

# Topical steroids – the truth behind the myths



Topical steroids form an important part of the treatment plan for most people with atopic eczema. When eczema flares up topical steroids reduce inflammation, ease soreness and irritation, reduce itching and relieve the need to scratch, allowing the skin to heal and recover.

Steroids can be used with confidence when they are used as prescribed by a doctor, nurse or pharmacist. That said, some people may be reluctant to use steroids as they have heard bad things about them – things that aren't necessarily true. Surveys have shown that:

- More than half of parents of children with eczema believe that topical steroids should only be used to treat severe eczema
- One fifth of parents believe that topical steroids are too dangerous to use on their children
- More than a quarter of parents have not used prescribed topical steroids as a result of their concerns about this treatment

## Myth 1 Topical steroids damage the skin, making it thinner

### The Truth:

It's true that topical steroids can make the skin thinner and less elastic if they are used too much. But if topical steroids are used as prescribed (see below) – typically once or twice a day, for short periods of time and applied sparingly – there is no need for concern.

The strength of steroid prescribed (mild, moderate, potent or very potent) will depend on how bad the eczema flare is and where it is on the body. For example, a moderate steroid is usually prescribed to treat moderate eczema. Eczema on areas of delicate skin, like the face and groin, should only be treated with a mild steroid. The same is also true for treating eczema on a child or elderly person's skin, as their skin is more delicate than the skin of adult.

If you are uncertain about any prescribed treatments, don't be afraid to ask a pharmacist or your doctor.

## Myth 2 Topical steroids cause stunted growth and development, and make you more likely to pick up infections

### The Truth:

You may have heard that steroids 'stunt growth and development', but this is only a problem if a strong steroid is used in excessive amounts over a very long period of time.

This should not be a concern as your doctor, nurse or pharmacist will demonstrate how much of the steroid to use. They will also keep track of your prescriptions to ensure that you aren't using too many tubes.

## Myth 3 Topical steroids cause the body to become more hairy, cause men to become impotent and are addictive

### The Truth:

Anabolic steroids, which are sometimes taken by body builders, have become well publicised in the media. They work on the whole body (systemically) and can affect the body's hormones, causing unpleasant side effects like those listed above.

Topical steroids contain a completely different type of steroid. When applied to the skin, it will work specifically on the inflamed area and does not cause the same side effects as anabolic steroids.

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**Myth 4** Using topical steroids for several years means you become immune to their effect and can make your eczema worse

**The Truth:**

This is a common myth. You sometimes hear people say they have ‘become immune to a drug’. In fact they really mean they have become ‘tolerant’ to the drug, which means that a person’s reaction to the chemicals in a drug, such as a painkiller or alcohol, decreases so that larger doses are required to achieve the same effect. However, people can’t become tolerant to steroids; we all have them naturally, and we can’t live without them.

The topical steroids you get from the pharmacist provide additional help so that your skin can get over a flare-up much more quickly. Using them as instructed by your nurse, doctor or pharmacist will help you to control a flare effectively.

**Myth 5** It is dangerous to use your topical steroid on cracked or broken skin

**The Truth:**

You may have heard or read that it is dangerous to apply a steroid cream or ointment to your skin when it is cracked and broken because it will be absorbed into your body and cause unwanted side effects.

Although it is true that a steroid is more easily absorbed through broken skin, if you are using it as directed (once or twice a day, for short periods of time) then you don’t need to worry. Remember that when you have eczema your skin may well become cracked during a flare up and using your steroid will help the healing process.

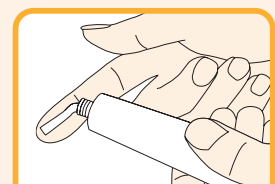
That said, if you think your skin has become infected you should seek advice from a healthcare professional, like your nurse, doctor or pharmacist, as steroids should generally not be used on infected eczema.

**Myth 6** When I use a topical steroid I should always apply a very small amount of it

**The Truth:**

When your doctor prescribes a steroid for you they may advise to you use it sparingly. This doesn’t necessarily mean that you should only apply a small amount; you will need to apply a thin layer to each area of active eczema, so the amount you need will depend upon how much of your body is affected. You may find it useful to think about how much to use in terms of fingertip units (see chart).

Remember, the amount of steroid you put on should always be far less than the amount of emollient you use – you will need roughly ten times more of your emollient than you need of your steroid. When you are applying both treatments you should leave some time (about 30 minutes) between applications – to allow the first one to be fully absorbed before you put the second one on – but it doesn’t matter which you put on first.



Area of the body	Fingertip units per day
Scalp	2-4
Face and neck	2-4
Both arms	4-8
Trunk (front and back)	14
Both hands	2-4
Groin	2-4
Both legs	14