

# Chapter 13

## Skin

### 1 EXCIPIENTS AND SENSITISATION

Excipients in topical products rarely cause problems. If a patch test indicates allergy to an excipient, products containing the substance should be avoided. For example Beeswax; Benzyl alcohol; Butylated hydroxyanisole; Butylated hydroxytoluene; Cetostearyl alcohol; Chlorocresol; Edetic acid (EDTA); Ethylenediamine; Fragrances; Hydroxybenzoates (parabens); Imidurea; Isopropyl palmitate; N-hexaminium chloride (quaternium 15); Polysorbates; Propylene glycol; Sodium metabisulfite; Sorbic acid; Wool fat (including lanolin)

### 2 EMOLLIENTS

Hydrate the skin; their effects are short-lived and should be applied frequently and regularly. Some preparations contain urea to relieve itching & hydrate the skin. Emollients should be applied in the direction of hair growth to reduce the risk of folliculitis.

#### Safety information

Emollients soak into fabric and can become a fire hazard. Patients should be advised not to smoke, use naked flames (or be near people who are smoking or using naked flames), or go near anything that may cause a fire while emollients are in contact with their medical dressings or clothing.

Emollient bath and shower preparations make skin and surfaces slippery—care is needed when bathing.

### 3 RETINOID AND RELATED DRUGS

#### Pregnancy prevention

Teratogenic risk!! In women of child-bearing potential exclude pregnancy before starting treatment. Women should be advised to use at least 1 method of contraception but ideally, they should use 2 methods of contraception. Oral progestogen-only contraceptives are not considered effective. Barrier methods should not be used alone but can be used in conjunction with other contraceptive methods. Women should be advised to discontinue treatment and to seek prompt medical attention if they become pregnant during treatment.

#### Side effects

Risk of benign intracranial hypertension, discontinue treatment if severe headache, nausea, vomiting, or visual disturbances occur.

#### 3.1 ACIREITIN

Risk of skeletal hypertosis (calcification of ligaments in areas where they attach to your spine) associated with long-term use.

#### 3.2 ISOTRETINOIN

ORAL: Seek medical advice if psychiatric disorders such as depression, anxiety, and suicidal thoughts develop. Avoid wax epilation (risk of epidermal stripping), dermabrasion, and laser skin treatments (risk of scarring) during treatment and for at least 6 months after stopping; avoid exposure to UV light (including sunlight) and use sunscreen and emollients (including lip balm) from the start of treatment. Discontinue if pancreatitis (abdominal pain, nausea and vomiting) and visual disturbances occurs.

TOPICAL: Some redness and skin peeling can initially occur, but settles with time; if irritation persists, discontinue treatment. Avoid exposure to UV light (including sunlight) and use sunscreen or protective clothing.

### 4 SALICYLATES

Salicylate toxicity (nausea and vomiting, abdominal pain, lethargy, tinnitus, and dizziness) may occur particularly if applied on large areas of skin or neonatal skin.

### 5 CO-CYPRINDIOL

Although it is an effective hormonal contraceptive, it should not be used solely for contraception.

There is an increased risk of venous thromboembolism in women taking co-cyprindiol, particularly during the first year of use. It is contraindicated in those with a history of venous or arterial thromboembolism, or in those with severe or multiple risk factors for arterial disease or venous thromboembolism.