GUIDELINES FOR PRESCRIBING CALCIPOTRIOL 50MCG/G AND BETAMETHASONE DIPROPRIONATE 0.05% PREPARATIONS IN STABLE PLAQUE PSORIASIS IN ADULTS.

INDICATION

Calcipotriol 50mcg/g and Betamethasone Dipropionate 0.05% is indicated for topical treatment of stable plaque psoriasis vulgaris amenable to topical therapy. It is currently available in three formulations:

- Dovobet® Gel
- Dovobet® Ointment
- Enstilar® Cutaneous Foam

SUITABLE PATIENTS

Calcipotriol 50mcg/g and Betamethasone Dipropionate 0.05% products are suitable in patients who:

- Have stable chronic plaque psoriasis.
- Have not responded to current topical treatments such as calcipotriol (Dovonex®), coal tar and topical corticosteroids.

Calcipotriol 50mcg/g and Betamethasone Dipropionate 0.05% products should not be used in the following situations:

- Facial psoriasis.
- Inflammatory psoriasis.
- Erythodermic and pustular psoriasis.
- Being applied to over 30% body surface area
- Patients with allergies to calcipotriol, betamethasone dipropionate or the list of excipients
- Patients with known disorders of calcium metabolism.

Calcipotriol 50mcg/g and Betamethasone Dipropionate 0.05% products should be used with caution in the following situations:

- Flexural psoriasis
- Patients under 18yrs
- Guttate psoriasis

ADMINISTRATION

Calcipotriol 50mcg/g and Betamethasone Dipropionate 0.05% products should be applied to the affected areas (ensuring no more than 30% of body surface area) once daily for four weeks until psoriasis has cleared. No more than 15g of the formulation should be applied per day (or 100g per week).

Dovobet® ointment is available in 30g, 60g and 120g tubes.

Dovobet® Gel is available in 60g and 120g tubes.

Enstilar® Cutaneous Foam is available as 60g and 2x60g cans. A 15g dose corresponds to the amount administered if the can actuator is fully depressed for approximately one minute. A two second application delivers approximately 0.5g. As a guide, 0.5g of foam should cover an area of skin roughly corresponding to the surface area of an adult hand.

Within clinical trials for Enstilar® & Dovobet® Ointment, these show that the average amount used by the patient is 117g over 4 weeks with Enstilar® and 135g of Dovobet® Ointment over the same time period. The average amount of Dovobet® Gel used is 188g, based on 8 weeks usage.

Note: If using other topical products containing Calcipotriol, the total dose of all Calcipotriol containing products should not exceed 15g per day.
FOLLOW UP

Patients should be reviewed after the first four weeks to assess the progress and ensure that the patient is using their preparation effectively, factors to consider include:

- efficacy, tolerability, toxicity,
- reinforce the importance of adherence when appropriate,
- reinforce the importance of a 4 week break between courses due to potent corticosteroid.

If psoriasis is clear (skin looks flat to touch, possibly still with persistent red areas) then treatment may be stopped and emollients continued. If skin is improved but not clear, a second course of treatment may be initiated, for up to a further four weeks and psoriasis reviewed again.

If there has been little or no improvement and the skin is not clear after eight weeks of treatment then either use a topical alternative or refer to secondary care for specialist advice.

SPECIAL WARNINGS

Local skin reactions (itching, erythema, burning, paraesthesia, dermatitis) are common. Patients should be adequately counselled about effective application of the preparation. In order to achieve optimal effect, it is not recommended to take a shower or bath immediately after application. Hands must be washed after each application to avoid accidental transfer to the face, mouth or eyes.

Calcipotriol 50mcg/g and Betamethasone Dipropionate 0.05% contains a potent group III steroid and concurrent treatment with other steroids must be avoided. Adverse reactions found in connection with systemic corticosteroid treatment may occur also during topical corticosteroid treatment due to systemic absorption. Application under occlusive dressings should be avoided since it increases the systemic absorption of corticosteroids.

During pregnancy this treatment option should only be used when the potential benefit justifies the potential risk. Caution should be exercised when initiating treatment to women who breast feed.

The patient should be instructed not to use the preparation on the breast when breast feeding.

SUPPORTING INFORMATION

<table>
<thead>
<tr>
<th>Drug Cost (prices correct as of October 2016)</th>
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<tbody>
<tr>
<td>Dovobet® Ointment 30g - £19.84</td>
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<tr>
<td>Dovobet® Ointment 60g - £39.68</td>
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<tr>
<td>Dovobet® Ointment 120g - £73.86</td>
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<tr>
<td>Dovobet® Gel 60g - £37.21</td>
</tr>
<tr>
<td>Dovobet® Gel 120g - £61.43</td>
</tr>
<tr>
<td>Enstilar® Cutaneous Foam 60g - £39.68</td>
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References

3. The Drug Tariff for pricing [https://www.drugtariff.co.uk/](https://www.drugtariff.co.uk/)

Written by NHS Dorset CCG Medicines Management Team in conjunction with the dermatology working group

Approved by Dorset Medicines Advisory Group

Review date October 2018 or before in light of new evidence and / or recommendations