

Dermatology Specialist formulary list

****Other indications for particular drugs may be included on completion of further specialist lists****

For information on use of unlicensed medicines or medicines used 'off-label' - [click here](#)

The following medicines are approved for prescribing by or on the recommendation of a Consultant Dermatologist or Dermatological Surgeon for the treatment of adults:

In the event of a broken link please forward details to carol.walkinshaw@nhs.scot

Please include the location and full title of the link

MEDICINE	SUMMARY OF RESTRICTED INDICATION	CATEGORY	PROTOCOL
Montelukast 10mg tablets	Chronic Urticaria (unlicensed use 'off-label') after ranitidine	 Amber	1. Guidelines for evaluation and management of urticaria in adults and children
Omalizumab 150mg solution for injection (Xolair®)	Add-on therapy for the treatment of chronic spontaneous urticaria in adult and adolescent (12 years and above) patients	 Amber	Local protocol: Omalizumab for chronic spontaneous urticaria
Lidocaine 4% cream (LMX 4®)	Reserved for patients with a latex allergy who require minor surgery (unlicensed use 'off-label')	 Red	
Pigmanorm® cream (hydroquinone, tretinoin, hydrocortisone) (unlicensed)	Melanin hyperpigmentation	 Red	Pigmanorm® SPC and Pigmanorm® PIL available on request from IDIS
Betamethasone dipropionate 0.064% with clotrimazole 1% (Lotriderm®)		 Amber	
Fludroxycortide Tape 4 microgram/cm ² (impregnated dressing 20cm x 7.5cm)	Steroid responsive skin conditions where occlusive therapy is considered beneficial for example: hypertrophic and keloid scars; dry cracks (skin fissures); and in pompholyx eczema.	 Amber	
Clobetasone butyrate, Nystatin, Oxytetracycline (Trimovate®) cream	Restricted to use for patients with complex skin conditions requiring secondary care referral and who may otherwise	 Amber	

	require systemic antibiotics		
Silver Sulfadiazine 1% cream (Flamazine®)	Under direction of Plastics/Dermatology/Vascular		
Tacrolimus ointment	Moderate to severe atopic eczema in patients who are not adequately responsive to or are intolerant of conventional therapies such as topical corticosteroids. Moderate to severe atopic eczema for the prevention of flares and the prolongation of flare-free intervals in patients experiencing a high frequency of disease exacerbations (i.e. occurring 4 or more times per year) who have had an initial response to a maximum of 6 weeks treatment of twice daily tacrolimus ointment (lesions cleared, almost cleared or mildly affected).		
Alitretinoin capsules	Severe chronic hand eczema unresponsive to treatment with potent topical corticosteroids		To be dispensed by a hospital pharmacy only. Monitoring is undertaken by the Dermatology Clinic.
8-Methoxypsoralen 10mg tablets (unlicensed)	Skin conditions requiring PUVA light therapy (e.g. whole body psoriasis)		2. BAD and BPG guidelines for PUVA therapy Photonet guidance on dose calculation for methoxypsoralen
5-Methoxypsoralen 20mg tablets (unlicensed)	Skin conditions requiring PUVA light therapy (e.g. whole body psoriasis), where nausea or gastrointestinal adverse effects with 8-Methoxypsoralen.		Photonet: Oral PUVA. Patient Information Leaflet – Oral PUVA Treatment. http://www.photonet.scot.nhs.uk/ 2. BAD and BPG guidelines for PUVA therapy Photonet guidance on dose calculation for methoxypsoralen
8-Methoxypsoralen 0.005% gel (unlicensed)	Skin conditions requiring PUVA light therapy (topical treatment for localised areas).		2. BAD and BPG guidelines for PUVA therapy
8-Methoxypsoralen 1.2% Bath Lotion (unlicensed)	Skin conditions requiring PUVA light therapy (topical treatment for localised areas)		
Acitretin capsules	Psoriasis – severe or refractory Severe congenital ichthyosis		3. Guidelines on the efficacy and use of acitretin in dermatology

	Severe Darier's disease (keratosis follicularis) Hidradenitis suppurativa (unlicensed use 'off-label') Severe hyperkeratotic eczema		
5-fluorouracil 1% in unguentum M cream (unlicensed) (available from NHS GG&C Western Infirmary, special-order manufacturer)	Darier's disease (keratosis follicularis)	 Red	
Dimethyl fumarate (Skilarence®)	Psoriasis – severe or refractory in patients not suitable or not responded to other systemic therapies	 Red	NHS Tayside Dermatology Department - Dimethyl fumarate (Skilarence) Monitoring sheet
Azathioprine tablets	Systemic lupus erythematosus Dermatomyositis and polymyositis Pemphigus vulgaris Autoimmune bullous disorders (unlicensed use 'off-label') Severe refractory eczema (unlicensed use 'off-label')	 Amber	SCA under development 4. Guidelines for the safe and effective prescribing of azathioprine BSR guideline for disease-modifying anti-rheumatic drug (DMARD) therapy in consultation with the British Association of Dermatologists 5. Guidelines for the management of bullous pemphigoid 6. Guidelines for the management of contact dermatitis 7. Guidelines for the management of pemphigus vulgaris
Chloroquine phosphate tablets (low dose)	Porphyria Cutanea Tarda (unlicensed use 'off-label')	 Amber	8. An overview of the cutaneous porphyrias RCOphth - Hydroxychloroquine and Chloroquine Retinopathy: Recommendations on Monitoring. Dec 2020
Ciclosporin capsules (Capimune®)	Short-term treatment of severe atopic dermatitis and severe psoriasis where conventional therapy ineffective or	 Amber	Ciclosporin Shared Care Agreement '(NHS Tayside Staffnet intranet link only)'

	inappropriate Autoimmune bullous disorders (unlicensed use 'off-label')		BSR guideline for disease-modifying anti-rheumatic drug (DMARD) therapy in consultation with the British Association of Dermatologists 6. Guidelines for the management of contact dermatitis 5. Guidelines for the management of bullous pemphigoid
Dapsone tablets	Dermatitis Herpetiformis and other dermatoses Autoimmune bullous disorders (unlicensed use 'off-label') Hidradenitis Suppurativa (unlicensed use 'off-label') Neutrophilic vasculitides (unlicensed use 'off-label') Other indications – see Shared Care Agreement		Dapsone Shared Care Agreement '(NHS Tayside Staffnet intranet link only)' 5. Guidelines for the management of bullous pemphigoid 11. Interventions for hidradenitis suppurativa: a Cochrane systematic review 12. Metformin for the treatment of hidradenitis suppurativa
Hydroxychloroquine sulphate tablets	Systemic and Discoid Lupus Erythematosus Dermatological conditions caused or aggravated by sunlight Other cutaneous lupus erythematosus (unlicensed use 'off-label') Skin manifestations of dermatomyositis (unlicensed use 'off-label') May be used in combination with mepacrine (unlicensed) for Discoid Lupus Erythematosus		SCA under development BSR guideline for disease-modifying antirheumatic drug (DMARD) therapy in consultation with the British Association of Dermatologists RCOphth - Hydroxychloroquine and Chloroquine Retinopathy: Recommendations on Monitoring, Dec 2020
Mepacrine hydrochloride (also known as quinacrine) 100mg tablets (unlicensed)	Discoid Lupus Erythematosus - 2nd line to hydroxychloroquine or in combination with hydroxychloroquine (typical dose 100mg daily)		10. Response to antimalarial agents in cutaneous lupus erythematosus
Lymecycline capsules	Pyoderma gangrenosum (unlicensed use 'off-label') Hidradenitis suppurativa (unlicensed use 'off-label') Severe atopic eczema (unlicensed use 'off-label') Autoimmune bullous disorders (unlicensed use 'off-label') in patients unable to tolerate doxycycline due to		5. Guidelines for the management of bullous pemphigoid 11. Interventions for hidradenitis suppurativa: a Cochrane systematic review 12. Metformin for the treatment of hidradenitis suppurativa

	photosensitivity		
Doxycycline capsules	Autoimmune bullous disorders (unlicensed use 'off-label')	 Amber	5. Guidelines for the management of bullous pemphigoid
Mycophenolate mofetil tablets	Autoimmune bullous disorders (unlicensed use 'off-label') Severe refractory eczema in those unresponsive to or intolerant of other immunosuppressants (unlicensed use 'off-label') Systemic lupus erythematosus (unlicensed use 'off-label') Dermatomyositis and polymyositis (unlicensed use 'off-label')	 Amber	BSR guideline for disease-modifying anti-rheumatic drug (DMARD) therapy in consultation with the British Association of Dermatologists 5. Guidelines for the management of bullous pemphigoid
Methotrexate (oral) - 2.5mg tablets ONCE WEEKLY	Psoriasis – severe or refractory Severe atopic eczema (unlicensed use 'off-label')	 Amber	Methotrexate Shared Care Agreement '(NHS Tayside Staffnet intranet link only)'
Methotrexate (subcutaneous) injection (Metoject®) ONCE WEEKLY	Psoriasis – severe or refractory Severe psoriatic arthritis Severe atopic eczema (unlicensed use 'off-label')	 Amber	BSR guideline for disease-modifying anti-rheumatic drug (DMARD) therapy in consultation with the British Association of Dermatologists
Apremilast (Otezla®) tablets	Moderate to severe chronic plaque psoriasis in adult patients who have failed to respond to or who have a contraindication to, or are intolerant to other systemic therapy including narrowband ultraviolet B, psoralen and ultraviolet-A (PUVA), acitretin, methotrexate and ciclosporin.	 Amber	Apremilast Protocol '(NHS Tayside Staffnet intranet link only)'
Baricitinib (Olumiant®) tablets	Moderate to severe atopic dermatitis according to criteria (see local protocol).	 Amber	Guidelines for the use of Biologic Medicines & JAK inhibitors for moderate to severe atopic dermatitis (Staffnet intranet link only).
Upadacitinib (Rinvoq®▼) modified-release tablets	Moderate to severe atopic dermatitis according to criteria (see local protocol).	 Amber	Guidelines for the use of Biologic Medicines & JAK inhibitors for moderate to severe atopic dermatitis (Staffnet intranet link only).
Abrocitinib (Cibinqo®▼) tablets	Moderate to severe atopic dermatitis according to criteria (see local protocol).	 Red	Guidelines for the use of Biologic Medicines & JAK inhibitors for moderate to severe atopic dermatitis (Staffnet intranet link only).

Dupilumab (Dupixent®) injection	Moderate to severe atopic dermatitis according to criteria (see local protocol).	 Red	Guidelines for the use of Biologic Medicines & JAK inhibitors for moderate to severe atopic dermatitis (Staffnet intranet link only).
Tralokinumab (Adtralza®▼) injection	Moderate to severe atopic dermatitis according to criteria (see local protocol).	 Red	Guidelines for the use of Biologic Medicines & JAK inhibitors for moderate to severe atopic dermatitis (Staffnet intranet link only).
Adalimumab (Yuflyma®▼) injection	Severe psoriasis according to criteria (see local guidelines). Active moderate to severe hidradenitis suppurativa (acne inversa) in adult patients with inadequate response to conventional hidradenitis suppurativa therapy	 Red	Guidelines on the Biological Treatment of Severe Psoriasis (NHS Tayside Staffnet intranet link only) Request to use biological therapy for severe hidradenitis suppurativa (NHS Tayside Staffnet intranet link only)
Guselkumab (Tremfya®▼) injection	Severe psoriasis according to criteria (see local guidelines).	 Red	Link to the Tayside Prescriber bulletin on biosimilars Brand name must be stated on prescriptions for biologic therapy including biosimilars e.g. Amgevita®▼ (adalimumab) or Inflectra® (infliximab)
Tildrakizumab (Ilumetri®▼) injection		 Red	
Ixekizumab (Taltz®) injection			
Bimekizumab (Bimzelx®▼) injection			
Risankizumab (Skyrizi®▼) injection			
Secukinumab (Cosentyx®) injection			

Certolizumab pegol (Cimzia®) injection			
Infliximab (Remsima®) intravenous infusion			
Infliximab (Remsima®) injection			
Minocycline tablets	Pyoderma gangrenosum (unlicensed use 'off-label') Hidradenitis suppurativa (unlicensed use 'off-label')		11. Interventions for hidradenitis suppurativa: a Cochrane systematic review 12. Metformin for the treatment of hidradenitis suppurativa
Trimethoprim tablets	Acne resistant to other antibacterials (unlicensed use 'off-label')		
Isotretinoin capsules	Severe forms of acne resistant to adequate courses of standard therapy with systemic antibacterials and topical therapy Rosacea (unlicensed use 'off-label') Hidradenitis suppurativa (unlicensed use 'off-label')		Monitoring is undertaken by the Dermatology Clinic. 11. Interventions for hidradenitis suppurativa: a Cochrane systematic review 12. Metformin for the treatment of hidradenitis suppurativa
Cantharidin 0.7% topical solution (Cantharone®)	The removal of common warts, molluscum contagiosum and periungual warts after primary care referral after insufficient response to standard formulary options in line with local pathway		Pathway for management of cutaneous wart treatment in secondary care
5% Fluorouracil cream (5-FU) in combination with Calcipotriol ointment (50microgram/g)	High-risk skin cancer patients (including immunosuppressed patients) with multiple actinic keratoses resistant to treatment with 5-FU cream or 5% imiquimod cream monotherapy, or for whom 5-FU or imiquimod monotherapy is no longer tolerable. Patients with extensive areas of pre-cancerous skin making it impractical to use monotherapy because the length of consecutive treatment courses moving from one		Local treatment protocol - Combination 5-FU cream & Calcipotriol ointment for Actinic Keratosis, Bowen's or squamous pre-cancerous field change

	treatment area to the next, and associated uncomfortable skin reactions, are just not tolerable.		
Methyl aminolevulinate 16% cream (Metvix®)	Skin conditions requiring photodynamic therapy including thin or non-hyperkeratotic and non-pigmented actinic keratoses on the face and scalp when other therapies are considered less appropriate, superficial and/or nodular basal cell carcinoma unsuitable for other available therapies, squamous cell carcinoma <i>in situ</i> (Bowen's disease) when surgical excision is considered less appropriate.	 Red	Dermatology Department Photodynamic Therapy Patient Information Leaflet (Staffnet intranet link only) 9. Guidelines for topical photodynamic therapy
5-Aminolevulinic Acid 7.8% gel (Ameluz®)	Treatment of actinic keratosis of mild to moderate intensity on the face and scalp (Olsen grade 1 - 2). Treatment of superficial and/or nodular basal cell carcinoma unsuitable for surgical treatment.	 Red	Photodynamic Therapy Patient Information Leaflet (Staffnet intranet link only) 9. Guidelines for topical photodynamic therapy
Chlormethine hydrochloride 160micrograms/g gel (Ledaga®)	Topical treatment of mycosis fungoides-type cutaneous T-cell lymphoma (MF-type CTCL) in adult patients	 Red	
Glycopyrronium bromide (Glycopyrrolate) 2% in cetomacrogol cream (unlicensed)	Hyperhidrosis - in patients who fail to respond to aluminium antiperspirants, tap water and glycopyrrolate solution iontophoresis (or where iontophoresis is not suitable).	 Amber	Department of Dermatology Hyperhidrosis Pathway (NHS Tayside Staffnet intranet link only)
Glycopyrronium bromide (Glycopyrrolate) 2% in aqueous solution (unlicensed)	Hyperhidrosis – for patients who fail to respond to aluminium antiperspirants, tap water/glycopyrrolate solution iontophoresis and glycopyrrolate cream or where these are not suitable.	 Amber	
Glycopyrronium bromide (Glycopyrrolate) 0.05% solution (unlicensed)	Hyperhidrosis (iontophoresis solution) – where patients have not responded to tap water iontophoresis.	 Amber	
Oxybutynin tablets	Hyperhidrosis (generalised) (unlicensed use 'off-label') – adjunct to topical treatments.	 Amber	
Propiverine hydrochloride tablets		 Amber	
Propranolol tablets, oral solution, MR	Hyperhidrosis (generalised) (unlicensed use 'off-label') –	 Amber	

capsules	where anxiety a precipitating factor.		
Fluoxetine capsules	Hyperhidrosis (generalised) (unlicensed use 'off-label') - where associated with or is likely to be exacerbated by anxiety or social phobia.	 Amber	Department of Dermatology Hyperhidrosis Pathway (NHS Tayside Staffnet intranet link only)
Botulinum Toxin Type A (Dysport®)	Severe hyperhidrosis of the axillae which does not respond to topical treatment with antiperspirants or antihidrotics. Palmar hyperhidrosis (unlicensed use 'off-label').	 Red	
Pentoxifylline 400mg tablets	Chronic venous leg ulceration that has not responded to compression bandaging or those unsuitable for compression bandaging (unlicensed use 'off-label')	 Amber	
Triamcinolone acetonide 10mg/mL Intradermal injection (Adcortyl®)	Keloids and hypertrophic scars	 Red	
Fluorouracil 50mg/mL (5-FU) intralesional injection (unlicensed route of administration)	Keloids and hypertrophic scars which have not responded to intradermal steroids (unlicensed use 'off-label').	 Red	Dose: up to 100mg (2mL), once weekly by intralesional injection for a maximum of 12 weeks (usual course 7 weeks). Intralesional 5-Fluorouracil as a treatment modality of keloids Intralesional 5-Fluorouracil in the treatment of keloids

Traffic light status information	
 Red	To be prescribed by Hospital Specialists Only.
 Amber	Can be prescribed in General Practice under the direction of a Specialist.

For further information refer to the [Department of Dermatology website](#), the [British Association of Dermatologists \(BAD\) website](#) and the [NHS Scotland Dermatology Referral and Management Pathways website](#).

[Click here](#) for a link to the British Association of Dermatologists (BAD) Patient Information Leaflets (PILs).

[Click here](#) for a link to the BAD 'Specials' list of preferred unlicensed dermatological preparations

References:

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3. [Omerod AD, Campalani E, Goodfield MJ. British Association of Dermatologists guidelines on the efficacy and use of acitretin in dermatology. Br J Dermatol 2010; 162\(5\); 952-963](#)
4. [Meggitt SJ, Anstey AV, Mohd Mustapa MF, Reynolds NJ, Wakelin S. British Association of Dermatologists' guidelines for the safe and effective prescribing of azathioprine. Br J Dermatol. 2011;165\(4\):711-734.](#)
5. [Venning VA, Taghipour K, Mohd Mustapa MF, Highet AS, Kirtschig G. British Association of Dermatologists' guidelines for the management of bullous pemphigoid 2012. Br J Dermatol 2012; 167: 1200-1214.](#)
6. [Johnston GA, Exton LS, Mohd Mustapa MF, Slack J A, Coulson IH, English JSC, Bourke JF. Br J Dermatol 2017; 176: 317-329.](#)
7. [Harman KE, Albert S; Black MM. Guidelines for the management of pemphigus vulgaris. Br J Dermatol 2003;149\(5\):926-37](#)
8. [Dawe, R. An overview of the cutaneous porphyrias. F1000Research 2017; 6\(F1000 Faculty Rev\):1906](#)
9. [Morton CA, McKenna KE, Rhodes LE. Guidelines for topical photodynamic therapy: update. Br J Dermatol 2008;159\(6\); 1245-1266](#)
10. [Chang, AY et al. Response to Antimalarial Agents in Cutaneous Lupus Erythematosus. Arch Dermatol 2011; 147\(11\): 1261-1267](#)
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12. [Verdolini, R. et al. Metformin for the treatment of hidradenitis suppurativa: a little help along the way. Journal of the European Academy of Dermatology and Venereology 2013; 27: 1101-1108](#)

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