

WHO CAN YOU CONTACT FOR FURTHER INFORMATION?

Please speak to your Stoma Nurse if you have any questions or concerns with your ileostomy output, diet, medication, stoma care and products.

The information in this leaflet is for guidance only and does not replace healthcare professional assessment and advice.

If you require this leaflet in a different language or format, please contact Medilink®.

For Medilink® supplies, please contact:

 **FREephone 0800 626388** (UK only)

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Use of topical steroids for peristomal skin conditions



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USE OF TOPICAL STEROIDS FOR PERISTOMAL SKIN CONDITIONS

TOPICAL STEROID TREATMENT

Your stoma care nurse has recommended a topical steroid treatment to treat your peristomal skin condition. Steroid treatments are used to help reduce inflammation.

Conditions such as a contact dermatitis skin reaction, skin ulceration or overgranulation (the skin has healed and "overgrown") often benefit from topical steroid treatment.

There are several topical steroid treatments. Your stoma care nurse has recommended a specific one for your individual treatment and will ask your GP to prescribe the treatment.

Steroid treatments to use on the skin are typically creams, gels or tape. However, there are other types of steroid treatments which can be used too. Topical steroid treatments include:

- Hydrocortisone cream (0.5 or 1%)
- Synalar gel, (fluocinolone acetonide 0.025%)
- Betnovate or Betacap scalp lotion (betamethasone valerate 0.1%)
- Haelan tape (fludrocortide 0.0125%)



How to use: Apply once a day, on affected area only and use sparingly. Your stoma care nurse will advise on application. This may also sting on contact.

Other steroid treatments might be recommended to use topically, as they do not sting the skin or leave a greasy residue:

- Beclomethasone dipropionate
Becloforte INHALER
- Fluticasone propionate
/ Flixonase
NASAL SPRAY



How to use: Apply no more than once daily, onto the affected area only and sparingly. If using inhaler, direct the "puff" at the affected area. If using the nasal spray, pump the solution onto your finger tip to apply.

Applying a dressing or pouch over the topical steroid treatment may increase the potency/ strength of the steroid, therefore do not use more than the recommended dose.

STOPPING TREATMENT

Your stoma care nurse will advise you when to stop treatment, in general;

Once the skin has improved, gradually reduce applying the treatment, rather than stopping completely- ie. Apply on alternate days for a couple of weeks, then stop the treatment. This may prevent recurrence of the inflammation.

Topical steroids are usually safe to use but if you have any concerns please speak to your stoma care nurse or GP.

Generally it is preferable to not use topical steroid treatment for a prolonged amount of time, though sometimes this can be necessary. Your stoma care nurse (or yourself) may ask your GP to refer you to a dermatologist, if your skin condition persists.

GENERAL INFORMATION

Your stoma care nurse may request a swab of the affected area to rule out infection, prior to starting the treatment.

Please do not use baby wipes, hand wipes, soaps or perfumed products on your skin, as this may make your skin reactive, particularly under the pouch adhesive.

If you need to change any pouches or accessory products (because you or your stoma nurse suspect an irritant reaction), it is usually best to change 1 product at once, to see which particular product is causing reaction.

Your stoma care nurse may also recommend doing a contact patch test, if she suspects a reaction to a product.

Only use steroid treatments with children on the specific advice of stoma care nurse, GP or dermatology department, and ensure the steroid is not contraindicated with other medicines.

Supporting you every step of way because you deserve exceptional service.