

























<p>Active ingredients (generic names)</p>	<p>BENZYL BENZOATE (benz-el benz-o-ate) Common brands include: <i>Ascabiol, Benzemul</i></p> <p>CROTAMITON (crow-ta-mi-ton) Common brands include: <i>Eurax</i></p> <p>PERMETHRIN (per-meth-rin) Common brands include: <i>Lyclear, Quellada Scabies Treatment</i></p>  <p>Common name: scabies medicines</p>
<p>What it is used for</p>	<ul style="list-style-type: none"> • Chickenpox — for itch (crotamiton) (CARPA STM p333) • Crusted scabies (benzyl benzoate, permethrin) (CARPA STM p396) • Scabies (benzyl benzoate, permethrin) (CARPA STM p394)
<p>How it works</p>	<ul style="list-style-type: none"> • Kills the mites
<p>Side effects</p>	<ul style="list-style-type: none"> • Stings when first applied (benzyl benzoate)  <p>Itchy rash and swelling – may get worse before it gets better</p>

 <p>Warnings</p>	 <p>Babies under 2 months (permethrin)</p>  <p>Babies under 6 months (benzyl benzoate)</p>  <p>Old people (benzyl benzoate)</p> <ul style="list-style-type: none"> • Do not put crotamiton on whole body of small children more than once a day • Dilute benzyl benzoate with water before applying to children <ul style="list-style-type: none"> ◦ Children 6–23 months — 3 parts water to 1 part benzyl benzoate ◦ Children 2–12 years and sensitive adults — equal parts water and benzyl benzoate • Test benzyl benzoate on small area of skin first — wait for 10 minutes
 <p>Tell the patient</p>	<ul style="list-style-type: none"> • Apply and wash off after 24 hours with warm soapy water, rinse thoroughly • Do not use benzyl benzoate on eyes, lips or mouth • If scabies rash is still itchy after applying benzyl benzoate or permethrin cream — use soothing cream (eg sorbolene) • Repeat treatment after 5 days • Wash clothes and bed linen in hot water and hang to dry in the sun  <p>Return to clinic if still itchy in 2–3 weeks</p>  <p>Treat everyone living in house — one may be source of re-infection</p>
<p>Check</p>	<ul style="list-style-type: none"> • Make sure using correct strength of permethrin — 5% for scabies • If person on immunosuppressants (p216) — more susceptible to crusted scabies






<p>Active ingredients (generic names)</p>	<p>DIMETICONE (di-met-i-cone) Common brands include: <i>Hedrin Treatment</i></p> <div style="display: flex; justify-content: center; gap: 20px;">   </div> <p>Common name: head lice treatment</p>
<p>What it is used for</p>	<ul style="list-style-type: none"> • Head lice (nits) (<i>CARPA STM p387</i>)
<p>How it works</p>	<ul style="list-style-type: none"> • Kills the lice — unclear how it works 
<p>Side effects</p>	 <p style="text-align: center;">Itch</p>




 <p>Warnings</p>	<ul style="list-style-type: none"> • Do not get on eyes, mouth, inside nose
 <p>Tell the patient</p>	<ul style="list-style-type: none"> • Treatment for adults and children is the same • For lotion — completely cover dry hair, allow to dry, leave on for 8 hours • For fast-acting gel spray — completely cover dry hair, leave on for 15 minute • Wash out, then use fine tooth comb to remove eggs and dead lice • Wash clothes and bed linen in hot water and hang to dry in sun • Repeat treatment after 7 days • Remove lice between treatments using ordinary hair conditioner on dry hair and fine tooth comb <div style="display: flex; justify-content: space-around; align-items: flex-start; margin-top: 20px;"> <div style="text-align: center;">  <p>Return to clinic if still itchy in 2–3 weeks</p> </div> <div style="text-align: center;">  <p>Treat everyone living in house – one may be source of re-infection</p> </div> </div>
<p>Check</p>	








<p>Active ingredients (generic names)</p>	<p>HYDROCORTISONE (hy-dro-cor-ti-sone) Common brands include: <i>Cortef, DermAid, Sigmacort</i></p>  <p>Other corticosteroids Not included in this monograph — see <i>AMH</i> for information:</p> <ul style="list-style-type: none"> • Betamethasone • Desonide • Methylprednisolone • Mometasone • Triamcinolone <p>Corticosteroid combinations</p> <ul style="list-style-type: none"> • Topical corticosteroids can be combined with topical antifungals
<p>What it is used for</p>	<ul style="list-style-type: none"> • Severe nappy rash (CARPA STM p406) • Inflammation of the skin
<p>How it works</p>	<ul style="list-style-type: none"> • Helps to reduce redness (inflammation) from various skin conditions. Some brands are stronger than others 
<p>Side effects</p>	<ul style="list-style-type: none"> • Short-term use — usually none • Long-term use — skin damage can occur

 <p>Warnings</p>	 <p>Children under 12 years</p>  <p>Old people</p>  <p>Medical consult if needed for more than a short time</p> <ul style="list-style-type: none"> • Diabetes — don't use a lot • Make sure area to be treated is not infected • Use lowest strength to treat first <i>OR</i> use higher strength for shortest time <ul style="list-style-type: none"> ◦ In children use higher strength for a shorter time • Do not use on face unless advised by doctor
 <p>Tell the patient</p>	<ul style="list-style-type: none"> • Use a small amount — not like moisturiser • Use moisturisers as well (eg sorbolene) • If using for a long time have regular rests from treatment (eg use for 5 days then stop for 2 days)
<p>Check</p>	<ul style="list-style-type: none"> • Try to find underlying cause of skin rash (eg fungal infection)

<p>Active ingredients (generic names)</p>	<p>IMIQUIMOD (i-mi-kwi-mod) Common brands include: <i>Aldara</i></p> <p>PODOPHYLLOTOXIN (po-do-fill-o-toxin) Common brands include: <i>Condyline paint, Wartec</i></p> <p>Other medicines for warts Not included in this monograph — see <i>AMH</i> for information:</p> <ul style="list-style-type: none"> • Glutaraldehyde • Podophyllum resin • Salicylic acid
<p>What it is used for</p>	<ul style="list-style-type: none"> • Genital warts — CARPA STM (p290), WBM (p258) • Some skin cancers (imiquimod)
<p>How it works</p>	<ul style="list-style-type: none"> • Helps immune system fight the warts (imiquimod) • Stops spread of warts to other areas of body, to other people
<p>Side effects</p>	<ul style="list-style-type: none"> • Blisters • Skin discolouring <div data-bbox="396 1288 521 1488" data-label="Image"> </div> <p>Itching, burning</p>

 <p>Warnings</p>	<ul style="list-style-type: none"> • Do not use on broken skin • Autoimmune and other skin problems (eg psoriasis, eczema) may get worse when using imiquimod <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  <p>Pregnant (podophyllotoxin)</p> </div> <div style="text-align: center;">  <p>Breastfeeding (podophyllotoxin)</p> </div> </div>
 <p>Tell the patient</p>	<p>Interactions — Do not use together without medical consult IMIQUIMOD or PODOPHYLLOTOXIN with:</p> <ul style="list-style-type: none"> • Immunosuppressants <ul style="list-style-type: none"> • Wash skin with soap and water and let dry before applying • Can weaken condoms and diaphragms. Wash off skin before using these • Do not use on or near hairline, eyes, ears, nose or lips — unless doctor tells you to • Imiquimod <ul style="list-style-type: none"> ◦ Use cotton swab or applicator ◦ Put on at bedtime and wash off 6–10 hours later • Podophyllotoxin <ul style="list-style-type: none"> ◦ Use cotton swab or applicator for lotion, glove for cream ◦ Put on wart only, can burn skin <div style="text-align: center;">  <p>Wash hands – before and after use</p> </div>
<p>Check</p>	<p>Warning stickers (p298): Imiquimod 8, K</p>

<p>Active ingredients (generic names)</p>	<p>NANOCRYSTALLINE SILVER DRESSING (nan-no-cris-ta-line sil-ver) Common brands include: <i>Acticoat</i></p> <p>SILVER SULFADIAZINE (sil-ver sul-fa-di-a-zeen) Common brands include: <i>Flamazine</i></p> 
<p>What it is used for</p>	<ul style="list-style-type: none"> • Partial thickness burns at risk of infection (CARPA STM p45) <ul style="list-style-type: none"> ◦ Use dressing if available, rather than ointment/cream • Treating infected leg ulcers and pressure sores
<p>How it works</p>	<ul style="list-style-type: none"> • Stops bacteria from growing on damaged skin 
<p>Side effects</p>	<ul style="list-style-type: none"> • Skin discolouration  <p>Itching, swelling, redness</p>

 <p>Warnings</p>	<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;">  <p>Pregnant (late term)</p> </div> <div style="text-align: center;">  <p>Babies under 6 months – medical or burns unit consult</p> </div> <div style="text-align: center;">  <p>Kidney trouble</p> </div> </div> <div style="text-align: center; margin-top: 20px;">  <p>Medical consult if needed for more than a short time <i>OR</i> if burn infected – may need antibiotics</p> </div> <ul style="list-style-type: none"> • Allergy to sulfonamides • For ointment/cream (not dressing) <ul style="list-style-type: none"> ◦ ONLY use for deep burns ◦ Do not use on burns being sent to hospital. Makes it hard to assess burn and delays further treatment ◦ Do not use same tube/container for more than 1 person
 <p>Tell the patient</p>	<ul style="list-style-type: none"> • Burns and ulcers must be cleaned and have dressings changed regularly • Do not wash cream off with soap — use normal saline • May darken or discolour skin <div style="text-align: center; margin-top: 20px;">  <p>Return to clinic if wound doesn't heal</p> </div>
<p>Check</p>	<ul style="list-style-type: none"> • Check procedure for applying silver coated dressing (<i>CPM p285</i>)