



# ABSOLUTE SCOOP

## DID YOU KNOW?

Do you feel your facility would be a good candidate to eliminate unnecessary topical orders?

Absolute's Consultant Pharmacists would be happy to focus on deprescribing unnecessary topical medications during your facility's next scheduled review. Reach out and let us know! It's a great way to save nursing time and reduce costs.



## DEPRESCRIBING TOPICAL THERAPIES

*Written by Marina Saunders, PharmD, RPh, BCGP, Consultant Pharmacist*

Most topical treatments are prescribed to address acute issues, but they are often ordered without stop dates. This can lead to unnecessary orders remaining on a resident's profile, increasing costs for both the resident and the facility due to the expenses of the drug and the nursing time needed to administer these treatments. Additionally, topical medications are not without side effects. While we typically think of oral medications as the primary cause of adverse effects, many topical treatments can cause localized issues and may also result in significant systemic absorption through transdermal routes. Often, these medications are overlooked in deprescribing efforts and are considered more benign than other routes of administration. However, it is essential to recognize that any medication can cause unwanted side effects and should not remain active if it is no longer necessary. Below is a breakdown of some of the preferred topical orders to consider deprescribing, from a Consultant Pharmacist perspective.

### **Nystatin Powders and Creams**

Due to the longer durations often required for treating fungal infections, prescribers may hesitate to assign stop dates for antifungal treatments. As a result, patients may continue using the same Nystatin order for months, or even years, after the initial issue has resolved. Nystatin powder is commonly prescribed for yeast issues in skin folds but is often continued even when switching to a more affordable topical product would be more effective for maintaining a dry, yeast-free environment. Alternatives such as Gold Bond, talc powder, or baby powder are excellent options in these cases. Some Nystatin-containing creams and ointments also include a corticosteroid component (e.g., Nystatin/triamcinolone), making deprescribing even more critical due to the systemic absorption of the corticosteroid and associated adverse effects.

### **Topical Corticosteroids**

Topical corticosteroids can be particularly concerning. Many high-potency versions are readily absorbed through the skin and can cause almost as many systemic adverse effects as oral steroids, including Cushing's syndrome. Additionally, they pose risks to the local application area. These topicals can lead to skin thinning, increased susceptibility to infections, inflamed hair follicles, rosacea, acne, and excessive hair growth.



The risk increases with more potent corticosteroids like clobetasol, betamethasone, fluocinonide, and triamcinolone. In patients who have been using a topical corticosteroid for more than 12 months, a withdrawal reaction can occur when discontinuing, which may cause changes in skin color, burning, itching, peeling skin, open sores, or a flare-up of the underlying skin condition. For these long-term orders, it is crucial to consider gradually tapering the corticosteroid. In the long-term care population, the side effects of corticosteroids are particularly concerning, as many patients already have compromised or sensitive skin. Unnecessary corticosteroid use can lead to skin breakdown and, ultimately, wounds that are challenging to heal in this population.

### Topical Antibiotics

There are very few indications for the long-term use of topical antibiotics. Any such orders should be evaluated for their continued necessity. Similar to the prolonged use of oral antibiotics, long-term use of topical antibiotics can contribute to the development of multi-drug-resistant organisms, which are difficult to treat and a major concern in nursing facilities. Practice good antimicrobial stewardship by setting a specified duration for any topical antibiotic. Like other medications discussed, topical antibiotics are not without side effects, including contact dermatitis and skin breakdown.

### Call to Action

Review your residents' medication lists. Are there valid indications for the long-term topical medications they are prescribed? Are these treatments still relevant and necessary? Could they be replaced with a barrier cream or an unmedicated powder? This is an excellent area for deprescribing, which can reduce patient treatment burdens, nursing time, and facility costs. The next time you encounter a new topical order, ask if a stop date or reevaluation date can be included.

## About the Author



*Outside of work, Marina can be found traveling (her favorite vacation spot is Croatia – where her parents grew up), scuba diving, and spending time with her husband, dogs, and cats!*

Marina has been with Absolute Pharmacy for over 7 years. She started as an operations pharmacist and is now part of our consultant pharmacist team. When asked about what she enjoys most about her job, her answer is "providing valuable help to our facilities and patients". Whether providing immunizations, solving medication-related problems, writing informative articles, or interacting with other healthcare professionals, Marina's passion for patient care is evident in all she does!



**What did one Christmas tree say to the other?**

You need to lighten up.

Happy  
**Holidays**

**How do Santa's elves get to work?**

They drive minivans.