Letter

Increasing adherence to topical therapy in psoriasis through use of solution medication

Dane Hill¹ MD, Michael E. Farhangian¹, BS, Steven R. Feldman¹,²,³ MD, PhD

Dermatology Online Journal 22 (5): 16

¹Center for Dermatology Research, Department of Dermatology, Wake Forest School of Medicine, Winston-Salem, North Carolina
²Department of Pathology, Wake Forest School of Medicine, Winston-Salem, North Carolina
³Department of Public Health Sciences, Wake Forest School of Medicine, Winston-Salem, North Carolina

Correspondence:

Steven R. Feldman, MD, PhD
Department of Dermatology, Wake Forest School of Medicine
Medical Center Boulevard
Winston-Salem, NC 27157-1071
Tel. (336)716-7740, Fax (336) 716-7732
E-mail: sfeldman@wakehealth.edu

Keywords: psoriasis; topical treatment; compliance; steroid solution spray; patient care; scalp

Abstract

Patient outcomes and clinical improvement are closely related to topical medication adherence, and is especially important in chronic dermatological diseases such as psoriasis. About one-fifth of patients undergoing topical treatment were dissatisfied with its convenience for various reasons. Providers can help increase adherence through selecting the correct medication vehicle, involving family members or friends in the patient’s medication application, and explaining likely side effects to the patient prior to use of the medication. Increased adherence will lead to better psoriasis disease control.

Clinical Challenge

Patient outcomes and clinical improvement are closely related to adherence to topical medications. Adherence is especially important in chronic dermatological diseases such as psoriasis. About one-fifth of patients undergoing topical treatment were dissatisfied with its convenience, a commonly cited complaint among those discontinuing long-term therapy [1,2]. Additionally, many patients using solutions discontinue use of their topical regimen because of cost or because of “burning” or “stinging” with medication application.

Solution
The old dogma was that dry, scaly conditions like psoriasis should be treated with ointment vehicles, but patients may not like or use ointments. From the standpoint of adherence, the best vehicle is the one the patient is most willing to use. Many patients prefer less messy options. For them a spray-on solution product may be preferred. For patients who cannot afford branded spray-on products, a generic corticosteroid solution can be put in an inexpensive spray bottle to achieve a similar effect (for example, http://www.amazon.com/Vitamin-Shoppe-Glass-Bottle-bottles/dp/B00P15EC26/ref=sr_1_8?ie=UTF8&qid=1434822646&sr=8-8&keywords=2+oz+spray+bottle). If patients like the idea of a spray but find that alcohol-based solution vehicles cause too much stinging, a combination betamethasone dipropionate and calcipotriene in an oil vehicle could be prescribed for spray-on application. Alternatively, advising patients that the “burning” or “stinging” sensation when applying solutions means that the medication is working may help patients better tolerate the sensation.

Conflict of Interest: The Center for Dermatology Research is supported by an unrestricted educational grant from Galderma Laboratories, L.P. Dr. Feldman is a speaker for Janssen and Novartis. Dr. Feldman has received grants from Galderma Laboratories, L.P., Janssen, Abbvie, Amgen, Stiefel/GlaxoSmithKline, Celgene and Anacor. He is a consultant for Amgen, Baxter, Caremark, Gerson Lehrman Group, Guidepoint Global, Hanall Pharmaceutical Co Ltd, Lilly, Merck, Mylan, Novartis, Pfizer, Qurient, Suncare Research and Xenoport. Dr. Feldman is the founder and holds stock in Causa Research and holds stock and is majority owner in Medical Quality Enhancement Corporation. He receives Royalties from UpToDate and Xlibris. All other authors have no conflicts to disclose.

References