

PRESS RELEASE

NICE issues guidance on the use of tacrolimus and pimecrolimus alongside advice on how frequently topical corticosteroids should be applied for atopic eczema

The National Institute for Clinical Excellence (NICE) has today issued guidance to the NHS in England and Wales on the use of tacrolimus and pimecrolimus to treat moderate to severe atopic eczema in adults. NICE has also issued guidance on how frequently topical corticosteroids should be applied when treating atopic eczema in children and adults.

Atopic eczema is the most common type of eczema and is a chronic relapsing skin condition characterised by intense itching, dry skin, redness and inflammation. Estimates of prevalence vary but the condition may affect as many as 15–20 per cent of school-age children and 2–10 per cent of adults.

The new guidance recommends that tacrolimus can be used as an option for the second-line treatment of moderate to severe atopic eczema in adults and children that has not been controlled by the appropriate use of topical corticosteroids, and where there is a serious risk of side effects from further use of topical corticosteroids (particularly permanent damage to the skin). The guidance also recommends that pimecrolimus can be used as an option for the second-line treatment of moderate atopic eczema on the face and neck in children, provided the same criteria are met.

NICE has also issued guidance recommending that topical corticosteroids for atopic eczema should be prescribed for application only once or twice daily. Where more than one alternative topical corticosteroid is considered clinically appropriate within a potency class, the guidance recommends that the drug with the lowest acquisition

cost should be prescribed, taking into account pack size and frequency of application.

Peter Littlejohns, Clinical Director and Executive Lead for both appraisals, said:

“The impact of atopic eczema on quality of life can be considerable. By recommending the use of tacrolimus and pimecrolimus as an option for the second line treatment of atopic eczema in children and adults, this guidance will help people in England and Wales with this condition to receive the best possible treatment.”

He added: “NICE has also provided the NHS with clear advice about the use of topical corticosteroids. Using these treatments once or twice a day when people are experiencing flare ups is both clinically and cost effective, and this is advice that people with eczema can easily follow by applying them at the same time as the emollients they use regularly to manage their condition. Although accurate information on current prescribing patterns of corticosteroids for atopic eczema is not readily available, implementation of this guidance is likely to result in significant cost savings for the NHS.”

Ends

Notes to Editors

About NICE guidance on tacrolimus and pimecrolimus for moderate to severe atopic eczema in adults

1. Tacrolimus and pimecrolimus are a new class of non-steroidal drug called topical immunomodulators that work mainly by reducing inflammation by ‘switching off’ the activities of certain immune system cells that can cause the skin to become red and broken. They are applied directly to the affected areas of the skin (tacrolimus as an ointment and pimecrolimus as a cream) and are usually used alongside creams that help keep the skin moisturised (emollients). Tacrolimus and pimecrolimus can be used on all parts of the body and do not cause skin atrophy, although they may have other long term side effects that are not yet known.
2. A quick reference version of the guidance is available on the NICE website at www.nice.org.uk/TA082quickrefguide. The full guidance is also available on the NICE website at www.nice.org.uk/TA082guidance

About NICE guidance on topical corticosteroids for atopic eczema in adults and children

3. Corticosteroids are used to treat flare-ups of atopic eczema. They are applied directly to the affected areas of skin (as creams or ointments, for example) to reduce inflammation and itching. Creams, ointments and other preparations containing corticosteroids that are applied directly to the affected area are called topical corticosteroids (often shortened to ‘topical steroids’).
4. The most common side effect of topical steroids is that the skin becomes thin and easily bruised (this is called skin atrophy). This is most likely to happen in areas where the skin

is already thin, such as the face or inside the bends of the joints, and is a particular problem in children. The skin may recover gradually when treatment is stopped but it may never recover completely, and because of their side effects topical steroids are not used continuously but are used for short periods to treat flare-ups of atopic eczema.

5. A quick reference version of the guidance is available on the NICE website at www.nice.org.uk/TA081quickrefguide. The full guidance is also available on the NICE website at www.nice.org.uk/TA081guidance. This guidance does not include the use of topical agents that combine corticosteroids with other active agents (for example, antimicrobials or salicylic acid).

About NICE

6. NICE is part of the NHS. It is the independent organisation responsible for providing national guidance on treatments and care for those using the NHS in England and Wales. Its guidance is for healthcare professionals and patients and their carers to help them make decisions about treatment and healthcare. For further information about NICE you can visit www.nice.org.uk.
7. NICE produces guidance in three areas of health:
 - the use of new and existing medicines and treatments within the NHS in England and Wales – technology appraisals.
 - the appropriate treatment and care of patients with specific diseases and conditions within the NHS in England and Wales – clinical guidelines.
 - whether interventional procedures used for diagnosis or treatment are safe enough and work well enough for routine use – interventional procedures.

NICE also funds three enquiries that undertake research into the way patients are treated to identify ways of improving the quality of care (the investigations are known as confidential enquiries).

8. NICE guidance and recommendations are prepared by independent groups that include professionals working in the NHS and people who are familiar with the issues affecting patients and carers.