Handbook of Systemic Drug Treatment in Dermatology.

SH Wakelin.
Third impression 2011


There has been an increase in publishing books on the topic of drug therapy. This handbook reflects advances in drug development but also reduced access to dermatology in patient care. Potent drugs with serious or life-threatening adverse effects are frequently prescribed by dermatologists. This book is an accessible and concise aid which can be consulted in the clinic with regard to prescribing and monitoring of systemic dermatologic therapy. Evidence-based data have been included where possible. Common and important adverse drug effects are described. The following issues have been tackled by the 46 handbook contributors: Acitretin; Acne antibiotics; Androgens and Antiandrogens; Antifungals; Antihistamines; Antimalarials; Azathioprine; Cyclosporin; Clofazimine; Colchicine; Corticosteroids; Cyclophosphamide; Dapsone; Hydroxyurea; Fumaric acid esters; Interferons; Intravenous Immunoglobulin; Isotretinoin; Methotrexate; Mycophenolate mofetil; Nicotinamide; Psoralens; Sulphapyridine and Sulphamethoxypyridazine; Thalidomide; Treatment in pregnancy and lactation; Treatment in childhood; Treatment in patients with kidney disease; and Treatment in patients with liver disease.

For each of the systemic drugs, the following aspects are described: Classification and mode of action; Indications and dermatological uses; Presentation; Dosages and suggested regimens; Monitoring; Contraindications; Cautions; Main drug interactions; Adverse effects and their management; Patient information; Use in pregnancy and preconception; Use in lactation; Use in childhood; Use in renal impairment; and Use in liver disease. Update references follow description of each drug.

At the end of the book, treatment in pregnancy and lactation is described in detail (Principles of treatment in pre-embryonic phase, in embryonic phase and fetal phase; Pregnancy testing; Categorization of drugs in pregnancy; Categorization of lactation risk with table of safe profile; and Comments on dermatological drugs that may be used during lactation (chlorpheniramine, erythromycin (except for estolate), amoxicillin).

Treatment in childhood is carefully described by the principles of treatment, use of unlicensed medicines, formulation and administration of drugs, special points on specific drugs, and risk categories. There is a list of drugs that are considered safe in dermatologic conditions in children: chlorpheniramine, hydroxyzine, promethazine, cetirizine, desloratadine, zoratadine, terfenadine, cimetidine, erythromycin, tetracycline (≤8 years), trimethoprim, griseofulvin, fluconazole, ketoconazole, and immunoglobulins. There is a section dedicated to treatment in patients...
with renal disease (Principles of treatment, Alterations in pharmacokinetics in renal failure, Assessment of renal function, Prescribing in renal impairment, Special points on specific drugs). Of great value are guidelines for modification of drug doses in renal impairment for 24 systemic drugs. In addition, there is a section on the treatment in patients with liver disease (Principles of treatment, Factors to be considered in prescribing alternations, Special points on specific drugs for 16 drugs).

At the end of the book there is an index of systemic drug treatment in dermatology.

In conclusion, this handbook is recommended as advancement in systemic drug management in dermatology as an accessible guide that provides practical information to dermatologists, general practitioners, pharmacists and others, to ensure safe and effective care of dermatology patients on systemic drug treatment.

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