

Emollient prescribing for dry skin conditions

- There is a lack of good quality evidence comparing emollients. Choice of emollient depends on the individual, remembering that products acceptable to one patient may be unacceptable to another.
- Prescription of small quantities in the first instance is advisable, until an acceptable emollient is found.
- Patients should use the cheapest emollient that is effective, cosmetically acceptable and which they are prepared to use regularly.
- Once an effective emollient has been established, you should prescribe leave-on emollients in large quantities (250–500 g weekly).
- Show children and their parents or carers how to apply emollients.
- Sensitivities to excipients are not uncommon and should be checked before prescribing; the BNF lists all excipients in emollient preparations.
- Patients who do not have a diagnosed dermatological condition who request a general skin moisturiser may be advised these can be purchased over the counter.
- **Review repeat prescriptions at least once a year.**

Stage of prescribing	Product
First Line (<i>suitable for all prescribers</i>)	Epimax Cream
Second Line	Hydromol Ointment Zerobase Cream Zeroderm Ointment QV Cream Cetraben Zerodouble Gel
Third Line	Dermol Cream Balneum Cream (contains fragrance) Emollin Spray Hydromol Cream (this is a humectant and so less is used) Zeroneum (contains fragrance)
Fourth Line (<i>prescribing usually reserved for dermatology services</i>)	Balneum Plus Aveeno (ACBS) Hydromol Intensive Calmurid

Types of Emollient:

There are a few different types of emollients;

Lotions- Lotions have a high water content, and are easily absorbed. This means they are good for mild dry skin conditions, the face and hairy areas. However, as they are so easily absorbed, this means they spend less time on the skin, and are considered to be less effective than creams and ointments. Further to this, they tend to contain preservatives which can irritate the skin.

Creams- Creams are a mixture of oil and water. They are less greasy than ointments, and need to be applied more frequently, but tend to be more cosmetically acceptable. They do tend to contain preservatives which can irritate the skin.

Ointments- Greasier than creams, and sometimes not cosmetically acceptable. They are not absorbed as quickly and, therefore, have a longer contact time with the skin.

Bath and shower emollients

- Bath and shower emollients offer no advantages over emollients and they should not be used in place of directly applied emollients to the skin before washing.
- Further to this, regular leave on emollients can be used as soap substitutes whilst washing (with the exception of aqueous cream due to its ability to cause skin irritation).
- Patients should be advised to wash with their normal emollients, used as a soap substitute instead as this is more cost effective than using bath/shower emollients and provides better moisturisation.
- If the patient requests a bath additive, any ointment (except 50:50) can be dissolved in some hot water and added to the bath water as a bath additive and/or use of a cream emollient as a soap substitute in the bath will offer similar emollient effect.

References:

County Durham and Darlington Area Prescribing Committee 'Emollient prescribing for dry skin conditions' 2015
Rotherham Clinical Commissioning Group 'Emollient Prescribing Guidelines' 2015