoids, although few patients were on these doses. Even patients on the lowest dose had about a 30 percent increase in the risk of [infection](#). According to the study authors, glucocorticoids may continue

to be an important part of treatment for many [patients](#), especially if other treatments are not fully controlling their RA, but these findings should help physicians better understand their potential risk.

More information: Study:

<https://www.acpjournals.org/doi/10.7326/M20-1594>

Editorial: <https://www.acpjournals.org/doi/10.7326/M20-6010>

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