

13 Skin

1. Dry and scaling skin disorders		Primary Care	Acute/ Specialist Services
Emollient and barrier preparations			
Barrier preparations			
	Conotrane®	✓	✓
Comment: Barrier preparations are not appropriate for use in the treatment of eczema			
Emollient bath and shower products			
No formulary choices			
Comment: There is no evidence of benefit, for the prescribing of bath or shower emollients in the management of dry skin conditions. These products are relatively expensive and should not be prescribed. The use of emollient products in the bath or shower is a slip hazard, so should not be used by patients at risk of falls. Ointment formulations of Zeroderm® and Hydromol® can be used as 'leave on emollients', bath additives and as soap substitutes.			
Soap Substitutes			
	Dermol 500 Lotion (1 st line)	✓	✓
	QV Gentle Wash (2 nd line)	✓	✓
Comment: Soap substitutes are useful for patients with eczema and other dry skin conditions to prevent the irritant effect of soap-based cleansers. Dermol® 200 shower emollient is identical in composition to Dermol® 500 lotion but less cost effective. Therefore Dermol® 200 shower emollient should no longer be prescribed. Ointment formulations of Zeroderm® and Hydromol® can be used as 'leave on emollients', bath additives and as soap substitutes.			
Emollients creams and ointments, antimicrobial-containing			
	Dermol® Cream	✓	✓
	Dermol 500 Lotion	✓	✓
Emollients creams and ointments, colloidal oatmeal-containing			
Comment: Aveeno®, Zeroveen® products are considered non-formulary.			
Emollients creams and ointments, paraffin-containing			
Comment: There is a fire risk with all emollients, regardless of paraffin concentration. Ensure patients and their carers understand the fire risk associated with the build-up of residue on clothing and bedding and action to take to minimise the risk e.g. washing clothing/fabrics at high temperature to reduce emollient build-up. Instruct patients not to smoke or go near naked flames because clothing or fabric such as bedding or bandages that have been in contact with an emollient or emollient-treated skin can rapidly ignite. Aveeno® products are relatively expensive and non-formulary			
Very Greasy Ointment			
	Liquid paraffin 50% / White soft paraffin 50%	✓	✓
Greasy Ointment			
	Zeroderm® ointment (1 st line)	✓	✓

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	Hydromol® ointment (2 nd line)	✓	✓
Comment: Zeroderm® or Hydromol® ointment 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.			
	Emollin® spray (Liquid paraffin 50%/White soft paraffin 50%)	✓	✓
Comment: Emollin® is for use in children and adults who need to apply emollients to parts of their body which are difficult to reach			
Gel			
	Epimax® Isomol gel (1 st line) (contains phenoxyethanol)	✓	✓
	Doublebase® gel (2 nd line) (contains phenoxyethanol)	✓	✓
	Adex® gel (for patients with inflammatory or intractable dermatitis)	⊕	✓
Cream			
	Epimax® cream (1 st line) (contains phenoxyethanol) - Avoid contact with the eyes and do not apply near the eyes. See Field Safety Notice (FSN) for more information.	✓	✓
	Zerobase® cream (1 st line) (if allergic to phenoxyethanol)	✓	✓
	Cetaben® cream (2 nd line)	✓	✓
	QV cream (2 nd line)	✓	✓
Lotions			
	QV® lotion	✓	✓

Emollients containing urea (for exceptionally dry skin)			
	Balneum Plus® cream (5% urea)	✓	✓
	Flexitol® cream (10% urea) (follow-on treatment for extreme hyperkeratosis of feet)	✓	✓
	Flexitol® cream (25% urea) (initial treatment for extreme hyperkeratosis of feet)	✓	✓
2. Infections of the skin		Primary Care	Acute/ Specialist Services
2.1 Bacterial skin infections			
Antibacterials			
	Fusidic acid cream	✓	✓
	Metronidazole 0.75% (Rozex® cream, gel)	✓	✓
	Mupirocin (Bactroban®) - restricted to use in MRSA infections or specialist initiation for other indications	✓	✓
	Silver sulfadiazine cream (Flamazine®) for infections of burn wounds	✓	✓
	Sodium fusidate ointment (Fucidin®)	✓	✓
2.2 Fungal skin infections		Primary Care	Acute/ Specialist Services
	Clotrimazole	✓	✓

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	Ketoconazole cream, shampoo (Nizoral®)	✓	✓
Comment: Nizoral® cream is only prescribable on the NHS for seborrhoeic dermatitis and pityriasis versicolor. Prescription must be endorsed "SLS".			
	Miconazole nitrate (Daktarin®)	✓	✓
	Tioconazole nail solution	✓	✓
	Amorolfine nail lacquer (for fungal nail infections)	✓	✓
	Terbinafine tablets, cream	✓	✓
2.3 Parasitic skin infections		Primary Care	Acute/ Specialist Services
Head Lice Preparations			
	Dimeticone lotion (Hedrin®) (1 st line)	✓	✓
	Malathion (Derbac M®) (2 nd line)	✓	✓
Scabies			
	Permethrin cream (1 st line)	✓	✓
	Malathion (Derbac M®) (2 nd line)	✓	✓
2.4 Viral skin infections		Primary Care	Acute/ Specialist Services
	Aciclovir 5% cream	✓	✓
3. Inflammatory skin conditions		Primary Care	Acute/ Specialist Services
3.1 Eczema and psoriasis			
Topical Corticosteroids			
Mild			
	Hydrocortisone (1 st line)	✓	✓
Moderate			
	Betamethasone valerate 0.025% (Betnovate® RD) (1 st line)	✓	✓
	Clobetasone (2 nd line)	✓	✓
	Fluocinolone 0.00625% (Synalar®1 in 4) (2 nd line)	✓	✓
	Fludroxycortide cream, ointment	⊕	✓
	Fludroxycortide tape	⊕	✓
Potent			
	Betamethasone valerate 0.1% (1 st line)	✓	✓
	Betamethasone dipropionate (2 nd line)	✓	✓
	Mometasone (2 nd line) (once daily application)	✓	✓
	Fluocinolone 0.025% (Synalar®)	✓	✓
	Diflucortolone 0.1% (Nerisone®)	⊕	✓

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Very potent			
	Clobetasol propionate	✓	✓
Steroids with antimicrobials			
Comment:			
<ul style="list-style-type: none"> The advantage of including antibacterials or antifungals with corticosteroids in topical preparations is uncertain. Only to be used when inflammatory skin conditions are associated with bacterial or fungal infection e.g. infected eczema. Should only be prescribed short-term (usually 1 week), longer use increases the likelihood of resistance and of sensitisation. For seborrhoeic dermatitis - Daktaort and Canesten HC can be used longer term. 			
Mild			
	Hydrocortisone with benzalkonium chloride, dimeticone and nystatin (Timodine®)	✓	✓
	Hydrocortisone with chlorhexidine and nystatin (Nystaform HC®)	✓	✓
	Hydrocortisone with clotrimazole (Canesten HC®)	✓	✓
	Hydrocortisone with fusidic acid (Fucidin H®)	✓	✓
	Hydrocortisone with miconazole (Daktaort®)	✓	✓
Moderate			
	Clobetasone with oxytetracycline and nystatin (Trimovate®)	✓	✓
Potent			
	Betamethasone with clioquinol (1 st line)	✓	✓
	Betamethasone with fusidic acid (Fucibet®) (2 nd line)	✓	✓
	Betamethasone with clotrimazole (Lotriderm®) (2 nd line)	✓	✓
Very potent			
	Clobetasol with neomycin & nystatin	⊕	✓
Comment: Very expensive preparation. Only to be prescribed for short-term use in patients requiring a very potent steroid before stepping down.			
Dermatological drugs			
Tar based			
	Psoriderm® cream	✓	✓
	Capasal® shampoo	✓	✓
	Cocois® ointment	✓	✓
	T-gel® shampoo	✓	✓

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Scalp applications			
Potent			
	Betamethasone valerate 0.1% scalp application (Betacap [®])	✓	✓
	Betamethasone valerate 0.1% foam (Betamousse [®])	⊕	✓
	Diprosalic	✓	✓
	Mometasone 0.1% scalp lotion	✓	✓
	Fluocinolone 0.025% (Synalar [®]) gel	✓	✓
Very potent			
	Clobetasol scalp application 0.05% (Dermovate [®])	⊕	✓
	Clobetasol shampoo (Etrivex [®])	⊕	✓
Topical corticosteroids with salicylic acid			
	Diprosalic [®] ointment/scalp application	✓	✓
Immunosuppressants- calcineurin inhibitors and related drugs			
	Tacrolimus ointment 0.1% and 0.03%	⊕	✓
<p>Comment: Topical tacrolimus should be considered for short term, intermittent treatment of moderate to severe atopic eczema that is not controlled by topical steroids or where there is risk of atrophy. Generally, it should be initiated by specialists although primary care practitioners with experience in treating atopic eczema with immunomodulatory therapy may also consider initiating it.</p>			
Tumour Necrosis Factor- Alpha (TNF-α) inhibitors			
	Adalimumab (Imraldi [®])		✓
	Certolizumab (Cimza [®])		✓
Immunosuppressants - interleukin inhibitors			
Interleukin-12/23 Inhibitor			
	Ustekinumab (Stelara [®])		
Interleukin-17A Inhibitor			
	Ixekizumab (Taltz [®])		✓
	Secukinumab (Cosentyx [®])		✓
Interleukin-17A receptor blocker			
	Bimekizumab (Bimzelx [®])		✓
	Brodalumab (Kyntheum [®])		✓
Interleukin-23 Inhibitor			
	Guselkumab (Tremfya [®])		✓
	Risankizumab (Skyrizi [®])		✓
	Tildrakizumab (Ilumetri [®])		✓
Moderate-severe atopic dermatitis			
Interleukin- 4,13 Inhibitor			
	Dupilumab (Dupixent [®])(1 st line)		✓

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Interleukin-13 Inhibitor			
	Tralokinumab (Adtralza®) (2 nd line)		✓
JAK Inhibitor (3rd line)			
	Abrocitinib (Cibinqo®) (1 st line JAK inhibitor)		✓
	Upadacitinib (Rinvoq®) (2 nd line JAK inhibitor)		✓
Selective Tyrosine Kinase 2 (TYK2) Inhibitor			
	Deucravacitinib (Sotyktu®)		✓

Drugs affecting the immune response			
Systemic Immunosuppressants			
	Ciclosporin (Neoral®)	⊕	✓
	Dimethyl fumarate (Skilarence®)	⊕	✓
	Methotrexate	⊕	✓
Comment: Biologics should be prescribed in line with SMC recommendations and local treatment pathways Ciclosporin and Methotrexate – Near patient testing under supervision of consultant dermatologist			
Retinoid and related drugs			
	Acitretin	⊕	✓
Comment: for women of child bearing potential the prescribing of acitretin is restricted to hospital use only . Ongoing monitoring of acitretin is part of the local NPT LES			
	Alitretinoin		✓
Comment: For use in severe chronic hand eczema refractory to potent topical corticosteroids.To be prescribed in line with SMC restrictions .			
Comment: Pregnancy prevention programme for acitretin and alitretinoin			
Vitamin D and analogues			
	Calcipotriol	✓	✓
	Calcitriol ointment (Silkis®)	✓	✓
	Calcipotriol with betamethasone (generic gel, generic ointment, Enstilar® foam)	✓	✓
Bandages			
	Steripaste® bandage	⊕	✓
	Zinc paste and ichthammol bandage	⊕	✓
	ZipZoc® bandage	⊕	✓
Comment: ZipZoc® bandage is expensive and should only be prescribed if recommended by dermatology specialist			
4. Perspiration		Primary Care	Acute/ Specialist Services
4.1 Hyperhidrosis			
	Aluminium chloride hexahydrate (1 st line)	✓	✓
	Propantheline bromide tablets (Pro-banthine®) (2 nd line)	⊕	✓

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5. Pruritus		Primary Care	Acute/ Specialist Services
Topical antipruritics			
	Crotamiton (Eurax® +/- hydrocortisone)	✓	✓
	Doxepin hydrochloride 5% cream	⊕	✓
Menthol and derivatives			
	Menthol in aqueous Cream (Dermacool®)	✓	✓
Oral antihistamines			
	Cetirizine (1 st line)	✓	✓
	Fexofenadine (2 nd line)	✓	✓
	Loratadine (2 nd line)	✓	✓
6. Rosacea and acne		Primary Care	Acute/ Specialist Services
6.1 Acne			
Comment: Also refer to NICE Guideline NG198 Acne Vulgaris: Management			
	Benzoyl peroxide with clindamycin gel (1 st line)	✓	✓
	Adapalene with benzoyl peroxide (Epiduo®) (2 nd line)	✓	✓
	Adapalene (less irritant than tretinoin)	✓	✓
	Azelaic acid 20% (Skinoren®)	✓	✓
	Clindamycin 1% gel, lotion	✓	✓
	Co-cyprindiol 2000/35	✓	✓
	Erythromycin with zinc acetate lotion (Zineryt®)	✓	✓
	Isotretinoin capsules		✓
Comment: For isotretinoin capsules see Pregnancy prevention programme			
	Tretinoin with clindamycin (Treclin®)	✓	✓
6.2 Rosacea		Primary Care	Acute/ Specialist Services
Mild to moderate papulopustular rosacea			
	Metronidazole 0.75% (Rozex® cream, gel) (1 st line)	✓	✓
	Azelaic acid 15% gel (Finacea®) (2 nd line)	✓	✓
Moderate to severe papulopustular rosacea			
	Ivermectin (Soolantra®)	✓	✓

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Moderate to severe facial predominant rosacea			
	Brimonidine (Mirvaso®)	✓	✓
Comment: Topical treatments are generally not helpful in the management of flushing associated with rosacea			
7. Scalp and hair conditions		Primary Care	Acute/ Specialist Services
Antiseptics and disinfectants			
	Benzalkonium chloride shampoo (Dermax®)	✓	✓
Shampoo and scalp applications			
	Cocois® ointment	✓	✓
	Ketoconazole shampoo	✓	✓
	T/Gel®	✓	✓
7.1 Alopecia		Primary Care	Acute/ Specialist Services
<i>No formulary choices</i>			
Alopecia areata			
Baricitinib tablets (Olumiant®) are not accepted by the SMC for use in alopecia areata. For further information please see SMC advice.			
7.2 Hirsutism		Primary Care	Acute/ Specialist Services
	Eflornithine 11.5% (Vaniqa®) (to be prescribed in line with SMC restriction)	✓	✓
8. Skin cleansers, antiseptics and desloughing agents		Primary Care	Acute/ Specialist Services
Antiseptics and disinfectants			
	Hydrogen peroxide (Crystacide®)	✓	✓
	Potassium permanganate (Permitabs®) tablets for cutaneous solution	✓	✓
Comment: See important safety information – Minimising risk of harm from potassium permanganate soaks.			
	Povidone-iodine (Videne®)	✓	✓

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8.1 Minor cuts and abrasions	Primary Care	Acute/ Specialist Services	
No formulary choice			
9. Skin disfigurement	Primary Care	Acute/ Specialist Services	
Camouflagers			
Comment: Camouflagers are prescribable for post-operative scars, other deformities, and as an adjunctive therapy for emotional disturbances due to disfiguring skin disease e.g. vitiligo. Prescriptions should be endorsed as "ACBS"			
10. Sun Protection and photodamage	Primary Care	Acute/ Specialist Services	
Photodamage			
Actinic Keratosis			
Comment: For information and guidelines on the treatment of actinic keratosis please refer to the Primary Care Dermatology Society			
Hyperkeratotic			
	Fluorouracil 0.5% / salicylic acid 10% cutaneous solution (Actikerall®)	✓	✓
Small Field			
	Diclofenac 3% in sodium hyaluronate gel (Solaraze®)	✓	✓
	Fluorouracil 5% cream (Efudix®)	✓	✓
	Imiquimod 5% cream (Aldara®)	⊕	✓
Comment: Imiquimod - Where surgery is not appropriate or in patients unresponsive to conventional therapy.			
	Tirbanibulin ointment (Klisyri®)	✓	✓
Large Field			
	Diclofenac 3% in sodium hyaluronate gel (Solaraze®)	✓	✓
	Fluorouracil 5% cream (Efudix®)	✓	✓
	Imiquimod 3.75 % cream (Zyclara®), 5% cream (Aldara®)	⊕	✓
Comment: Aldara® is also approved for use in the topical treatment of small superficial basal cell carcinoma			
	Tirbanibulin ointment (Klisyri®)	✓	✓

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Topical Photosensitisers for Photodynamic Therapy			
	5 Aminolaevulinic acid hydrochloride (Ameluz®)	⊕	✓
Comment: Alacare® plasters may be used as an alternative to Ameluz® gel in patients where the use of a plaster formulation would be more beneficial e.g. treating moist sites such as the lips			
	Methyl aminolevulinate (Metvix®)	⊕	✓
Sunscreen			
	Anthelios® Sunscreen Lotion SPF 50+ (ACBS)	✓	✓
	Uvistat Suncream SPF 50 (ACBS)	✓	✓
Comment: Sunscreen preparations are only prescribable on the NHS when prescribed for skin protection against UV radiation in abnormal cutaneous photosensitivity. This includes genetic disorders, photodermatoses, vitiligo from radiotherapy and chronic or recurrent herpes simplex labialis. Prescribing for other indications is not permitted on a GP10. Prescription must be endorsed as ACBS.			
Photosensitive dermatoses - Include polymorphic light eruption, actinic prurigo, chronic actinic dermatitis, solar urticaria, hydroa vacciniforme. Certain drugs, such as demeclocycline, phenothiazines, or amiodarone, can cause photosensitivity.			
Photoaggravated dermatoses e.g. cutaneous lupus erythematosus, dermatomyositis, herpes simplex, Darier's disease, pellagra, some cases of rosacea and vitiligo.			
11. Superficial soft-tissue injuries and superficial thrombophlebitis		Primary Care	Acute/ Specialist Services
<i>No formulary choices</i>			
12. Warts and calluses		Primary Care	Acute/ Specialist Services
	Imiquimod 5% cream (Aldara®)	⊕	✓
	Podophyllotoxin – cream, solution (Warticon®)	⊕	✓
	Salicylic acid (Salactol®, Occlusal®)	✓	✓

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