# Article information:

2023版《糖皮质激素类药物临床应用指导原则》速览
<https://mp.weixin.qq.com/s/GPVzSCeq9rGcG_yMh0YBTQ>

# Article summary:

1. The Chinese Medical Association Endocrinology Branch and the Chinese Endocrinology and Metabolic Diseases Specialty Alliance have updated and revised guidelines for the clinical use of glucocorticoids, including adding information on immunization precautions for users of glucocorticoids and their clinical application in COVID-19.

2. Glucocorticoids can cause adverse reactions to multiple organ systems, including skin thinning, weight gain, hypertension, osteoporosis, glucose metabolism disorders, and increased risk of infection.

3. Precautions for treatment include using the minimum effective dose for the shortest duration possible, monitoring for adverse reactions during drug use, assessing risk factors for complications before starting treatment, and being aware of potential withdrawal reactions or rebound phenomena when stopping or reducing doses.

# Article rating:

Appears moderately imbalanced: The article provides some useful information, but is missing several important points or pieces of evidence that would be required to present the discussed topics in a balanced and reliable way. You are encouraged to seek a more balanced perspective on the presented issues by exploring the provided research topics and looking at different information sources.

# Article analysis:

The article provides a brief overview of the updated guidelines for the clinical use of glucocorticoids in China. While it covers various aspects of glucocorticoid therapy, including dosage, administration routes, and potential side effects, it lacks depth and detail in some areas.

One potential bias in the article is its focus on the benefits of glucocorticoid therapy while downplaying its risks. For example, while it mentions that glucocorticoids can cause adverse reactions to multiple organ systems, it does not provide enough information about the frequency and severity of these reactions. Additionally, the article does not explore alternative treatments or non-pharmacological interventions that may be effective for some conditions.

Another issue with the article is its one-sided reporting on the use of glucocorticoids in pregnancy. While it briefly mentions that caution should be exercised when using these drugs during pregnancy, it does not provide any evidence or specific recommendations for their use in this population. This lack of information could potentially lead to inappropriate prescribing practices and harm to both mother and fetus.

The article also contains some unsupported claims, such as stating that synthetic glucocorticoids can be protected from oxidative inactivation by type 2 isozymes by fluorination, methylation, or methyloxazolinylation without providing any evidence or references to support this claim.

Furthermore, the article does not present counterarguments or alternative perspectives on the use of glucocorticoids. For example, while it acknowledges that long-term use can lead to osteoporosis and muscle atrophy, it does not discuss how these risks can be mitigated or avoided altogether.

Overall, while the article provides a useful overview of the updated guidelines for glucocorticoid therapy in China, it would benefit from more detailed information on potential risks and alternative treatments. Additionally, presenting both sides equally would help readers make informed decisions about their healthcare options.

# Topics for further research:

* Alternative treatments for conditions commonly treated with glucocorticoids
* Risks and frequency of adverse reactions to glucocorticoid therapy
* Evidence-based recommendations for the use of glucocorticoids in pregnancy
* Strategies for mitigating or avoiding osteoporosis and muscle atrophy associated with long-term glucocorticoid use
* Comparison of the efficacy and safety of different administration routes for glucocorticoids
* Mechanisms of action and potential side effects of synthetic glucocorticoids

# Report location:

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