

Patient information

Use of clobetasol proprionate 0.05% cream or ointment

Clobetasol proprionate 0.05%

Clobetasol cream and ointment both contain the active ingredient clobetasol, which is a steroid medicine used to treat skin conditions including vulval lichen sclerosus and lichen planus.

They are safe and highly effective, but often women will have anxiety about using steroids and be fearful of side effects. This often causes them to use less than they should be, causing the symptoms to trouble them for longer.

We hope this leaflet will help clear up some of the common concerns and questions women ask about steroid cream.

How to apply the cream

You should apply your clobetasol cream/ointment sparingly (this means half to one finger tip) to the affected area(s). These are the areas where you notice itching/discomfort or changes in the skin.



- once daily for one month
- then on alternate days for one month

- then gradually reduce this until you can use it occasionally or not at all

One 30g tube of clobetasol ointment should last at least three months. This amount should not cause you to have adverse effects on the treated skin or elsewhere in the body.

If symptoms return after the four-month course, you can use the clobetasol ointment every night for two weeks to treat the flare-up and then try to reduce the frequency, as above.

If symptoms keep coming back quickly when you stop using the cream, you may prefer to use the cream regularly once or twice a week long-term. Long-term use is safe as long as one 30g tube lasts at least three months. More than this may cause skin thinning.

It is normal to notice stinging for a few minutes after applying the cream. However, if you notice stinging in the area for more than 1 – 2 hours after applying the cream, you may have become sensitive to one of the ingredients. There are several alternative creams and you should contact your clinic for advice.

If your symptoms have gone, don't stop using the steroid cream. Your condition may flare up again and the itching and soreness could come back. You should continue to use the cream twice a week even when you have no symptoms.

If you have been prescribed a barrier cream (such as Epaderm or Hydromol) to protect your skin, you should apply the steroid ointment at least 30 minutes before you apply the barrier cream so that the active ingredient can be absorbed into your skin and isn't diluted.

If you have any further queries or questions please contact:

Gynaecology Nurses: 01284 713154

There is an answer phone available if you wish to leave a message.

Reference:

*Royal College of Obstetricians & Gynaecologist The Management of Vulval Skin Conditions
Green-top Guideline No. 58 (February 2011)*

Support groups for women with vulval disorders:

British Association of Dermatologists

<https://www.bad.org.uk/for-the-public/patient-support-groups/lichen-sclerosus-group-worldwide>

<https://www.lichensclerosus.org>

<https://patient.info//forums/discuss/browse/lichen-sclerosus-1341>

<https://www.skincareaction.org.uk/conditions-details/lichen-sclerosus-females>

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<https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>



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