Overuse and abuse of cortisone

Kortizonun aşırı ve yanlış kullanımı

O. Şahap Atik, MD.
Department of Orthopedics and Traumatology, Medical Faculty of Gazi University, Ankara, Turkey

The serious side effects of cortisone are well-known and documented; however, many doctors ignore them. The most common complications faced by orthopedic surgeons are joint infection, tendon weakening or rupture, osteoporosis, deterioration of cartilage within a joint, osteoarthritis, and osteonecrosis. These serious conditions may require major surgeries like arthroplasties.[1]

First of all, cortisone is not for all. While the injections help some patients significantly, at least for a period of time, others do not get any relief. Some patients’ disease is too far advanced to respond to this approach, or any conservative approach.

For instance, osteoarthritis results from a complex system of interacting mechanical, biological, and biochemical factors.[2] It is a major cause of chronic musculoskeletal pain and dysfunction. There are studies demonstrating discordance between pain and radiograph.[3] Therefore, we must treat the patients and not the radiograph or computed tomography or magnetic resonance imaging.[4]

I believe that use of corticosteroids should be limited to the certain conditions that have been proven to be positively and safely influenced by them, and close follow-up is required. In general, we must not inject cortisone more often than three times a year. Too many injections increase the risk of side effects.

REFERENCES