IMIQUIMOD CREAM

What are the aims of this leaflet?

This leaflet has been written to help you understand more about imiquimod cream. It tells you what it is, how it works, how it is used, and where you can find out more about it.

What is imiquimod, and how does it work?

Imiquimod is a topical immuno-modulator. The cream triggers the immune system to recognise abnormal cells and causes inflammation to remove them. It may also remove abnormal cells from the lymph drainage vessels around a tumour.

In the UK, two strengths of Imiquimod cream are available, a 5% cream (trade name Aldara®) and a 3.75% cream (Zyclara®).

What skin conditions are treated with imiquimod cream?

Imiquimod cream is licensed for the treatment of sun-damage in the form of some superficial pre-cancerous (actinic keratoses), cancerous skin conditions (superficial basal cell carcinoma) and external genital viral warts. The 3.75% cream is licenced for actinic keratoses only, while the 5% cream is licenced for all three conditions. It may be more effective than other non-surgical approaches for superficial basal cell carcinoma.

Imiquimod can also be used for other conditions such as nodular basal cell carcinoma, non-genital viral warts, molluscum contagiosum, keloid scarring, melanoma metastases, other pre-cancerous and cancerous lesions such as Bowen’s disease, actinic porokeratosis, cutaneous T-cell lymphoma, vulval intra-epithelial...
neoplasia, extra-mammary Paget’s disease and lentigo maligna. Although Imiquimod is sometimes used for these conditions, it is not licenced for them at present. Primary skin cancers such as melanoma and squamous cell carcinoma are not suitable for imiquimod treatment.

**Will imiquimod cream cure my skin condition?**

Imiquimod cream can cure or improve many skin problems but does not work for everybody, and the effects may not be permanent. If imiquimod works for your condition, your skin usually gets red and sore before it gets better. The redness and soreness settles about 2 weeks after stopping the treatment. If used for sun-damage, the skin will eventually appear much smoother. If you have more severe sun-damage, you may require repeated treatment courses in the future to maintain the improvement. You may need to see your healthcare provider for checkups after your treatment to look for any signs that your condition is coming back.

**How often should I use imiquimod cream?**

How often or for how long you should use imiquimod cream will depend on your skin condition and the advice given to you by your doctor. The number of applications per week and the length of the treatment course will vary depending on the reason for your treatment and the strength of cream you are prescribed. Your doctor will discuss a treatment schedule with you.

If you have widespread sun-damage, then the treatment area should be broken up into smaller areas, usually not using more than one or two sachets per application, depending on which strength of cream is used. For example, first treatment of the scalp, then the face. The more cream is used in any application, the more severe the side effects may be.

**How much should I use?**

You should usually apply imiquimod cream at night and wash it off in the morning. Make sure you always clean your skin prior to the application of the cream. Cut a corner of the sachet and squeeze some cream onto your finger to apply it to the affected area. Also put some cream on about a centimetre of healthy looking skin around the affected area.

After 20 minutes or so, you may then apply a bland moisturiser if necessary.
In general, you should not cover the treated area with a plaster or dressing unless advised otherwise by your doctor.

You should wash your hands thoroughly before and after application of the cream.

**What cautions apply for use of imiquimod cream?**

Imiquimod cream should not be used on the eyelids, and generally not on the lips, unless specifically prescribed by your doctor for use in that area.

Do not use imiquimod cream if you are allergic to any of the ingredients.

Do not use imiquimod cream if you are pregnant or breastfeeding.

Do not use imiquimod cream if you are spending time in strong sunlight or using sunbeds

**What are the common side effects of imiquimod cream?**

Within 3 to 5 days, the skin treated with imiquimod cream can get red and sore. Even normal looking skin may be affected, because it may contain invisibly abnormal cells. The skin may weep, peel, crack or even blister and then scab over. The area may be itchy or sore, painful and burn. This is caused by the abnormal cells dying and a sign that the treatment is working. The skin reaction tends to be worst in week 2 to 3 of application. For most people, the more sore and red the skin becomes, the better the treatment works.

It may appear that the number of actinic keratoses is increasing early in the treatment period. This is due to the cream causing inflammation and revealing actinic keratoses that were already there, but that were not detectable. These will also get better with the treatment.

Some patients develop flu-like symptoms such as swollen lymph nodes, aches and pains, mild fever and generally feeling unwell. Taking paracetamol can be helpful.

If the skin or general reaction becomes too severe, it is helpful to stop the cream for a week or so before restarting it again.
As the abnormal cells die, the skin barrier becomes damaged and therefore susceptible to wound infection. If you are not sure whether you have a normal treatment reaction or a wound infection, you should see your doctor.

**What are the rare side effects of imiquimod cream?**

If you have a severe reaction to imiquimod cream, the treated area may become ulcerated (raw). This risk is highest on the legs. The skin colour may be increased or decreased following severe inflammation. Rarely, this change in colour can be permanent.

Following a severe reaction, there is a small risk of scarring and hair loss.

Imiquimod cream activates the immune system, and very rarely there have been reports of pre-existing auto-immune disease flaring up.

Rarely, a patient can be allergic to Imiquimod cream and develop a severe allergic skin rash.

**Where may I find more information on imiquimod cream?**

http://dermnetnz.org/treatments/imiquimod.html  
http://www.medicines.org.uk/emc/ingredient/38/imiquimod

For details of source materials used 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*

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