Fludrocortisone (floo droe kor’ ti sone) is a medication that is used to replace steroids that are normally produced by your body. It is often used with other steroids to prevent side effects from certain cancer treatments and to keep your fluid and mineral balance. Fludrocortisone is not the kind of steroid commonly associated with muscle building effects. It is a tablet that you take by mouth.

Tell your doctor if you have ever had an unusual or allergic reaction to fludrocortisone or other steroid before taking fludrocortisone.

It is important to take fludrocortisone exactly as directed by your doctor. Make sure you understand the directions.

You may take fludrocortisone with food or on an empty stomach. Take your fludrocortisone in the morning. This mimics your body’s natural rhythm of steroid production.

If you miss a dose of fludrocortisone, take it as soon as you can if it is within 12 hours of the missed dose. If it is more than 12 hours since your missed dose, skip the missed dose and go back to your usual dosing times.

Do not stop taking fludrocortisone without telling your doctor. Make sure that you always have a supply on hand before you run out. It is likely that your doctor will tell you to continue taking fludrocortisone even after your cancer treatment has stopped.

Other drugs such as phenytoin (DILANTIN®), warfarin (COUMADIN®), rifampin (RIFADIN®), and neostigmine (PROSTIGMIN®) may interact with fludrocortisone. Tell your doctor if you are taking these or any other drugs as you may need extra blood tests or your dose may need to be changed. Check with your doctor or pharmacist before you start or stop taking any other drugs.

Alcohol may increase the risk of some side effects of fludrocortisone. Avoid drinking alcohol while being treated with fludrocortisone.

Fludrocortisone may damage sperm and may harm the baby if used during pregnancy. It is best to use birth control while being treated with fludrocortisone. Tell your doctor right away if you or your partner becomes pregnant. Do not breast feed during treatment.

Store fludrocortisone tablets, in the fridge, out of the reach of children.
• Tell doctors, dentists, and other health professionals that you are being treated with fludrocortisone before you receive any treatment from them. Carry a card or wear a medical alert bracelet/tag to inform doctors in an emergency that you are taking fludrocortisone as you may need extra steroids. Inform your caregiver/emergency contact of the same information.

Side effects are listed in the following table in the order in which they may occur. Tips to help manage the side effects are included.

<table>
<thead>
<tr>
<th>SIDE EFFECTS</th>
<th>MANAGEMENT</th>
</tr>
</thead>
</table>
| Nausea may rarely occur. There may be an increased risk of stomach problems such as bleeding ulcers, especially if you have had stomach problems before. | • Take your fludrocortisone after eating. Some medications such as ASA (e.g., ASPIRIN®) or ibuprofen (e.g., ADVIL®) may increase your risk of stomach problems.  
   • Do not stop taking any medication that has been prescribed by your doctor (e.g., ASA for your heart).  
   • For minor pain, try acetaminophen (e.g., TYLENOL®) first, but occasional use of ibuprofen may be acceptable. |
| Your body’s ability to handle illness or injury is weakened while you are taking fludrocortisone. | Check with your doctor if you have an infection, illness or injury. You may need a prescription for extra steroids to help you get better. |
| Blood sugar control may be affected in diabetics. | Check your blood sugar regularly if you are diabetic. |
| Swelling of hands, feet, or lower legs may occur if your body retains extra fluid. | If swelling is a problem:  
   • Elevate your feet when sitting.  
   • Avoid tight clothing. |
| Bone loss (osteoporosis) may occur over time. | Refer to Patient Guidelines for the Prevention of Osteoporosis in Women* or Guidelines for the Prevention of Osteoporosis for Men with Prostate Cancer on Hormone Therapy.* |

*Please ask your chemotherapy nurse or pharmacist for a copy.

SEE YOUR DOCTOR OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

• Signs of an infection such as fever (over 100°F or 38°C by an oral thermometer), shaking chills; severe sore throat, productive cough (coughing up thick or green sputum); cloudy or foul smelling urine; painful, tender, or swollen red skin wounds or sores.

• Signs of bleeding problems such as black, tarry stools; blood in urine; pinpoint red spots on skin; extensive bruising.
• Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heart beat, face swelling, or breathing problems.
• Signs of **heart problems** such as shortness of breath or difficulty breathing.
• **Seizures** or **loss of consciousness**.

**SEE YOUR DOCTOR AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:**
• Signs of **fluid** retention such as swelling of feet or lower legs, or significant weight gain.
• Signs of **low potassium** such as vomiting, muscle cramps, weakness, mental confusion, or numbness or tingling in feet or hands.
• Signs of **blood sugar changes** such as thirst and frequent urination.
• Severe or constant **headache** or headache not controlled with acetaminophen (e.g., TYLENOL®).
• **Changes in eyesight**.

**CHECK WITH YOUR DOCTOR IF ANY OF THE FOLLOWING CONTINUE OR BOTHER YOU:**
• Uncontrolled nausea, vomiting, diarrhea, or stomach pain.
• Easy bruising or minor bleeding.
• Mood changes.
• Skin changes such as slow healing, acne, or stretch marks, or abnormal hair growth.
• For diabetics: uncontrolled blood sugars.
• For women: changes in menstrual periods.

**REPORT ADDITIONAL PROBLEMS TO YOUR DOCTOR**