



*We customize individual prescriptions  
for the specific needs of our patients.*

**FEBRUARY 2013**

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**PRESCRIPTION COMPOUNDING FOR**

**DERMATOLOGY**

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## PSORIASIS VULGARIS

The following study found that topical caffeine is an effective, safe, and inexpensive treatment for psoriasis - "Evaluation of the efficacy of topical caffeine in the treatment of psoriasis vulgaris" ([J Dermatolog Treat. 2005;16\(4\):234-7](#)).

### ABSTRACT

**BACKGROUND:** Psoriasis is a common disease which often requires long-term maintenance therapy. In psoriatic epidermis, the level of cyclic adenosine monophosphate (cAMP) decreases. It has been reported that beta-blockers exacerbate existing psoriatic plaque and decrease the concentration of intracellular cAMP. Caffeine is a methylxanthine that inhibits phosphodiesterase enzyme and results in a higher concentration of intracellular cAMP.

**OBJECTIVE:** Evaluation of the efficacy of topical caffeine 10% in the treatment of psoriasis.

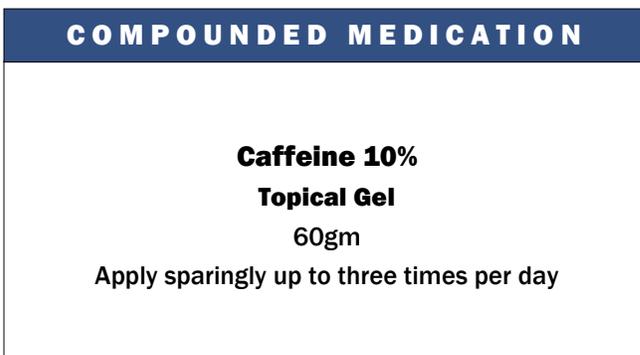
**PATIENTS AND METHODS:** The patients were treated by topical application of 10% caffeine or placebo three times per day on the right or left side of the body (randomly selected by flipping a coin). Thirty-nine patients with stable plaque psoriasis were included in a randomized, double-blind, placebo-controlled, right/left comparison. The patients visited every other week for a period of 8 weeks. Their Psoriatic Area and Severity Index (PASI) scores were assessed at each visit.

**RESULTS:** The reductions in PASI scores measured at the four visits for the caffeine-treated group were 2.64+/-2.89, 4.47+/-3.62, 5.73+/-4.16, 6.58+/-4.40 and for the placebo-treated group the values were 1.45+/-2.32, 3.04+/-2.68, 4.02+/-3.36, 4.43+/-3.45, respectively. Comparing the corresponding results of the two groups, p values at the second, fourth, sixth and eighth week were 0.081, 0.083, 0.079 and 0.047, respectively. Based on presented p values, the treatment with caffeine is more effective than with placebo after 8 weeks ( $p < 0.05$ ), and the only side effect of caffeine is mild itching.

**CONCLUSION:** Based on the results of the trial, topical caffeine is an effective, safe and inexpensive treatment for psoriasis, with a delay in action. PMID: 16249145

With our state of the art compounding lab and pharmaceutical knowledge and experience, we can compound caffeine into a topical gel in a variety of strengths to meet the unique needs of each of your patients.

An example of how you might prescribe follows:



## ATOPIC DERMATITIS

The following studies find that topical vitamin B (12) and Urea may both be effective, well tolerated, and safe therapeutic approaches for the treatment of atopic dermatitis.

“Topical vitamin B12—a new therapeutic approach in atopic dermatitis—evaluation of efficacy and tolerability in a randomized placebo-controlled multicentre clinical trial” (Br J Dermatol. 2004 May;150(5):977-83).

### ABSTRACT

**BACKGROUND:** Vitamin B (12) is an effective scavenger of nitric oxide (NO). As the experimental application of a NO synthase inhibitor, N omega-nitro-L-arginine, led to a clear decrease in pruritus and erythema in atopic dermatitis, it would be reasonable to assume a comparable effect of vitamin B (12).

**OBJECTIVES:** The efficacy and tolerability of a new vitamin B (12) cream as a possible alternative to current therapies was examined.

**METHODS:** A prospective, randomized and placebo-controlled phase III multicentre trial, involving 49 patients was conducted. For the treatment duration of 8 weeks, each patient applied twice daily (in the morning and evening) the vitamin B (12)-containing active preparation to the affected skin areas of one side of the body and the placebo preparation to the contralateral side according to the randomization scheme.

**RESULTS:** On the body side treated with the vitamin B(12) cream, the modified Six Area Six Sign Atopic Dermatitis score dropped to a significantly greater extent than on the placebo-treated body side (for the investigational drug 55.34 +/- 5.74 SEM, for placebo 28.87 +/- 4.86 SEM, P < 0.001). At the conclusion of the study, the investigator and patients awarded mostly a 'good' or 'very good' rating to the active drug (58% and 59%, respectively) and a 'moderate' or 'poor' rating to the placebo (89% and 87%, respectively).

**CONCLUSIONS:** Topical vitamin B (12) is a new therapeutic approach in atopic dermatitis. **These results document a significant superiority of vitamin B(12) cream in comparison with placebo with regard to the reduction of the extent and severity of atopic dermatitis.** Furthermore, the treatment was very well tolerated and involved only very low safety risks for the patients. PMID: 15149512

We have the ability to combine Vitamin B12 and Urea together into one topical cream.

“A double-blind study of tolerance and efficacy of a new urea-containing moisturizer in patients with atopic dermatitis” (J Cosmet Dermatol. 2010 Mar;9(1):16-21).

### ABSTRACT

**BACKGROUND:** Atopic dermatitis patients almost all use moisturizers to prevent and treat their skin disease. However, the safety and efficacy of moisturizers are rarely studied in this patient population. Aims: To evaluate the efficacy and tolerability of urea-containing moisturizers in subjects with atopic dermatitis.

**METHODS:** One hundred subjects with atopic dermatitis were randomized to apply either a new 5% urea moisturizer or a commercially available 10% urea lotion twice a day for 42 days. Scoring Atopic Dermatitis severity index (SCORAD) was performed at Day 0 and Day 42. Cosmetic acceptability questionnaires, adverse events, and a 5-point tolerance evaluation were administered or performed at Day 42.

**RESULTS:** Both study products were very well tolerated by subjects and only three subjects discontinued their participation in the study due to adverse events. Mean SCORAD significantly decreased between Day 0 and Day 42 by 19.76% and 19.23%, respectively, for subjects treated with the new 5% urea moisturizer or the 10% urea lotion (P < 0.001). There was no difference between the two products in SCORAD reduction; however, significantly more subjects preferred using the new 5% urea moisturizer as compared with the 10% urea lotion.

**CONCLUSIONS:** Both the new 5% urea moisturizer and the 10% urea lotion improved atopic dermatitis and were very well tolerated. However, the cosmetic acceptability questionnaire showed that subjects preferred using the new 5% urea moisturizer over the 10% urea lotion. PMID: 20367668

An example of how you might prescribe follows:

### COMPOUNDED MEDICATION

**Vitamin B12 (0.1%) / Urea 10%**  
**Topical Cream**  
 60gm

Apply sparingly to affected area(s) BID

## HERPES LABIALIS

The following study finds that acyclovir cream is well tolerated and effective for the treatment of recurrent herpes labialis - "Successful treatment of herpes labialis with topical acyclovir" (Br Med J (Clin Res Ed). 1983 May 28;286(6379):1699-701).

**ABSTRACT:** "A double blind, placebo controlled trial of 5% acyclovir cream, applied topically five times a day for five days, was carried out in 49 patients with recurrent herpes labialis. These patients had a total of 74 episodes, 34 of which were treated with the 5% acyclovir cream and 40 with matching placebo. First episodes and all episodes treated with acyclovir cream had significantly shorter times to formation of ulcer or crust and to complete healing (p less than 0.05 for all variables). The duration of all symptoms and proportion of patients developing itching was also reduced by acyclovir cream in first episodes, though the difference was not significant. When the patient started treatment early in the course of a first episode acyclovir cream significantly reduced the percentage of lesions progressing beyond the papular stage (p less than 0.05). Acyclovir cream is well tolerated and effective for the treatment of recurrent herpes labialis." PMID: 6405939

This study found that combined therapy with acyclovir and chlorhexidine might be beneficial for the control of herpetic infections - "Combined synergistic antiherpetic effect of acyclovir and chlorhexidine in vitro" (Oral Surg Oral Med Oral Pathol. 1991 Feb;71(2):193-6).

**ABSTRACT:** "The combined effect of acyclovir and chlorhexidine on the replication and DNA synthesis of herpes simplex virus was studied. Acyclovir and chlorhexidine showed synergism in the inhibition of the viral replication by enhancing in part the reduction of viral DNA synthesis. These data indicate that combined therapy with acyclovir and chlorhexidine might be beneficial for the control of intraoral herpetic infections." PMID: 1848361

With our state of the art compounding lab we have the ability to combine acyclovir and chlorhexidine into one topical cream.

An example of how you might prescribe follows:

COMPOUNDED MEDICATION
<p><b>Acyclovir 5% / Chlorhexidine 0.2%</b></p> <p><b>Topical Cream</b></p> <p>5gm</p> <p>Apply up to 5x day</p>

Prescriber Name \_\_\_\_\_

Prescriber Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Date \_\_\_\_\_ Patient Name \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

Patient will pick up at pharmacy       Please ship to patient

Bill Insurance Plan: \_\_\_\_\_ ID# \_\_\_\_\_

*All topical compound %s are per 1 ml or 1 gm unless otherwise noted*

#### Psoriasis Vulgaris

[ ] Caffeine 10%

Topical Gel

Quantity 60gm

Directions: Apply sparingly up to three times per day

#### Atopic Dermatitis

[ ] Vitamin B12 (0.1%) / Urea 10%

Topical Cream

Quantity 60gm

Directions: Apply sparingly to affected area(s) BID

#### Herpes Labialis

[ ] Acyclovir 5% / Chlorhexidine 0.2%

Topical Cream

Quantity 5gm

Directions: Apply up to 5x day

#### Directions

\_\_\_\_\_  
\_\_\_\_\_

Prescriber's Signature \_\_\_\_\_ Refills: 1 2 3 4 5 6 7 8 9 10 11 12 NR

