### NATIONAL INSTITUTE FOR CLINICAL EXCELLENCE

## **Health Technology Appraisal**

#### Topical corticosteroids for atopic eczema

#### Scope

**Objective:** to establish the clinical and cost effectiveness of once daily application of topical corticosteroids compared to more frequent application in atopic eczema, and to produce guidance to the NHS in England and Wales.<sup>1</sup>

**Background**: atopic eczema is a disease characterised by a red blotchy rash, dry, itchy and inflamed skin. Estimates of the prevalence of eczema vary; it is more common in childhood, occurring in 15-20% of all children, and may occur in as much as 10% of the adult UK population. There is undoubtedly a strong hereditary component; if a parent or parents have eczema, the risk of children developing it is increased. There is evidence to suggest that the prevalence of eczema has increased two to three-fold over the past 30 years, the reasons for which are unclear.

**The technology**: most eczema is managed in primary care. Treatment includes advice on the avoidance of factors that provoke eczema, such as soap and the use of emollients to moisturise and relieve symptoms. For flares, or eczema that does not respond to these measures, topical corticosteroids are normally sufficient to control eczema.

A wide range of topical corticosteroid preparations are available, varying in potency from mild to very potent, and are manufactured in a variety of formulations (e.g. creams, ointments, lotions). Creams are suitable for moist or weeping lesions, while ointments are generally chosen for dry, lichenified or scaly lesions or where a more occlusive effect is required (occlusion increases absorption). Lotions may be appropriate for minimal application to large or hair-bearing areas or for exudative lesions. The BNF (BNF 44 (Sept 2002)) states that preparations should normally be applied once or twice daily and that it is not necessary to apply them more frequently. However, some preparations are licensed for 3 or 4 applications daily.

Intervention(s)	Topical corticosteroids applied once daily. Please see table below for further detail.
Population(s)	Children and adults with atopic eczema, who have not responded to treatment with emollients.
Current standard treatments (comparators)	Application of topical corticosteroids (of the same potency) twice daily or more frequently.
Other considerations:	It will be important to ensure that comparisons between once daily and more frequent applications are made

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between preparations of like potency. Only comparisons between varying frequencies of application of the same corticosteroid, or between different corticosteroids of the same potency, will be considered. The classification of potency for each preparation will be as listed in the BNF 44 (Sept 2002), namely mild, moderate, potent or very potent.
Outcomes that will be considered include: efficacy, side effects, long-term tolerability with repeated exposure, patient preference and cost-effectiveness.
Where evidence permits, consideration will be given to the effect on compliance of factors such as steroid use.
Preparations containing combinations of topical steroids with other active agents will not be appraised.

<sup>&</sup>lt;sup>1</sup> The remit from the Department of Health/National Assembly for Wales is "To advise on the clinically and cost effective use of topical steroids for the treatment of atopic eczema, and in particular to appraise the evidence for twice daily compared to daily treatment."

# **Table of included interventions**

MANUFACTURER	PRODUCT
Alpharma Limited	Cox hydrocortisone cream
BCM Limited	BCM hydrocortisone cream
Bell Sons & Co (Druggists) Limited	Bell sons hydrocortisone cream
Bioglan	Hydrocal, Calacort
Bioglan/GP pharma	Metosyn, Synalar, Synalar 1 in 10 Dilution, Synalar 1 in 4 Dilution
Biorex Laboratories Ltd	Biorex hydrocortisone cream
BMS	Halciderm Topical
Celltech	Bettamousse
Co-Pharma Limited	Co-Pharma hydrocortisone cream
Dermal	Betacap, Dioderm
Diomed Developments Limited	Dayleve
Dominion/Pliva	Modrasone
Dowelhurst	Betamethasone valerate generic
Futuna	Betamethasone valerate generic
Galpharm Healthcare Limited	Galpharm hydrocortisone cream
GSK	Betnovate, Betnovate-RD, Cutivate, Dermovate, Efcortelan, Eumovate, Propaderm
Lagap Pharmaceuticals Limited	Lagap hydrocortisone cream

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# **APPENDIX A**

Norton Pharmaceuticals Limited	Norton Pharmaceuticals hydrocortisone cream, Nortisone cream
Novartis Consumer Health UK Limited	Corteze cream
Pinewood Laboratories Limited	Hydrocortisone cream
Reckitt Benckiser Healthcare (UK) Limited	Timocort hydrocortisone cream
Roussel Laboratories Limited	Hydrocortisyl cream, Roussel hydrocortisone cream
Schering Health/Meadow	Nerisone, Nerisone Forte, Ultralanum Plain,
Schering Plough	Diprosone, Elocon
Stiefel	Stiedex
Thornton & Ross Ltd	Thornton And Ross hydrocortisone cream
Typharm	Haelan
Waymade Plc	Hydrocortistab Cream
Yamanouchi	Mildson, Locoid, Locoid Crelo