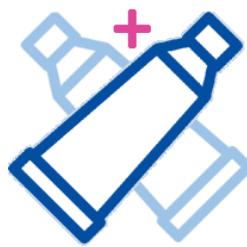


Topical Antifungals

Information for clinicians



Tips on antifungal use for skin infections



Do not chart antifungals on a 'PRN' medication chart, this encourages sporadic use which may be harmful and ineffective. Always prescribe the defined duration to complete treatment.



Apply creams well so it is no longer visible, but avoid vigorous rubbing



Combination topical corticosteroid and antifungal preparations such as Hydrozole® or Resolve Plus® may be used for inflamed (painful) fungal skin infections. Only use combination products until the inflammation subsides, and then switch to a topical antifungal alone to complete the treatment to avoid complications of prolonged corticosteroid use such as thinning of skin.



For incontinence associated dermatitis that has been complicated by candida infection,

- Apply the topical antifungal first, followed by a barrier cream *at least* 30 minutes later.
- Use barrier products that are transparent and easily removed to allow for skin inspection such as petrolatum containing products.
- Clean the affected area with soap-free pH adjusted cleansers, 'no-rinse' wipes or '3-in-1' wipes after each episode of incontinence
- Apply a topical leave-on skin moisturiser if the skin is dry to support restoration of the skin barrier function
- Avoid using powders
- Use continence aids that are well fitted

If not improving after 14 days, a clinical review and consideration for alternative diagnoses is required. For more information refer to the Therapeutic Guidelines.