Commentary: Cortisone therapy in SLE

John R. Haserick, M.D.

When we first obtained cortisone in January 1950, it was not used for longer than five or six days, for fear of unknown and presumably severe reactions. We soon found our patients with systemic lupus erythematosus were suffering severe flare-ups, often with relapses that were worse than their original illness. To test the hypothesis that patients could receive steroids for long periods of time, we obtained three government grants for the purchase of cortisone, which at that time cost $27.00/100 tablets. Thereafter, we provided our SLE patients with continuous cortisone therapy for several months and, in some instances, years. Instead of losing 9 of 10 SLE patients as we did in the precortisone days of 1949, the mortality rate dropped to about 15%.

The use of massive dosages was a natural result of our experience in those early days when pharmacological experimentation was the order of the day. Today, of course, a dosage equal to 2300 mg of cortisone is not uncommon, particularly among patients with hematologic problems.

Pinehurst Dermatology, Pinehurst Medical Center, P.O. Box 669, Pinehurst, NC 28474.

Downloaded from www.ccjm.org on April 25, 2024. For personal use only. All other uses require permission.