

Further information and help

NHS24	Freephone 111
NHSinform	www.nhsinform.scot
Patient UK:	http://patient.info
British Association of Dermatologists	www.bad.org.uk
DermNet New Zealand	www.dermnetnz.org
Primary Care Dermatology Society	www.pcds.org.uk

Contact Details

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Opening hours: Mon-Fri 9am-5pm

We are listening - how did we do?

We welcome your feedback, as it helps us evaluate the services we provide. If you would like to tell us about your experience:



- speak to a member of staff
- visit our website: www.wihb.scot.nhs.uk/feedback or share your story at: www.careopinion.org.uk or tel. 0800 1223135
- tel. 01851 704704 (ext 2236)
Monday-Friday between 10am-4pm.

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Disclaimer

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NHS Western Isles

Dermatology Liaison Nurse Service

Your topical treatment



Information and advice

Treatment for your skin condition can consist of several different creams and ointments. We understand that this can be very confusing when remembering what goes where and when and what it does.

The following is a brief guide to the basics of topical treatments and your doctor/nurse can complete a form with your specific treatment.

Emollients

There are several different emollients but they all do the same jobs.

They can be used as a soap and as a moisturiser and come in either a cream, lotion, ointment or gel.

They are used to moisturise the skin, and to form a protective occlusive barrier over broken or fragile skin so that it can heal. They are used all over your body and face.

The lotions, creams and gels are less greasy and therefore nicer to wear in the day, whereas ointments can be very greasy and less pleasant to use.

Emollients are essential to a good skin care routine for treating and preventing dry and itchy skin.

Emollients need to be used all the time, whether your skin is good or bad and be applied liberally between 2-4 times a day by smoothing gently into the skin in the direction the hair grows.

Steroids

Steroids reduce inflammation and speed up the healing of the skin.

They also help to make the skin less red, hot, itchy and sore. They are a treatment, not a cure.

Steroids come in a variety of strengths: mild, moderate, potent, very potent and in various preparations such as gels, mousses, creams, lotions and ointments.

Steroids should only be applied to affected areas of skin by smoothing gently into your skin in the direction the hair grows.

Treatment areas

Treatment for areas such as your face and flexures (armpits, groins and under breasts) require a milder steroid than the rest of your body.

Areas such as arms, legs and trunk require a stronger steroid to be effective.

Treatment use

Your doctor/nurse will tell you how often your treatment should be used, but it is usually once or twice a day - usually after your morning wash and then again in the evening.

DO NOT suddenly stop using steroids. You should gradually reduce them as prescribed by your doctor/nurse or your skin problem may get worse very quickly.

How much should I use?

Topical steroids should be applied with clean hands so that the skin just glistens. Application is measured in finger tip units or FTU.

- 0.5 FTU for genitals
- 1 FTU for hands, elbows and knees
- 1.5 FTUs for the feet, including the soles
- 2.5 FTUs for the face and neck
- 3 FTUs for the scalp
- 4 FTUs for a hand and arm together, or the buttocks.
- 8 FTUs for the legs and chest, or legs and back

The picture below shows 1 x FTU.



Application may sting a little when you first apply your steroid. Remember that topical steroids, used appropriately and under supervision, are a safe and effective treatment.

Which should I use first?

It doesn't matter whether you apply your emollient or steroid cream first as long as you wait 15-30 minutes before applying the second one.