

# **Skin medication**

## 1. Purpose

This Standard Operating Procedure (SOP) describes the procedures to provide medication for skin diseases other than leprosy that have been identified during contact screening.

## 2. Scope

This SOP applies to all aspects that involve providing skin medication to contacts with a skin condition other than leprosy. In skin camps, free (topical) skin medication is often provided by medical staff.

## 3. Target group

This SOP applies to all health staff involved in the screening of contacts of leprosy patients and the provision of skin medication.

## 4. Procedure

Contacts of leprosy index patients may be referred for the diagnosis and treatment of skin diseases other than leprosy (see 'SOP 7: Referral in case of suspicion of skin diseases (other than leprosy)'). If dermatological expertise is not sufficiently available at the location of the skin screening, diagnosing of skin conditions can be supported by the use of the NLR SkinApp (see 'SOP 9: Use of the NLR SkinApp') or by tele-dermatology supported by the use of for example the Siilo app (see 'SOP 10: Siilo usage'). Based on the diagnosis, the patient can be provided with skin medication according to the guidelines of the context in which the intervention is implemented. Skin medication needs to be purchased following the national guidelines for medication procurement.

The following needs to be taken into account regarding skin medication:

- The medication of choice should be in line with the national guidelines and procedures. See the list below for the skin medication options.
- Medication needs to be stored according to the package insert and can only be handed out until the expiration date, if stored correctly. Before handing out medication, check for broken seals or any other damage.
- Check if the medication is suitable for the contact (age, weight, form, strength, dosage, duration, etc.) according to the national pharmacovigilance guidelines.
- Health workers can hand out medication, in line with the practices in the country. They need to explain to the contact how to properly apply the medication, and the medication's possible side-effects.
- The outcome of skin screening and treatment given needs to be registered in designated contact registration forms and/or health registers, according to the local guidelines and practices.
- If additional medical care is needed and/or treatment resources are not sufficiently available, the contact needs to be referred to a health facility in which these services are available.

Skin medication options (for local/topical skin medication, or suspensions in case of oral candida) are listed below:



Medication group	Examples of topical medication (application to the skin) or oral solution/suspension
Moisturizers / emollients	Petroleum jelly / petrolatum (e.g. Vaseline <sup>®</sup> ), seed or vegetable oil (e.g. sunflower seed oil, olive oil), glycerin, lanolin (wool wax), mineral oils, paraffin, emulsifying ointment
Antifungal creams	Imidazoles (e.g. miconazole, ketoconazole, clotrimazole, sulconazole)
Antifungal oral treatment	Nystatin (≥3 months of age) and miconazole oral gel (>4 months of age), Ketoconazole, Griseofulvin
Antibacterial (antiseptic or antibiotic) solutions and ointments	Anti-septic: Silver sulfadiazine cream, potassium permanganate solution, gentian violet (GV) solution, chlorhexidine scrub, povidone-iodine scrub Antibiotic ointments: mupirocin (e.g. Bactroban®), erythromycin, clindamycin, tetracycline, tetramycin
Corticosteroid (class 1 or class 2) creams and ointments	Class 1: hydrocortisone acetate Class 2: triamcinolone acetonide, clobetasonbutyrate (e.g. Emovate <sup>®</sup> / Eumosone <sup>®</sup> /Eumovate <sup>®</sup> ), flumethasone, hydrocortisone butyrate, betamethasone.
Topical anti-scabies medication	Benzoyl benzoate (adults 25%, children 12,5%, e.g. Scabanca®/Ascabin®/ Tenutex®) emulsion, permetrine 5% cream (Loxazol®)

If other medication is needed, prescriptions or referrals to health facilities can be used.

## 5. Additional information

More information, including photos of skin diseases, is available in the following resources, which can be used by health workers:

- NLR's SkinApp
- WHO Skin NTDs App
- <u>Common Skin Diseases in Africa An illustrated guide</u> by Hees and Naafs (2014) (1)
- <u>Recognizing neglected tropical diseases through changes on the skin: A training guide for</u> <u>front-line health workers</u> by the WHO (2018) (2)

## 6. Definitions and abbreviations

An overview of all definitions and abbreviations can be found in the document 'Introduction, content and definitions'.

## 7. Related SOPs

- SOP 2: Informing contacts and obtaining their consent
- SOP 3: Eligibility criteria for SDR-PEP and screening of contacts
- SOP 7: Referral in case of skin diseases (other than leprosy)
- SOP 9: Use of the NLR SkinApp
- SOP 10: Sillo usage



## 8. References

- 1. Van Hees C, Naafs B. Common Skin Diseases in Africa An illustrated guide. 2014; Available from: https://www.leprosy-information.org/resource/common-skin-diseases-africa-illustrated-guide
- 2. World Health Organization. Recognizing neglected tropical diseases through changes on the skin: a training guide for front-line health workers. World Health Organization. 2018;