TOPICAL CORTICOSTEROIDS

What are the aims of this leaflet?

This leaflet has been written to help you understand more about topical corticosteroids. It tells you what they are, how they work, how they are used to treat skin conditions, and where you can find out more about them.

What are topical corticosteroids and how do they work?

Steroids are naturally occurring chemicals, produced mainly by the adrenal glands in the abdomen. There are different types of steroids, and the type most commonly used to treat skin problems is known as a corticosteroid. Corticosteroids treat skin conditions by suppressing inflammation and reducing the amount of collagen in the skin. Corticosteroids that are applied to the skin in the form of creams, ointments, lotions, mousses, shampoos gels or tapes are known as topical corticosteroids (TCS).

TCS are available in four potencies: mildly potent, moderately potent, potent and very potent. Your doctor will decide on the correct strength for you on the basis of the nature of your condition, your age and the area of your body being treated.

What skin conditions are treated with topical corticosteroids?

TCS are used to treat a wide variety of inflammatory skin conditions, and may also be used to treat excessive scar tissue.

Will topical corticosteroids cure my skin condition?

Because TCS suppress inflammation rather than deal with the underlying cause of the inflammation, they do not usually cure the condition, although once treated the condition may not necessarily recur.
How should I apply topical corticosteroids?

You should use TCS as instructed by your doctor, who will explain where, how frequently and for how long to apply the medication. TCS are usually applied once or twice a day. Do not use a TCS for longer than your doctor has said.

Use enough of the preparation to cover the area to be treated, and for hairy regions apply in the direction of flow of your hair to minimize the build up of TCS at the bases of hairs; this might cause inflammation of the hair follicles (folliculitis). Your doctor may prescribe more than one TCS, of different potencies, for you to apply to different body regions, as some places (e.g. the face, the groin and under the arms or breasts) are more prone to side effects than others. If you are uncertain how to use the TCS ask your doctor for clarification. It is useful to complete the section at the end of this information leaflet to remember how frequently you should use it and for how long.

What are the side effects of topical corticosteroids?

When used correctly, TCS rarely cause significant side effects. However, if TCS (particularly the stronger preparations) are used for excessive periods, they may cause changes to the treated skin, including thinning, bruising, stretch marks, folliculitis and pimples, loss of skin pigment, and hair growth at the site of application. Burning or stinging is quite common in the first few days of treatment, however this usually clears up. Occasionally, an allergy to the TCS or to one of the other constituents of the topical preparation may develop, and cause more inflammation.

If applied for a long time or if used on an extensive area, the steroids can be absorbed into the blood system and cause internal side effects, e.g. suppressing the adrenal glands or causing Cushing syndrome (see leaflet on treatment with oral corticosteroids).

Is there anything I should do or avoid whilst applying topical corticosteroids?

If your TCS has been prescribed to treat some inflammatory skin diseases such as eczema or psoriasis, it is beneficial to also use emollients liberally and frequently, as these will increase the effectiveness of, and reduce the requirement for, the TCS.
Do not share your or other people’s TCS.

Be sure not to exceed the length of course recommended by your doctor.

**CAUTION:** This leaflet mentions ‘emollients’ (moisturisers). When paraffin-containing emollient products get in contact with dressings, clothing, bed linen or hair, there is a danger that a naked flame or cigarette smoking could cause these to catch fire. To reduce the fire risk, patients using paraffin-containing skincare or haircare products are advised to avoid naked flames completely, including smoking cigarettes and being near people who are smoking or using naked flames. It is also advisable to wash clothing and bed linen regularly, preferably daily.

**When should you not apply corticosteroids?**

TCS should generally not be used on skin infections such as impetigo, cold sores and fungal infections unless combined with an appropriate anti-infective agent. TCS may worsen some non-infectious skin diseases such as acne, rosacea or perioral dermatitis.

**Is steroid addiction a problem?**

The commonest problem with steroid creams and ointments is under use. This leads to eczema not being properly treated. In rare circumstances, over use of strong steroid creams and ointments can lead to thinning of the skin. If the steroids are overused on the face, this can sometimes trigger an acne-like problem, which then flares up when the steroids are stopped.

Severe eczema can require very potent steroids for control. These should not be stopped suddenly without medical advice or the eczema may flare up again. It is usually recommended that these should be tailed off gradually as advised by a doctor or nurse.

**Where can I find out more about topical corticosteroids?**

If you would like any further information about topical corticosteroids, or if you have any concerns about your treatment, you should discuss this with your doctor or pharmacist.

This information sheet does not list all the side effects that this medication can cause. For full details, please see the drug information leaflet that comes with your medicine.
More information can be found on the following websites:

http://www.patient.co.uk/health/topical-steroids
http://dermnetnz.org/treatments/topical-steroids.html

For details of source materials please contact the Clinical Standards Unit (clinicalstandards@bad.org.uk).

This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.

This leaflet has been assessed for readability by the British Association of Dermatologists’ Patient Information Lay Review Panel

Name of topical corticosteroid:
Site of application:
Frequency of application:
Duration of use:
How much to apply: