

EMOLLIENT LADDER



There is a **fire risk** with all paraffin-containing emollients, regardless of paraffin concentration, (and cannot be excluded with paraffin-free emollients). Similar risk may apply for other products which are applied to the skin over large body areas, or in large volumes for repeated use for more than a few days.

Be aware that washing clothing or fabric at a high temperature may reduce emollient build-up but not totally remove it. Warn 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.

Very Greasy

Hydromol Ointment
White Soft Paraffin
Zeroderm Ointment

50:50 Ointment

Greasy

Zerodouble Gel
Zeroguent Cream

Cetraben Ointment
Diprobase Ointment

Creamy

Epimax Cream
Oilatam Cream
Zerobase
Zerocream

Cetraben Cream
Ultrabase Cream

Colloidal Oatmeal (if patient unresponsive to other emollients and in accordance with ACBS)

Zeroveen Cream

Aproderm Cream

Antimicrobial (if skin often infected) **Dermol Cream** (contains chlorhexidine & benzalkonium chloride)

Light

ZeroAQS
QV Lotion

Cetraben Lotion
E45 Lotion (LP)

Antimicrobial (if skin often infected) **Dermol 500 Lotion** (contains chlorhexidine & benzalkonium chloride)

Clinicians are reminded that a prescription for treatment of mild dry skin should not routinely be offered in primary care as the condition is appropriate for self-care.

Heel Balm with Urea

25% for treatment of callused, fissured and hard foot skin in dry ichthyotic conditions.

5% for maintenance following the treatment phase

Dermatonics Once Heel Balm 75g (25% Urea)

Imuderm Cream (Glycerin and Urea 5%)

Balneum Plus Cream (Ceramide and Urea 5%)

EMOLLIENT Top Tips

- Always use an emollient as a soap substitute. DO not use any other wash product that lathers/makes bubbles, as this will take away all the benefit of the emollient.
- Bath or shower daily during flares of eczema.
- Apply lots of emollient three to four times a day during flares of eczema and reduce application slowly once eczema clears, increasing again if eczema rebounds.
- Apply emollient to whole body morning and night (as all skin is prone to eczema) and to dry or red areas on 1-2 further occasions during the day, or whenever it is itching.
- If the skin remains dry increase the grease content of the emollient or apply the emollient more regularly.
- If the emollient stings on application try a different one. **Very Greasy** ointments tend not to sting as they do not tend to contain preservatives.
- If the skin becomes spotty, reduce the grease content of the emollient choice. If there are yellow heads antimicrobial therapy such as the Dermol products may be required.
- Patients may prefer to use lighter emollient during the day, with a greasier one for use at night.
- If using a tub a spatula or spoon should be used to remove emollient to prevent introduction of germs into the container.

Children

- During hot weather/on holiday in hot climates use a **Light** or **Creamy** emollient in the morning. Leave at least half an hour and then apply the child's sunscreen. Reapply sunscreen regularly throughout the day if out in the sun and use a **Greasy** or **Very Greasy** emollient at night if skin is dry.
- If a child has eczema on the face then application of a thin layer of a **Greasy** or **Very Greasy** emollient before they eat or go outside into cold, windy weather may help as a barrier.
- When applying creams to the nappy area always ensure that they are rubbed in well (so that you can't see it) to stop the cream from coating the nappy and preventing it absorbing urine.
- Ensure childrens' regular carers have their own pots of emollient and instructions on how to use and apply them.