**4. Dermatologic Diseases**
- Psoriasis
- Severe burns/multifocal (Stevens-Johnson syndrome)
- Exfoliative dermatitis
- Severe atopic dermatitis
- Mycosis fungoides

**5. Algesic Drugs**

- Inappropriate use of analgesic conditions treatable as a side-effect of treatment for
  - Bronchial asthma
- Serum sickness
- Pannus of chronic arthritis
- Drug hypersensitivity reactions

- Intra-articular corticosteroids are used only as an alternative (to parrinaphene in the drug of first choice).

**6. Infectious Disease**

- Severe acute and chronic allergic and inflammatory disorders of any etiology, such as
  - Bronchiolitis obliterans
- Septicemia
- Malignant lymphoma
- Acute rheumatic fever
- Acute polyarthritis
- Ankylosing spondylitis
- Kawasaki disease

- Long-term corticosteroid therapy can be used to control the condition under treatment and when reduction in dosage is possible, the reduction should be gradual.

- Administration of live virus vaccines, including measles, should be considered in individuals receiving corticosteroids. If live virions are administered to patients who are receiving corticosteroids, the virions may be more virulent and the reactions to vaccines may be prolonged. The use of live virus vaccines in patients on long-term corticosteroid therapy can result in serious,甚至 fatal, reactions. For this reason, corticosteroids should be used only under the supervision of a physician who is experienced in the use of corticosteroids in the presence of such infections.

**7. Neoplastic Diseases**

- Cancer: Clinical use has not been established.
- Cancer of the chest: Caution is recommended in the use of corticosteroids in patients with a history of tuberculosis or sarcoidosis in whom adjuvant therapy may be required.

**8. Respiratory Diseases**

- Asthma and bronchitis
- Emphysema
- Chronic obstructive pulmonary disease
- Allergic bronchitis

- In the treatment of patients with chronic obstructive pulmonary disease, corticosteroids may be used in conjunction with other therapeutic measures, such as oxygen therapy, bronchodilators, and antibiotic therapy.

**9. Hematologic Disorders**

- Anemia
- Leukopenia
- Lymphoma

- In the treatment of patients with lymphoma, corticosteroids may be used in conjunction with other therapeutic measures, such as chemotherapy, radiation therapy, and antibody therapy.

**10. Gastrointestinal Diseases**

- Peptic ulcer disease
- Gastritis
- Enterocolitis
- Colitis ulcerosa

- In the treatment of patients with gastrointestinal disorders, corticosteroids may be used in conjunction with other therapeutic measures, such as antibiotic therapy, dietary therapy, and surgery.

**11. Endocrine Disorders**

- Adrenal insufficiency
- Hypogonadism
- Cushing’s syndrome
- Diabetes mellitus

- In the treatment of patients with endocrine disorders, corticosteroids may be used in conjunction with other therapeutic measures, such as insulin therapy, hormone replacement therapy, and surgical therapy.

**12. Neurologic Diseases**

- Headache
- Convulsions
- Meningitis
- Epilepsy

- In the treatment of patients with neurologic disorders, corticosteroids may be used in conjunction with other therapeutic measures, such as antiepileptic therapy, antibiotic therapy, and surgical therapy.

**13. Ophthalmic Diseases**

- Anterior uveitis
- Steroid-responsive posterior uveitis
- Retinal detachment

- In the treatment of patients with ophthalmic disorders, corticosteroids may be used in conjunction with other therapeutic measures, such as anti-inflammatory therapy, antibiotic therapy, and surgical therapy.

**14. Rheumatologic Diseases**

- Arthritis
- Myositis
- Scleroderma
- Polymyositis

- In the treatment of patients with rheumatologic disorders, corticosteroids may be used in conjunction with other therapeutic measures, such as non-steroidal anti-inflammatory drugs, physical therapy, and surgery.

**15. Dermatologic Diseases**

- Scleroderma
- Morphea
- Eczema
- Psoriasis

- In the treatment of patients with dermatologic disorders, corticosteroids may be used in conjunction with other therapeutic measures, such as phototherapy, immunomodulatory therapy, and surgical therapy.

**16. Otolaryngologic Diseases**

- Rhinitis
- Sinusitis
- Croup

- In the treatment of patients with otolaryngologic disorders, corticosteroids may be used in conjunction with other therapeutic measures, such as antibiotic therapy, decongestant therapy, and surgery.

**17. Gynecologic Diseases**

- Amenorrhea
- Ovarian failure
- Metrorrhagia

- In the treatment of patients with gynecologic disorders, corticosteroids may be used in conjunction with other therapeutic measures, such as hormone therapy, antibiotic therapy, and surgical therapy.

**18. Pediatric Diseases**

- Adrenal insufficiency
- Hypothyroidism
- Congenital adrenal hyperplasia
- Congenital hypothyroidism

- In the treatment of patients with pediatric disorders, corticosteroids may be used in conjunction with other therapeutic measures, such as hormone therapy, antibiotic therapy, and surgical therapy.

**19. Ocular Diseases**

- Glaucoma
- Cataracts
- Retinal detachment

- In the treatment of patients with ocular diseases, corticosteroids may be used in conjunction with other therapeutic measures, such as anti-inflammatory therapy, antibiotic therapy, and surgical therapy.

**20. Acute Nonspecific Tenosynovitis**

- Acute nonspecific tenosynovitis

- In the treatment of patients with acute nonspecific tenosynovitis, corticosteroids may be used in conjunction with other therapeutic measures, such as rest, ice, compression, and elevation (RICE).

**21. Acute Pancreatitis**

- Acute pancreatitis

- In the treatment of patients with acute pancreatitis, corticosteroids may be used in conjunction with other therapeutic measures, such as fluid replacement, nutritional support, and pain management.

**22. Burns**

- Burns

- In the treatment of patients with burns, corticosteroids may be used in conjunction with other therapeutic measures, such as fluid replacement, nutritional support, and pain management.

**23. Congestive Cardiac Failure**

- Congestive cardiac failure

- In the treatment of patients with congestive cardiac failure, corticosteroids may be used in conjunction with other therapeutic measures, such as diuretics, angiotensin-converting enzyme inhibitors, and cardiac surgery.

**24. Congestive Heart Failure**

- Congestive heart failure

- In the treatment of patients with congestive heart failure, corticosteroids may be used in conjunction with other therapeutic measures, such as diuretics, angiotensin-converting enzyme inhibitors, and cardiac surgery.

**25. Acute Respiratory Distress Syndrome**

- Acute respiratory distress syndrome

- In the treatment of patients with acute respiratory distress syndrome, corticosteroids may be used in conjunction with other therapeutic measures, such as ventilation, oxygen therapy, and antibiotics.

**26. Acute Renal Failure**

- Acute renal failure

- In the treatment of patients with acute renal failure, corticosteroids may be used in conjunction with other therapeutic measures, such as dialysis, angiotensin-converting enzyme inhibitors, and cardiac surgery.

**27. Acute Pancreatitis**

- Acute pancreatitis

- In the treatment of patients with acute pancreatitis, corticosteroids may be used in conjunction with other therapeutic measures, such as fluid replacement, nutritional support, and pain management.

**28. Acute Nonspecific Tenosynovitis**

- Acute nonspecific tenosynovitis

- In the treatment of patients with acute nonspecific tenosynovitis, corticosteroids may be used in conjunction with other therapeutic measures, such as rest, ice, compression, and elevation (RICE).

**29. Acute Pancreatitis**

- Acute pancreatitis

- In the treatment of patients with acute pancreatitis, corticosteroids may be used in conjunction with other therapeutic measures, such as fluid replacement, nutritional support, and pain management.

**30. Congestive Cardiac Failure**

- Congestive cardiac failure

- In the treatment of patients with congestive cardiac failure, corticosteroids may be used in conjunction with other therapeutic measures, such as diuretics, angiotensin-converting enzyme inhibitors, and cardiac surgery.

**31. Congestive Heart Failure**

- Congestive heart failure

- In the treatment of patients with congestive heart failure, corticosteroids may be used in conjunction with other therapeutic measures, such as diuretics, angiotensin-converting enzyme inhibitors, and cardiac surgery.

**32. Acute Renal Failure**

- Acute renal failure

- In the treatment of patients with acute renal failure, corticosteroids may be used in conjunction with other therapeutic measures, such as dialysis, angiotensin-converting enzyme inhibitors, and cardiac surgery.

**33. Acute Pancreatitis**

- Acute pancreatitis

- In the treatment of patients with acute pancreatitis, corticosteroids may be used in conjunction with other therapeutic measures, such as fluid replacement, nutritional support, and pain management.

**34. Acute Nonspecific Tenosynovitis**

- Acute nonspecific tenosynovitis

- In the treatment of patients with acute nonspecific tenosynovitis, corticosteroids may be used in conjunction with other therapeutic measures, such as rest, ice, compression, and elevation (RICE).

**35. Acute Pancreatitis**

- Acute pancreatitis

- In the treatment of patients with acute pancreatitis, corticosteroids may be used in conjunction with other therapeutic measures, such as fluid replacement, nutritional support, and pain management.

**36. Congestive Cardiac Failure**

- Congestive cardiac failure

- In the treatment of patients with congestive cardiac failure, corticosteroids may be used in conjunction with other therapeutic measures, such as diuretics, angiotensin-converting enzyme inhibitors, and cardiac surgery.

**37. Congestive Heart Failure**

- Congestive heart failure

- In the treatment of patients with congestive heart failure, corticosteroids may be used in conjunction with other therapeutic measures, such as diuretics, angiotensin-converting enzyme inhibitors, and cardiac surgery.

**38. Acute Renal Failure**

- Acute renal failure

- In the treatment of patients with acute renal failure, corticosteroids may be used in conjunction with other therapeutic measures, such as dialysis, angiotensin-converting enzyme inhibitors, and cardiac surgery.

**39. Acute Pancreatitis**

- Acute pancreatitis

- In the treatment of patients with acute pancreatitis, corticosteroids may be used in conjunction with other therapeutic measures, such as fluid replacement, nutritional support, and pain management.

**40. Acute Nonspecific Tenosynovitis**

- Acute nonspecific tenosynovitis

- In the treatment of patients with acute nonspecific tenosynovitis, corticosteroids may be used in conjunction with other therapeutic measures, such as rest, ice, compression, and elevation (RICE).
Patients should be observed closely for signs that might require dosage adjustment, including changes in clinical status resulting from remission or exacerbation of the disease, side effects (including drug responsiveness), and the effect of stress (e.g., surgery, infection, trauma). During stress, it may be necessary to increase dosage temporarily. If the drug is to be stopped after more than a few days of therapy, it should be withdrawn gradually. When the intravenous route of administration is used, dosage usually should be the same as the oral dosage. In certain overwhelming, acute, life-threatening situations, however, administration may be justified and may be in multiples of the oral dosages. The slower rate of absorption by intranasal administration should be recognized.

Shock
There is a tendency in current medical practice to use high-dose pharmacologic doses of corticosteroids for the treatment of unresponsive shock. The following dosages of dexamethasone sodium phosphate injection have been suggested by various authors:

**Author** | Dosage
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Cavanagh1 | 3 mg/kg of body weight per 24 hours as a constant intravenous infusion after an initial intravenous injection of 20 mg
Dietzman2 | 2 to 8 mg/kg of body weight as a single intravenous injection, followed by repeat injections at 4 to 6-hour intervals
Frank3 | 10 mg initially followed by repeat intravenous injection every 2 to 6 hours while shock persists
Schumer4 | 45 mg initially followed by repeat intravenous injection every 2 to 6 hours while shock persists

**REFERENCES:**

Dexamethasone Sodium Phosphate Injection, USP (Preservative Free) equivalent to 10 mg dexamethasone phosphate, is supplied in a single dose vial as follows:

**Product No.** | **NDC No.** | **Strength** | **Vial Size** | **Preservation**
-----------------|-------------|-------------|-------------|------------
501610 | 03220-316-10 | 10 mg | 1 mL (10 mg per mL)

This container closure is not made with natural rubber latex.

**Storage:** Store at 20° to 25°C (68° to 77°F) (see USP Control of Temperature). Sensitive to heat. Do not autoclave. Protect from freezing.