



Vitamin D

What are Vitamin D treatments?

Vitamin D treatments are a type of topical (applied to skin) treatment for psoriasis. Vitamin D treatments can come in ointment, lotion, gel and foam formations. They are not the same as vitamin D supplements that you might take. Topical vitamin D treatments act by slowing down the production of skin cells and having an anti-inflammatory effect. This leads to an improvements in psoriasis symptoms for some people. Vitamin D treatments are only available on prescription.

When should vitamin D treatments be used?

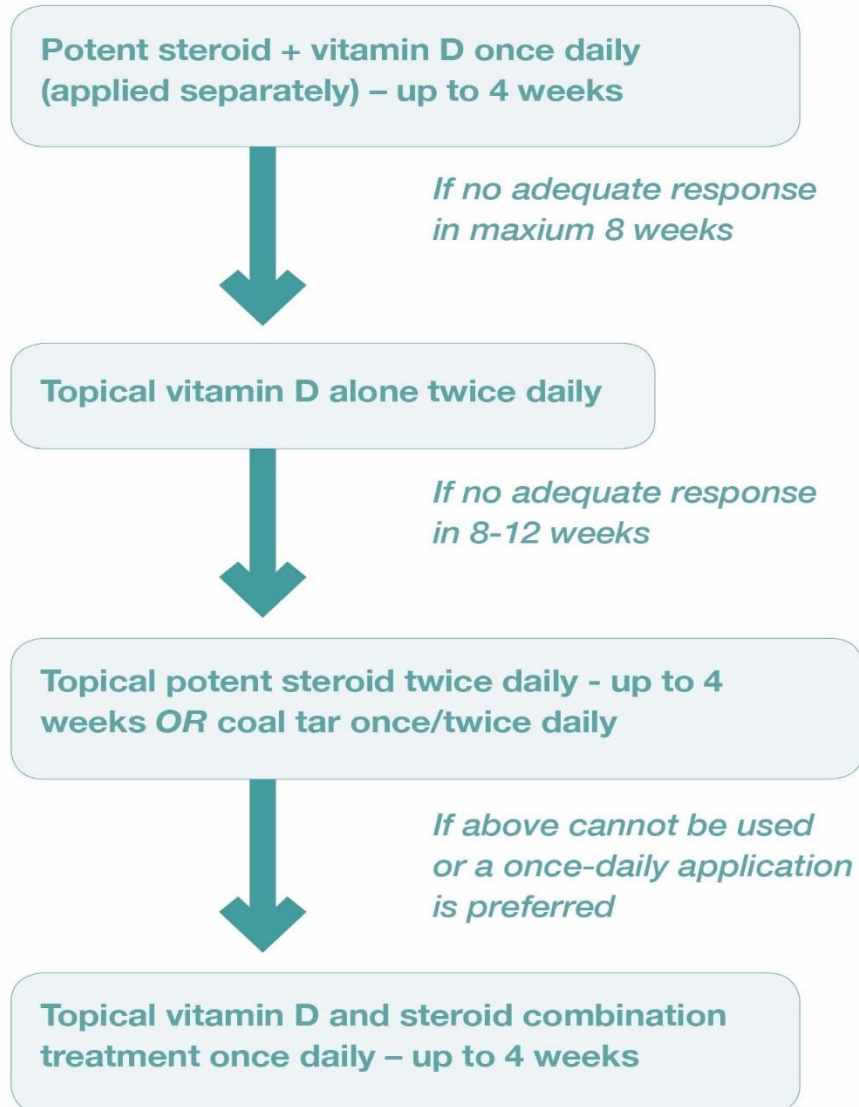
Vitamin D treatments are one of the first topical treatments to be prescribed to most people with psoriasis. They may be used separately, or in combination with topical steroid treatments. It is recommended that a review appointment is arranged four weeks after starting any new topical treatment (two weeks for children), so that your doctor can assess what the results of the treatment are so far, and to check if you need any help with using the treatment.

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As with all topical treatments, it may take a number of weeks of use for a Vitamin D treatment to become fully effective.

The following flowchart is a summary of the recommended order that topical treatments should be prescribed in, for people with plaque psoriasis on their torso or limbs. This process may differ for people with psoriasis in different areas:

NICE Topical Treatment Guidance



How should topical vitamin D treatments be used?

Vitamin D treatments are easy to use and, when used properly, are unlikely to cause any side effects. As with all treatments, however, they should not be overused – too much topical vitamin D could interfere with the body's absorption of calcium. It is thought that topical vitamin D can make the body more sensitive to UV light, and so people using these treatments might be advised to limit time out in the sun – check with your doctor or refer to the enclosed patient information leaflet for further advice.

It is thought that 'active' topical treatments, including topical vitamin D treatments, work better when the skin is well moisturised. Therefore, it is recommended that an emollient (moisturiser) should be applied and allowed to sink in about half an hour before using a topical vitamin D treatment.

Types of topical vitamin D treatments

There are four vitamin D treatments available in the UK – calcipotriol (Dovonex), calcitriol (Silkis) and tacalcitol (Curatoderm), and a calcipotriol and steroid combination treatment that comes in different formulations (Dovobet and Enstilar). Commercial treatment names are used in the rest of this resource, as people are most likely to be familiar with them.

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Curatoderm

This is available as an ointment and a lotion. Curatoderm ointment is used to treat plaque psoriasis, and the lotion for plaque psoriasis in particular on the scalp. It can also be used on sensitive areas of the body such as the face and genital or skin fold areas.

Curatoderm should be applied sparingly once daily to the affected areas, preferably at bedtime. If using the ointment to treat scalp psoriasis, it can be left on overnight and shampooed out the next morning. The amount used should not exceed 10g per day (of the ointment) or 10ml per day (of the lotion). How long you use Curatoderm for will depend on the severity of the psoriasis and should be discussed with your doctor.

Curatoderm is not recommended for those with pustular types of psoriasis. Possible side effects of Curatoderm include skin irritation and allergic reactions, however you should refer to the patient information leaflet that comes with the treatment for the full list of side effects and precautions.

Dovonex

This is available as an ointment, although a generic form of calcipotriol scalp solution (**not** called Dovonex) is available.

Dovonex ointment is used to treat plaque psoriasis and the scalp solution for scalp psoriasis. The ointment should be applied once or twice daily, and no more than 100g should be used per week. For children over 12 years old, apply twice daily and do not exceed 75g per week. For children between 6 and 12 years old, apply twice daily and do not exceed 50g per week. There is limited experience of using Dovonex in children under 6 years of age, and so a maximum safe dose has not been established, but the Dermatologist will advise, if this is relevant.

Dovonex is not to be used on the face or other sensitive body areas. Possible side effects of Dovonex include skin irritation and allergic reactions, however you should refer to the patient information leaflet that comes with the treatment for the full list of side effects and precautions.

Silkis

This is available as an ointment and is used for the treatment of mild to moderate plaque psoriasis covering up to 35% of the body. Silkis should be applied to the affected areas twice per day – preferably morning and evening. It is recommended that not more than 35% of the body surface be exposed to daily treatment and not more than 30g of ointment should be used daily. Silkis should not be used in people with kidney or liver dysfunction, or in those who have problems with the absorption of calcium in their body.

Silkis can be used on the face with caution – perhaps test a small patch first in case of irritation. Possible side effects of Silkis include skin irritation and allergic reactions, however you should refer to the patient information leaflet that comes with the treatment for the full list of side effects and precautions.

Dovobet/Enstilar

Dovobet/Enstilar is a combination of calcipotriol and a potent steroid (betamethasone, as in Diprosone). It comes as an ointment or gel (Dovobet) or foam (Enstilar) and is used to treat plaque psoriasis. The gel and foam formulations can also be used to treat scalp psoriasis. Neither Dovobet nor Enstilar should be used in sensitive body areas such as the face, genital areas, or skin folds.

Dovobet should be applied to affected areas – up to a maximum of 30% body surface area – once daily for a maximum of four weeks. After this period, your Dermatologist should review the treatment progress. Application should be no more than 15g per day and 100g per week.

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Dovobet should not be used in people who have problems with the absorption of calcium in their body, those with pustular psoriasis, skin infections, and certain other skin conditions.

Enstilar foam should be applied once daily for a maximum of four weeks. After this period, your Dermatologist should review the treatment progress. Like Dovobet, application should be no more than 15g per day and 100g per week. Again, like Dovobet, Enstilar should not be used in people who have problems with the absorption of calcium in their body, those with pustular psoriasis, skin infections, and certain other skin conditions.

Possible side effects of Dovobet and Enstilar include skin irritation and allergic reactions, however you should refer to the patient information leaflet that comes with the treatment for the full list of side effects and precautions.

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

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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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