

## GUIDANCE FOR MANAGING PATIENTS ON ISOTRETINOIN DURING THE CORONAVIRUS PANDEMIC

*This is a very fluid situation and guidance may change*

Please note that any BAD advice and guidance produced as a result of COVID-19 would still require authorisation by Trusts which indemnify members. Most will be guided by available evidence and responsible medical opinion, and that any deviation from standard practice needs to be documented clearly and the reasons stated.

- Dermatologists should only be starting or continuing patients on isotretinoin where the risks are outweighed by the benefits. This needs to be considered carefully in light of the need to reduce face-to-face consultations in the current pandemic, and the uncertainty of reliable follow-up/monitoring over the coming months.
- Discuss with patients the *theoretical* risk relating to COVID-19 which should be balanced against the *known* risk of scarring and mental health impact of untreated severe acne.
- If there is no risk of being pregnant, and the patient is exempt from the pregnancy programme, then prescriptions for several months could be given at a time (taking into account need to monitor blood tests and side effects).
- If there is potential for pregnancy, then the Pregnancy Prevention Program should be complied with, getting informed consent at the start of treatment, doing a medically supervised pregnancy test at the start of treatment and then doing monthly pregnancy tests and 5 weeks after stopping or pausing treatment.
- In situations where it is not possible to attend for monthly pregnancy tests, home pregnancy testing would be a suitable alternative. This could be done during a video consultation or a photograph of the test, with the date from either a newspaper or Googling the date.
- Where home testing is not possible, there should be a pause in the treatment and the patient advised regarding the risks of pregnancy and the need for a pregnancy test at the end of treatment, and 5 weeks after pausing/stopping treatment. The advice should be documented fully, and a letter sent to the patient and GP.
- Monitoring for side effects, and blood monitoring, will need to be carried out as usual with remote consultations.
- Please also refer to the BAD's advice and guidance about [teledermatology, video consultation and remote working](#) with suggestions on how patients could be supported remotely and how devices might be used to help service triage.
- The BAD acknowledges that some of the points above are not aligned with MHRA guidance, which is applicable under normal circumstances.
- Please liaise with your local pharmacy departments.

- The *theoretical* increased risk of COVID-19 viral load in patients on isotretinoin due to its drying effect on the mucous membrane has not been categorically established.