



Apr 14, 2025

Version 1

🌐 Rediscovering Intramuscular Glucocorticoids: A Forgotten Strategy in Rheumatology? V.1

DOI

<https://dx.doi.org/10.17504/protocols.io.bp2l68bjkgqe/v1>

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Protocol Citation: Gianluca Poncina 2025. Rediscovering Intramuscular Glucocorticoids: A Forgotten Strategy in Rheumatology?. **protocols.io** <https://dx.doi.org/10.17504/protocols.io.bp2l68bjkgqe/v1>

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Protocol status: Working

We use this protocol and it's working

Created: April 14, 2025

Last Modified: April 14, 2025

Protocol Integer ID: 126672

Keywords: Rheumatoid arthritis, intramuscular glucocorticoid, methylprednisolone, depot glucocorticoids in rheumatology, rediscovering intramuscular glucocorticoid, depot glucocorticoid, management of rheumatoid arthritis, rheumatoid arthritis, forgotten strategy in rheumatology, rheumatology, gcs in ra, methylprednisolone 120 mg, clinical guideline, clinical indication

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Abstract

This scoping review protocol aims to systematically map the available evidence on the use of intramuscular glucocorticoids (IM-GCs) in the management of rheumatoid arthritis, with a particular focus on repeated administration regimens (e.g., methylprednisolone 120 mg or triamcinolone 80 mg administered 1–4 times yearly). The review will follow PRISMA-ScR guidelines and include a comprehensive search of major biomedical databases, incorporating both interventional and observational studies as well as clinical guidelines. The expected findings will clarify the clinical indications, effectiveness, and safety profile of IM-GCs in RA, addressing a key research question identified by the 2022 EULAR recommendations. This synthesis will support evidence-informed practice and guide future studies on the positioning of depot glucocorticoids in rheumatology.

ADMINISTRATIVE INFORMATION

- 1 **Title:** Rediscovering Intramuscular Glucocorticoids: A Forgotten Strategy in Rheumatology?
- 2 **Registration:** This protocol will be registered and publicly available on protocols.io.
- 3 **Authors:** Dr. Gianluca Poncina et al.
- 4 **Amendments:** Any important amendments to this protocol will be documented on protocols.io with a description, rationale, and date of change.
- 5 **Support:** No specific funding. Institutional support from the University of Padova – U.O.C. Reumatologia.

INTRODUCTION

- 6 **Rationale:** Despite historical use of intramuscular glucocorticoids (IM-GC) in RA, their role has become marginal in contemporary practice. EULAR guidelines highlight the need to investigate their effectiveness and safety, particularly in repeated administrations. This review aims to map the literature on IM-GC use in RA and other rheumatic diseases.
- 7 **Objectives:** To explore and map the available evidence on the effectiveness and safety of repeated intramuscular glucocorticoids in patients with RA, focusing on regimens such as methylprednisolone 120 mg or triamcinolone 80 mg administered 1–4 times per year.

METHODS

- 8 **Eligibility Criteria:** Inclusion criteria: - Adults with rheumatoid arthritis - Studies on IM-GC (e.g., methylprednisolone, triamcinolone) - Any study design (RCTs, observational, reviews, guidelines) - Outcomes on effectiveness or safety Exclusion criteria: - Non-rheumatic indications - Non-intramuscular glucocorticoids (unless comparison included) - Preclinical or animal studies - Conference abstracts without full text
- 9 **Information Sources Databases to be searched:** - PubMed/MEDLINE - Embase - Scopus - Web of Science - Cochrane Library - ClinicalTrials.gov

- 10 **Search Strategy:** draft search strategy will include terms for 'glucocorticoids', 'intramuscular', and rheumatic diseases. The final strategy will be adapted to each database and reported in full as supplementary material.
- 11 **Study Records Data management:** References will be managed using Zotero.
- 12 **Selection process:** Two reviewers will independently screen titles, abstracts, and full-texts.
- 13 **Data collection process:** Data will be charted using a standardized form.
- 14 **Data Items:** Study design, population, IM-GC type and dose, administration frequency, outcomes (effectiveness and safety), key findings.
- 15 **Outcomes and Prioritization:** Primary outcomes include disease activity control, flare prevention, patient-reported outcomes, and safety profile (AEs, metabolic effects).
- 16 **Risk of Bias in Individual Studies** As this is a scoping review, risk of bias will not be formally assessed, in accordance with JBI guidance.
- 17 **Data Synthesis:** Data will be synthesized narratively and presented in tabular format by type of IM-GC, disease setting, and outcome.
- 18 **Meta-bias(es):** Not applicable to scoping reviews.
- 19 **Confidence in Cumulative Evidence:** Not applicable to scoping reviews.