

Department of Dermatology

Aldara™

Information for patients

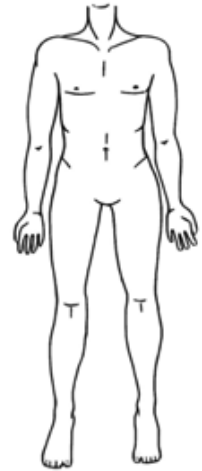
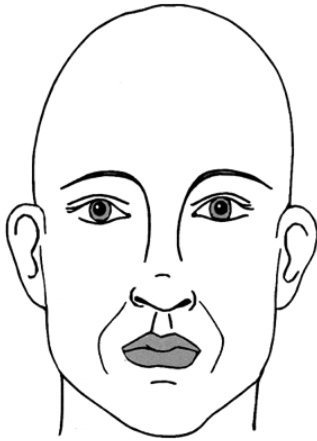


You have been prescribed a cream called Aldara.

This leaflet has been written to give you information about what the cream is used for, how to use it and what side effects you may expect.

What is Aldara cream?

Aldara is a skin cream containing the chemical imiquimod (5%). This chemical is proven to be active against early forms of skin cancer and premalignant disease, such as superficial basal cell carcinoma, actinic (solar) keratoses, Bowen's disease, Paget disease of the vulva and vulval intraepithelial neoplasia (VIN).



How should I apply the cream?

How often you use the cream will depend on the condition that is being treated (your doctor will tick below):

- Basal cell carcinoma (superficial types) are treated five nights a week (i.e. weekdays) for 6 weeks.
- Actinic keratoses are treated three nights a week (e.g. Monday, Wednesday, Friday) for 4 weeks, with a repeated treatment after one month if necessary.
- Pagets or VIN are treated two nights per week, increasing to 3-4 nights a week if there are no problems after 16 weeks.
- Other

The cream should be applied before you go to bed, with a clean fingertip. Apply a thin film of Aldara cream to the affected area and rub in the cream until it vanishes (this helps to prevent contamination of skin near the treatment site). Wash your hands after application. Avoid contact with other skin.

About 8 hours after applying Aldara cream, carefully wash the treated skin with mild soap and water, to remove remaining traces of Aldara cream. Avoid further spreading of the cream by washing flannels after each use, or use disposable tissues or cotton wool.

If you are using in cream on your genital area, apply a moisturiser twice daily to soothe your treated skin. We recommend Hydromol ointment, Cetraben cream or Doublebase. Avoid using soaps and shower gels on or near your genitals during the treatment period, as they may irritate your skin. You can use your moisturiser as a soap substitute instead.

Flamazine cream applied daily can help with soreness – this can be prescribed by your GP. If your skin is very sore, you can apply a steroid cream such as Lotriderm or Trimovate each day.

What are the side effects of Aldara cream?

Aldara takes time to be effective. The skin reaction tends to be worst in the third week of application. Your skin is likely to become red, swollen and sore at the site of application within 5 days of starting treatment. Your skin may peel, crack, blister and then scab. You may also experience itching, burning or stinging. If you develop weepy skin or an open wound, there is a risk that this may become infected. If you are concerned that your wound is infected please ask your GP or Practice Nurse to check it, or call us on the number at the back of this leaflet.

Inflammation is a good sign, as it shows the cream is working. Generally the more intense the inflammation the better the end result. The surrounding skin may also become inflamed, but this will settle when you stop using the cream. Skin redness may take up to 4 weeks to subside (after stopping treatment).

If your skin becomes too uncomfortable, take a rest week off treatment until the effects have become better, then restart treatment. If your skin becomes too sore, it may be best to use the cream every other week. You can do this without speaking to your doctor.

Rarely ulceration (an open skin wound) may occur. The risk of this is highest on the legs. If the inflammation or ulceration is severe, it can cause a change to your skin pigment, making it lighter or darker.

Allergic reactions to Aldara are rare. If you have a severe reaction, there is a small risk of scarring or hair loss. Rarely, Aldara can cause a flare up of a pre-existing autoimmune disease.

You may develop flu-like symptoms, such as fever (high temperature), swollen lymph nodes, aches and generally feeling unwell. You may need additional rest if these symptoms develop and paracetamol can be helpful.

Other resources:

www.drugs.com/pro/aldara.html

www.question.com/drugs/aldara.html

www.medicines.org.uk/emc/PIL.3902.latest.pdf

www.macmillan.org.uk/information-and-support/skin-cancer/treating/supportive-and-other-treatments/other-treatments/topical-immunotherapy-skin-cancer.html

If you are unsure about your treatment or the effects, please telephone us:

General Dermatology Outpatients

Tel: **01865 228 241**

(9.00am to 5.00pm, Monday to Friday)

Gynae-oncology clinic

Tel: **01865 235 662**

(9.00am to 4.00pm, Monday to Friday)

Dermatology vulval enquiries

Tel: **01865 228 266**

(9.00am to 4.00pm, Monday to Friday)

If you have a specific requirement, need an interpreter,
a document in Easy Read, another language, large print,
Braille or audio version, please call **01865 221 473**
or email **PALS@ouh.nhs.uk**

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