

CELESTONE



INFORMATION FOR PREGNANT WOMEN AT RISK OF PREMATURE BIRTH

WHY DO I NEED CELESTONE?

Celestone (betamethasone) is a glucocorticoid given to pregnant women at risk of premature birth between the 24th and 34th week of pregnancy and to certain women up to the 39th week under certain criteria. Celestone is used to promote pulmonary maturation and reduce the risks associated with respiratory difficulties.

Celestone promotes the production of surfactant, a key element in pulmonary maturation.

WHAT IS SURFACTANT?

It is a soft and viscous liquid found in a baby's lungs. Its presence is primordial and essential. If there is none or not enough of it, the baby could undergo respiratory distress during birth.

The lungs are made up of multiple alveoli (minuscule sacks) and during birth they inflate with air (inhalation) and deflate (exhalation), in time with the baby's breathing rate. It is inside each of these alveoli that the precious surfactant is found. During exhalation, surfactant prevents the walls of the alveoli from sticking together (like a deflated balloon) and promotes easy inhalation.

IS CELESTONE EFFECTIVE?

Studies have shown that taking Celestone before premature birth is associated with a reduction in respiratory distress syndrome in newborns and its associated complications, a reduction in newborn mortality as well as the risk of brain haemorrhage.

How is Celestone administered?

The drug is administered to the mother by intramuscular injection. The normal dose is 12 mg and repeated 24 hours later.

ARE THERE SIDE-EFFECTS FOR THE MOTHER?

When administered, the mother may feel pain at the injection site, but this pain is tolerable and for some it is quite minimal. Redness may also appear at the injection site.

The nurse will keep you under observation for 30 minutes after the injection of the first dose to make sure you do not have an allergic reaction and that you can properly tolerate the drug. Few allergic reactions have been observed. However, if you experience redness (hives), hitching, swelling of the face or respiratory difficulties, go to the obstetrics department immediately.

ARE THERE RISKS TO THE BABY?

The benefits of prenatal glucocorticoid treatment have now been firmly established. Betamethasone crosses the placenta and causes the production of enzymes that accelerate foetal pulmonary maturity.

Speak to your doctor to get more information regarding the benefits and risks associated with glucocorticoids.

DO YOU HAVE ANY OTHER QUESTIONS?

Contact your doctor or

GARE Clinic:	Nurse	819-966-6207 Monday to Friday (8:30 am to 4:00 pm)	
Obstetrics:	Birthing Unit	819-966-6395 24/7	

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