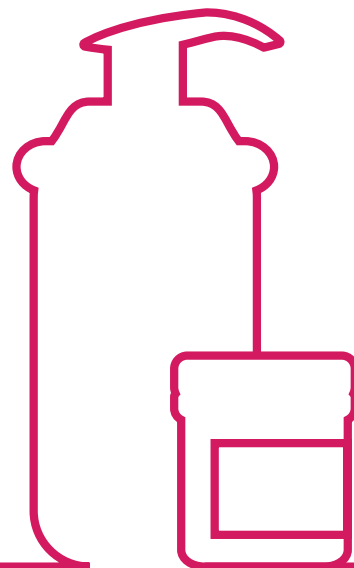


Emollients & Atopic Eczema

Adapted from NICE Clinical
Knowledge Summary (CKS)



Full NICE CKS guidelines are available here:
<https://cks.nice.org.uk/topics/eczema-atopic/prescribing-information/emollients/>

Choice of emollients

There are a large number of emollients available in the UK, including creams, ointments, gels, lotions, sprays, washes, and bath and shower additives, available as non-proprietary and/or proprietary products.

Creams and lotions

Creams and lotions are generally better for red, inflamed areas of skin because it is believed that the evaporation of water-based products cools the skin.

Ointments

Ointments are preferable for dry skin (that is not inflamed) because they are more effective than creams. However, they are usually poorly tolerated compared with cream; this may affect their acceptability and hence compliance.

Pump dispensers

Where possible, prescribe an emollient with a pump dispenser to minimise the risk of bacterial contamination.

For emollients that come in pots, advise that using a clean spoon or spatula (rather than fingers) to remove the emollient helps to minimize contamination.

Emollients as a soap substitute

Prescribe emollients to replace soap in people with dry skin requiring treatment.

Often, **several different emollients will be required** (for example for different areas of skin, different stages of flare, or for use in different locations).

Proprietary products

Experience has shown that proprietary products are often preferred to non-proprietary products; it may be a false economy to prescribe solely on the basis of price.

Effectiveness may vary over time

The effectiveness and acceptability of a particular emollient may vary with time.



NICE recommends prescribing an emollient according to the **dryness of the skin** and **individual preference/tolerance**.



How much emollient should I prescribe?

Emollients are typically under-prescribed and under-used. This results in suboptimal treatment of dry skin and eczema, and may increase the occurrence of flares.



Pump dispensers

Where possible, pump dispensers should be prescribed when large quantities of cream or lotion are required.

This is because they are more convenient than other containers and are less likely to become contaminated by potential pathogens.

Adverse effects of Emollients

Skin reactions are the most common adverse effects of emollients. They are caused by sensitivity of the skin to **additives in the emollient, such as perfumes, preservatives.**

If a skin reaction occurs, stop the emollient and use a different one. If the person has had previous skin reactions to emollients, consider testing a small quantity on the skin before widespread application.



Once the preferred choice of emollient is known, encourage appropriate usage by **prescribing generous amounts** (for example 500g) to be used regularly (often four times daily).

How much and how often

It is recommended that **250–500g** of emollient be applied every week.

How to use an emollient?

The frequency of application will vary depending on the person's condition and circumstances, but for very dry skin, application of an emollient every 2–3 hours should be considered normal.

To facilitate frequent application, the person should consider keeping separate packs of emollients at work or school.

When and how to apply

It is particularly important to use emollients during or after washing.

Emollients should be applied by smoothing them into the skin along the line of hair growth.

It may be more convenient to use better tolerated products (such as creams and lotions) during the day, and ointments (which are usually poorly tolerated) at night.

Minimise contamination

Emollient products should not be shared with other people as they can become contaminated with bacteria.

Pump dispensers minimise the risk of bacterial contamination.

For emollients that come in pots, using a clean spoon or spatula (rather than fingers) to remove the emollient helps to minimise contamination

Emollients as a soap substitute

They should avoid the use of soaps, detergents, and bubble bath when washing, as these have an emulsifying effect on the lipids of the skin and can be very damaging to the skin.

Instead, a suitable soap substitute should be used, for instance, an ointment dissolved in hot water (or lotion in warm water).



Advise the person to use emollients liberally and frequently, **even when their skin appears improved or is clear**





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