

Emollient prescribing for dry skin conditions (November 2021)

- Patients without a diagnosed dermatological condition requesting a general moisturiser or wash product should purchase these.
- NHS England have issued “Conditions for which over the counter items should not routinely be prescribed in primary care: Guidance for CCGs” which recommends: “Emollients are often used to help manage dry, itchy or scaly skin conditions. Patients with mild dry skin can be successfully managed using over the counter products on a long-term basis. A prescription for treatment of dry skin should not routinely be offered in primary care as the condition is appropriate for self-care.”
- 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.
- Patients should use the cheapest emollient that is effective, cosmetically acceptable and which they are prepared to use regularly.
- On first presentation, prescribe / supply a trial of several emollients (of small pack size), so that the person can make an informed choice as to which suits them best. Often, several different emollients will be required (e.g. for different areas of skin, different stages of flare, or for use in different locations).
- 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.
- **Review repeat prescriptions at least once a year.**

Stage of prescribing	Product	
First Line <i>(suitable for all prescribers)</i>	Hydromol Ointment Zerobase Cream Zeroderm Ointment QV Cream Cetraben Zerodouble Gel Hydromol Intensive (only for ichthyotic conditions otherwise 3 rd line)	
Second Line	Dermol Cream Balneum Cream (contains fragrance) Emollin Spray Hydromol Cream (this is a humectant and so less is used) Zeroneum (contains fragrance) Ultrabase (contains rose fragrance)	
Third Line <i>(prescribing usually reserved for dermatology services)</i>	Zeroveen Cream Balneum Plus Hydromol Intensive	
Wash / Soap Substitute	<u>First choice:</u> Dermol 500 Hydromol Ointment Zerodouble Gel	<u>Second choice:</u> Doublebase gel

As of September 2018 Emollient Bath Additives are no longer included in the formulary on the basis of the BATHE trial that no evidence to support routine use of bath emollients. Also not included due to risk of slipping due to emollient application in bath.

There is no such thing as an ideal emollient. Various factors namely severity of dermatological condition, composition of the emollient, use of emollient as a soap substitute, patient preference, emollients tried in the past and cost need to be considered when prescribing emollients.

The greasier an emollient is the more effective it is at retaining hydration within the skin.

Various emollients and their use on specific skin types is listed in the table below:

Table 1: Emollients and skin types¹

Emollient type	Comments
<i>Lotions</i>	<ul style="list-style-type: none"> - Reapplication needed frequently on very dry skin. - Good for very mild dry skin and face - Spreads easily as contains more water
<i>Creams</i>	<ul style="list-style-type: none"> - More effective than mild emollients but less greasy - Mixture of water and fat. Well absorbed
<i>Ointments</i>	<ul style="list-style-type: none"> - Oily preparation – hence greasy - No preservatives – lower chance of skin irritation than creams or lotions - Useful for very dry and thickened skin

Patient sensitivities to excipients must be checked when prescribing emollients. Pump dispensers reduce the risk of antimicrobial contamination.

The table below provides a guide to suitable quantities for prescribing emollients in a standard adult patient for a minimum twice daily application.

Table 2: Suitable quantities of emollients for prescribing in adults^{1,2}

Body site	Creams or ointments		Lotions	
	One week supply	One month supply	One week supply	One month supply
Face	15-30g	60-120g	100ml	400ml
Both hands	25-50g	100-200g	200ml	800ml
Scalp	50-100g	200-400g	200ml	800ml
Both arms or legs	100-200g	400-800g	200ml	800ml
Trunk	400g	1600g	500ml	2000ml
Groins and genitalia	15-25g	60-100g	100ml	400ml

For children, please halve the above quantities¹.

References

1. Barking and Dagenham, Havering & Redbridge CCGs [Emollient Guidelines and Formulary](#) July 2016.
2. Dorset CCG. [In Focus: Emollients](#). June 2020
3. NICE Guidance (CG57) – Atopic Eczema in Children
4. CKS http://www.cks.nhs.uk/eczema_atopic
5. NICE Guidance (QS44) - Atopic eczema in children