



Tazarotene (Zorac)

Tazarotene (also referred to by its commercial name Zorac) is a vitamin A derivative, which may also be referred to as a topical retinoid. Tazarotene can be used to treat mild to moderate plaque psoriasis, and works by slowing down the rapid skin cell production found in psoriasis. Tazarotene is a fast drying, odourless gel that comes in two strengths, 0.05% and 0.1% and is available on prescription only. It is advisable to begin with the lower 0.05% strength and progress to the 0.1% if necessary.

How to use tazarotene

Tazarotene is intended for use once daily on psoriasis that covers no more than 10% of the body surface area. It can be used for up to 12 weeks before review by your GP or Dermatologist.

Ideally, tazarotene should be applied at night. In the case of dry skin conditions, like psoriasis, it is recommended to apply a moisturiser an hour before applying tazarotene. Avoid applying tazarotene to unaffected skin, but if it does come into contact, it can be washed off with water. Needing to avoid non-psoriatic skin, however, mean that tazarotene is more suitable for people with large areas of psoriasis, rather than small, widespread 'spots'. Wash your hands with soap and water after applying tazarotene. If the area of psoriasis you are treating is on your hands, be careful not to rub your eyes after applying the gel.

After applying tazarotene, some people notice a feeling of itching, burning or stinging. This feeling may occur less often as your skin gets used to the medication. Contact your doctor if the irritation becomes troublesome. It is normal for psoriasis plaques to become very red before clearing with tazarotene. The redness is often intense in colour, but is generally not painful.

Side effects of using tazarotene

The most common problem when using tazarotene is skin irritation, most frequently itching, but burning, redness and irritation have also been observed. It is important therefore to use moisturisers before applying tazarotene. To test for the possibility of skin irritation, apply tazarotene on a small, stubborn plaque for several days before applying to plaques on other areas of the body.

Due to the potential risk of irritation when using tazarotene, it is not intended for use on inflamed or pustular psoriasis or psoriasis affecting the face or flexural (ie. underarms, groin, inner joints) sites.

Precautions

Avoid excessive exposure to UV light (sunlight, UVB, PUVA or sunbeds) whilst using tazarotene, as it may make your skin more susceptible to sun damage. Use a sunscreen (minimum SPF 30) and wear protective clothing if you expect to be exposed to a lot of UV light. Speak to your doctor or nurse regarding the use of tazarotene if you are receiving UV therapy.

Tazarotene is not recommended for use by pregnant women, women attempting to become pregnant or women who are breastfeeding. Women in their childbearing years should use reliable birth-control measures during treatment with tazarotene as it may have an effect on an unborn child. If you become pregnant whilst using tazarotene you should stop treatment and consult your doctor.

Although tazarotene is licensed for use in psoriasis, it is not included in guidance published by the National Institute for Health and Care Excellence (NICE) on the treatment of psoriasis. This means that it may not be one of the initial group of treatments that are offered to you. However, some people do find tazarotene to be effective, and it is available for use should other treatments not work.

The information in this resource is not intended to replace that of a healthcare professional: If you have any concerns or questions about your treatment, do discuss this with your doctor or pharmacist and **always read the patient information leaflet** to make sure you are using it correctly.

For more information, or for a list of resources used in the production of this information sheet, please contact the Psoriasis Association.

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The Psoriasis Association, Dick Coles House, Queensbridge, Northampton, NN4 7BF
Registered Charity No. 257414 and SC039886
01604 251620/ www.psoriasis-association.org.uk /mail@psoriasis-association.org.uk

