Dexamethasone and Glioblastoma

Many treatment plans for patients with glioblastoma include dexamethasone alongside chemotherapy or other treatments. What is it, and why is it used?

First of all, this article can't explain for certain why dexamethasone has been prescribed to your loved one: that's for your doctor to do. Your doctor should always be able to tell you why a given drug has been prescribed, and how it is supposed to help. You should never feel like you can't ask for that information, even if you think it's been explained before. You should always feel like you understand and fully participate in your family's care decisions.

Generally speaking, dexamethasone is used to control swelling. It is a glucocorticoid: a steroid of the same family as hydrocortisone (the active drug in anti-itch creams). Dexamethasone is very common—it is prescribed more than one million times per year in the US—and is used to treat a wide variety of conditions, from rheumatoid arthritis to multiple myeloma.

For glioblastoma patients, it is commonly prescribed to prevent or reduce swelling in the brain ("edema" or "peritumoral edema"). Edema can be very dangerous, and severe edema is life-threatening. They can cause symptoms ranging from dizziness and headaches to seizures and hallucination. Preventing or minimizing the effects of edema is crucial for the brain health and quality of life of many GBM patients, and a major priority in many treatment plans.

If your doctor has prescribed dexamethasone, it is very important to take the full course as close to the dosing schedule as possible. Stopping too early, or using it intermittently, can cause additional side effects or withdrawal symptoms.

Dexamethasone has a number of known side effects, from weight gain to insomnia. As with most drugs, it can have severe side-effects in rare cases. More information about these side effects, and dexamethasone generally, can be found on MedLinePlus.

Sources:
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