

Topical Therapies for Eczema

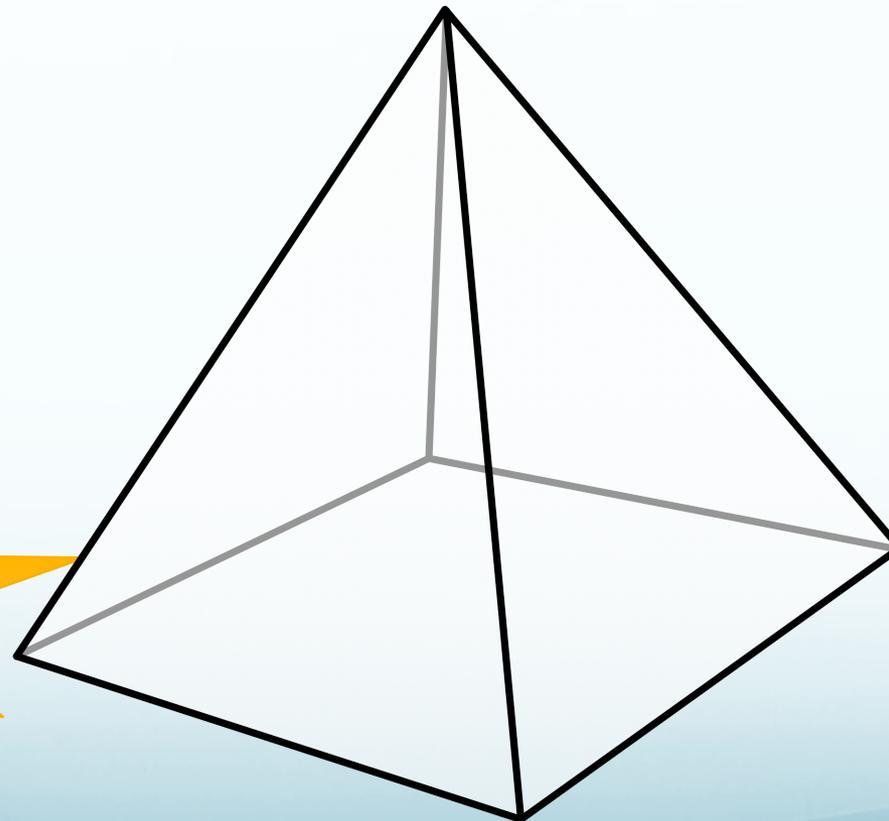
Multidisciplinary Atopic Dermatitis Program

Principles of Eczema Treatment

Moisturizers



**Anti-
inflammatio
n
medications**



Anti-Itch Medications

Antibiotics

Sometimes we need medicated creams and ointments to treat eczema because moisturizers are not strong enough on their own to decrease the inflammation in the skin



Topical Steroids



You don't
need to
be
afraid!!



Topical Steroids

- Topical steroids are a type of medicine cream or ointment.
- You put topical steroids on top of the skin.
- They are the standard way to treat for inflammation (when skin is red, bumpy, oozy or flaky)
- Not all topical steroids are the same. Some topical steroids are very weak, but others are strong.
- These medicines can be used safely when used according to your health care provider's instructions



There are many more. This list are some of the most commonly used.



Class and potency	Drug name, concentration (vehicle)
CLASS 1 (VERY POTENT)	Clobetasol propionate, 0.05% (ointment, cream, gel, solution)
CLASS 2 (POTENT)	Fluocinonide, 0.05% (ointment, cream, gel, solution) Mometasone furoate, 0.1% (ointment) Betamethasone dipropionate, 0.05% (cream, foam, ointment, solution)
CLASS 3-5 (MEDIUM)	Triamcinolone acetonide, 0.1% (cream, ointment)
CLASS 6 (LOW)	Fluocinolone acetonide, 0.01% (oil) Desonide, 0.05% (ointment, cream, foam)
CLASS 7 (LEAST POTENT)	Hydrocortisone 1%, 2.5% (cream, ointment)

How to Use Topical Steroids

- Use one time every day or two times every day
- Put it on all of the skin that is itchy, red, bumpy or flaky
- You can ask your doctor how much medicine you should put on



Possible Side effects

- Thinning of the skin and stretch marks
- Sometimes people hear that the topical steroids can slow growth. This can happen with steroids that are taken as a pill, but it is *very very rare* when we are using the medicine applied to our skin.
- Really bad eczema can sometimes cause slow growth if we do not treat it.

We will tell you how to **safely use topical steroids** to prevent these side effects



Don't worry
about skin
thinning **if your**
skin is still thick

Topical Steroid Safety



- There are some rare side effects if steroids are used for too long. One side effect is thinning of the skin. This is very rare and only happens if you use certain medications continuously for weeks and weeks.
- There are some parts of our skin that are more delicate, like the face, armpits, and groin. When we treat these areas, we will generally use less strong agents, for shorter periods of time, or only a few days a week.



That's
right, **no**
steroids!

Other Medications

- There are some creams or ointment medications for eczema that do not have steroids in them, and can decrease inflammation

Topical Calcineurin inhibitors

1. Tacrolimus ointment 0.03%, 0.1% (Protopic)
2. Pimecrolimus cream 1% (Elidel)

Topical Phosphodiesterase 4 Inhibitors

1. Crisaborole ointment (Eucrisa)

Other Medications

- These medicines may be used on delicate skin areas, like the face, groin, and armpits, or to treat inflamed eczema when we want to avoid topical steroids
- These medicines are also used on skin that frequently would have eczema breakouts, applying it to “keep away” the eczema
- Application site burning and stinging can occur but typically occurs during the first few applications



Boxed Warning

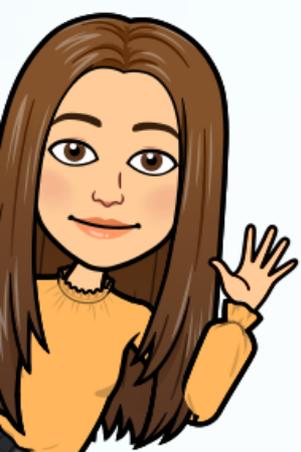
- The drugs **tacrolimus** and **pimecrolimus** have a safety warning of possible skin cancer and lymphoma, though many, many studies have not shown *any* increased risk.
- Dermatologists and allergists, along with official “guidelines” of care recommend their use in atopic dermatitis if there are problems or concerns with topical steroids.



Long term eczema control

- We will sometimes mix and match topical therapies. For example: apply a topical steroid AND a non-steroid cream/ointment (protopic, Elidel, or Eucrisa)
- These can be used safely with the goal to minimize and prevent rashes
- Proactively treating the eczema means treating the “hot spots” to keep the eczema away. For example: applying either a topical steroid or a non-steroid cream/ointment 2-3 times a week





Summary

- The goal is to have minimal eczema rashes, very little itch, and sleep that isn't disturbed by itching or scratching.
- We work toward this goal by using good skin care, avoiding triggers, and using medicines regularly or as needed to minimize the eczema!
- There are a lot of things we can do to treat your eczema, get it under control, and keep it under control.
- Eczema is complicated. If you have questions, then please ask!
- You can read more about eczema at www.nationaleczema.org or searching “Rady” and “Eczema” (<https://www.rchsd.org/programs-services/dermatology/eczema-and-inflammatory-skin-disease-center>)