

Treating steroid-responsive dermatoses including atopic dermatitis, seborrhoeic dermatitis and psoriasis¹

Topical corticosteroids are commonly prescribed for eczema, dermatitis and other steroid responsive skin conditions. They may help ease redness and reduce inflammation so that the skin can improve.²

Topical corticosteroids are available in many different strengths and formulations. Your health professional has chosen to recommend Zatamil, a moderate strength topical corticosteroid,³ for you based on the severity of your skin condition, where it is on your body, and your age.⁴

USING TOPICAL CORTICOSTEROIDS CORRECTLY

Topical corticosteroids are a safe and effective treatment⁵ when used appropriately. Together with your health professional and Ego, we will help you understand how to correctly and confidently apply your topical corticosteroid for the most desired outcome.

APPLYING ZATAMIL⁶

- Apply a light film of Zatamil Hydrogel or Ointment or a few drops of Zatamil Lotion to the affected area once a day and rub in lightly.*
- If you need further clarification or assistance, talk to your health professional for guidance.

*Apply Zatamil per your health professionals directions. Do not use for more than 4 continuous weeks unless your health professional has advised you to.



ZATAMIL 0.1% HYDROGEL



ZATAMIL 0.1% OINTMENT

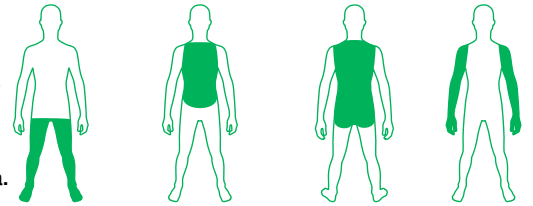


ZATAMIL 0.1% LOTION

Guide to using topical corticosteroids

HOW MUCH TO USE*

The table below provides a guide about how much topical corticosteroid (in FTU) can be used to treat a specific body area.



Age	Entire leg & foot	Front of chest & abdomen	Back & buttocks	Entire arm & hand
3–12 months [†]	1.5	1	1.5	1
1–3 years [†]	2	2	3	1.5
3–6 years [†]	3	3	3.5	2
6–10 years [†]	4.5	3.5	5	2.5
> 10 years [†] (including adults)	8	7	7	4

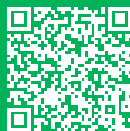
Adapted from Topical Steroid-how much do I use, Australian Medicines Handbook updated April 2017⁸
Note: FTU used in this table is based on an adult FTU, this is then applied to the child.

* Use Zatamil only as directed by your health professional. Do not use Zatamil on anyone else, even if they appear to have the same symptoms as you⁶

What is a finger-tip unit measurement?

Finger-tip units can be a useful way to measure how much you need to apply.

A finger-tip unit (FTU) is the amount of cream squeezed from a tube that will fit along an adult's index finger to the first crease.⁷



Scan to watch how to apply a topical corticosteroid



Maintaining the skin barrier between flares

First-line management options common to all severities of eczema includes the use of **short-term topical corticosteroids** to control flare-ups,⁸ combined with **on going use of emollients** to help relieve the symptoms of eczema.^{8,9}

QV Dermcare Eczema Daily Wash & Cream with ceramides, a therapeutic range designed to help support the skin barrier and relieve symptoms of mild to moderate eczema.

Scientifically formulated to help improve skin hydration, reduce moisture loss and reduce itch associated with dry skin.



QV Dermcare Eczema Daily Wash & Cream with ceramides

Treat with the most appropriate strength topical corticosteroid.

Educate and learn more on topical corticosteroids. Simply scan the QR code.



And Maintain the skin barrier to help relieve symptoms of mild to moderate eczema with QV Dermcare Eczema Daily.

My Eczema Management Plan

MY NAME:

DATE:

MY GP:

MY PHARMACIST:

MANAGING ECZEMA

- Eczema can be effectively managed by a daily skincare regime that supports the skin's barrier function, and avoiding known triggers.
- Using products designed to retain moisture, reduce itchy, dry skin and control flares can be beneficial in managing the symptoms.

TREAT

TOPICAL CORTICOSTEROIDS

To help reduce inflammation and redness of the skin, apply a sufficient amount of Zataamil once daily, to all areas of inflamed skin to ensure you have covered the entirety of the affected area. Continue use until the condition has cleared for up to 4 continuous weeks, or as advised by your health professional. It is recommended to apply immediately after cleansing, before or after moisturising.

- Zataamil 0.1% Hydrogel
- 0.1% Ointment
- 0.1% Lotion _____ x daily

MAINTAIN & PROTECT

CLEANSE & MOISTURISE

Cleanse once daily in lukewarm water, using a soap-free wash with added moisturisers.

Follow with a unperfumed moisturiser to help repair the skin barrier and hydrate the skin. Apply a liberal amount (at least twice daily) and smooth in the direction of hair growth until absorbed. Moisturisers can be applied before or after a topical corticosteroid.

When skin is extremely dry and cracked, apply a water-free ointment for relief and experience no sting.

- QV Dermcare Eczema Daily Wash with Ceramides: Cleanse eczema skin _____ daily
- QV Dermcare Eczema Daily Cream with Ceramides: Moisturise eczema skin _____ daily
- QV Dermcare Sting-Free Ointment with Ceramides: Moisturise cracked, dry skin _____ daily

CONTROL FLARES

CLEANSE & MOISTURISE

When experiencing an episodic flare up, cleanse using a wash designed to remove bacteria that can aggravate eczema. Follow with a rich emollient moisturiser to help reduce the occurrence of symptoms. Apply a liberal amount of the moisturiser (at least three times daily) to the affected area. Recommended immediately after cleansing and in the evening.

- QV Flare Up Wash
– Cleanse and relieve symptoms of flares _____ daily
- QV Flare Up Cream
– Moisturise and relieve symptoms of flares _____ daily

RELIEVE INFECTION

BATHE

When infection is present on eczema skin, soak in a bath oil that contains antibacterial properties. Your health professional will diagnose whether bacteria such as Staphylococcus aureus is heightening the condition.

A dual action bath oil containing antibacterial and emollient ingredients, helps to reduce the levels of bacteria on the skin, while helping to maintain skin hydration. Follow with a rich emollient moisturiser to help reduce occurrence of symptoms.

- QV Flare Up Bath Oil
Cleanse infected eczema _____ daily

RELIEVE ITCH

CLEANSE

Cleanse in a pine tar formulation when inflammation and itch are a dominant symptom. Pine tar helps provide effective relief from itch. Reducing the need to itch may reduce exacerbation of the inflamed condition and in turn help improve topical treatment outcomes.

- Pinetarsol Bath Oil _____ daily
- Pinetarsol Bath Solution _____ daily
- Pinetarsol Gel _____ daily
- Pinetarsol Cleansing Bar _____ daily

AVOID TRIGGERS

Eczema skin is more likely to be irritated by external factors. Some of the triggers recommended to avoid are:¹¹

- Hot temperatures and overheating your skin. Layer clothing for easy removal as required to keep the skin cool. Cotton clothing is recommended.
- Perfumed products and contact with irritants including detergents, soaps, and chlorinated pools.
- Dust and dust mites, pet fur.
- Allergies _____
- Other _____

The information contained in this guide is for educational purposes only. It is not a substitute for medical judgement, advice, diagnosis or treatment of any skin condition or problem.

QV Dermcare Care Eczema Daily, QV Flare Up Cream (Glycerol), QV Flare Up Bath Oil (benzalkonium chloride, light liquid paraffin, triclosan), Pinetarsol Bath Oil and Gel (tar (pine tar), Pinetarsol Bath Solution: (tar (pine tar), trolamine lauril sulfate):

ALWAYS READ THE LABEL. FOLLOW THE DIRECTIONS FOR USE. IF SYMPTOMS PERSIST, WORSEN OR CHANGE UNEXPECTEDLY, TALK TO YOUR HEALTH PROFESSIONAL.

Review the full PI before recommending or prescribing Zataamil (mometasone furoate) 0.1% Hydrogel, Ointment or Lotion:

Always read the label. Follow the directions for use. Do not use for more than 4 continuous weeks unless your health professional has advised you to. If symptoms persist, worsen or change unexpectedly, talk to your health professional.

Please read the Consumer Medicine Information (CMI) before using Zataamil. You can access the full CMI at <https://www.ebs.tga.gov.au>



References: 1. Greive KA, Barnes TM. Bioequivalence of 0.1% mometasone furoate lotion to 0.1% mometasone furoate hydrogel. *Australas J Dermatol.* (2016) 57, e39–e45. 2. National Eczema Association. Prescription Topical Treatment [Internet]; 2002-2018 [cited 2021 June 15]. Available from <https://nationaleczema.org/eczema/treatment/topicals/> 3. Dermatology, version 4. Topical corticosteroid preparations (Appendix 4.1). Therapeutic Guidelines Ltd [Internet]. 2019 [cited 2021 June 15]. Available from: <https://tgldcdp.tg.org.au/viewTopic?topicfile=topical-corticosteroidpreparations> 4. Page SS, Watson S, Loh R. Atopic dermatitis in children. *AFP*; 2016; 45(5):293-206. 5. Smith SD, Dixit S, Fischer G. Childhood atopic dermatitis Overcoming parental topical corticosteroid phobia. *Med T Aust.* 2013; 14(6):47-52. 6. Zataamil CMI. Date of last revision: 2018. 7. Long CC, Finlay AY. The finger-tip unit – a new practical measure. *Clin and Exper Derm.* 1991 ;16:444-447. 8. Australian Medicines Handbook. Topical Steroid – how much do I use? [Internet]; 2012 [updated 2012 May, cited 2021 June 15]. Available from: <https://resources.amh.net.au/public/fingertipunits.pdf> 9. Dermatology Expert Group. Therapeutic Guidelines: Dermatology, version 4. Dermatitis: Atopic dermatitis. Therapeutic Guidelines Ltd [Internet]. 2021 [cited 2021 June 15]. Available from: https://tgldcdp.tg.org.au/viewTopic?topicfile=dermatitis#toc_d1e129 10. Starr O. Atopic Eczema: Moisturisers for eczema-emollients. 2018 [cited 6 July 2021]. Available from: <https://patient.info/skin-conditions/atopic-eczema/moisturisers-for-eczema-emollients>. 11. Better Health Channel: Eczema (atopic dermatitis). [cited 15 June 2021]. Available from: <https://www.betterhealth.vic.gov.au/health/ConditionsAndTreatments/eczema-atopic-dermatitis#rpl-skip-link>

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