Skin Pharmacology

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Dermatologic Pharmacology

Variables affecting Pharmacologic Response:

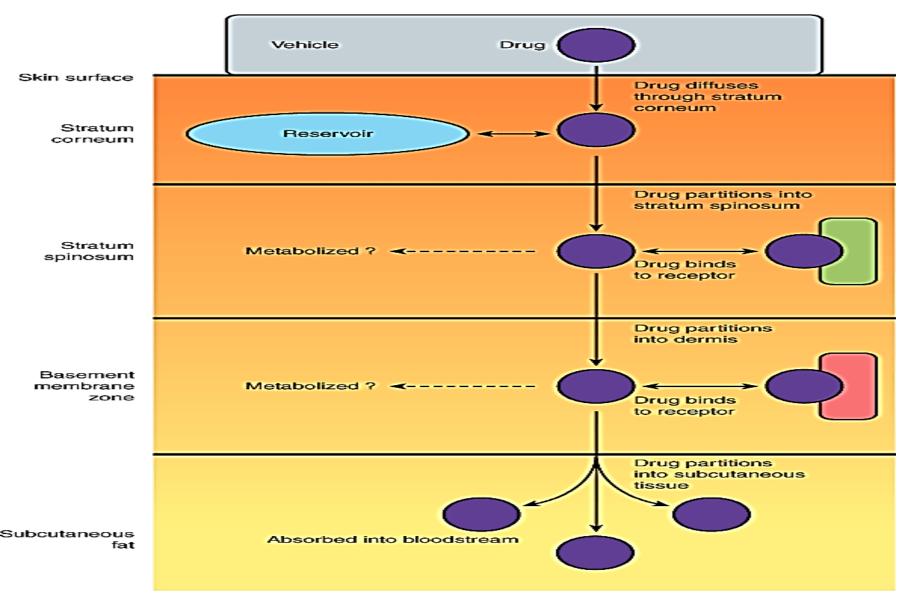
Regional variation in drug penetration.

Concentration gradient.

Dosing schedule.

Vehicles and occlusion.

Percutaneous Absorption.



Source: Katzung BG, Masters SB, Trevor AJ: *Basic & Clinical Pharmacology,* 11th Edition: http://www.accessmedicine.com Copyright @ The McGraw-Hill Companies, Inc. All rights reserved.

Dermatologic Formulations

- Tinctures.
- Wet dressings.
- Lotions.
- Gels.
- Powders.
- Pastes.
- Creams.
- Ointments.

Adverse Effects of Dermatologic Preparations

- Burning or stinging sensation.
- Drying and irritation
- Pruritus.
- Erythema.
- Sensitization.
- Staining
- Superficial erosion.

TABLE 61-1 Local cutaneous reactions to topical medications.

Reaction type	Mechanism	Comment
Irritation	Non-allergic	Most common local reaction
Photoirritation	Non-allergic	Phototoxicity; usually requires UVA exposure
Allergic contact dermatitis	Allergic	Type IV delayed hypersensitivity
Photoallergic contact dermatitis	Allergic	Type IV delayed hypersensitivity; usually requires UVA exposure
Immunologic contact urticaria	Allergic	IgE-mediated type I immediate hypersensitivity; may result in anaphylaxis
Non-immunologic contact urticaria	Non-allergic	Most common contact urticaria; occurs without prior sensitization

Topical Antibacterial Agents

- Gram-positive bacteria
 - Bacitracin
 - Gramicidin







- **Gram-negative** bacteria
 - Polymyxin B Sulfate
 - Neomycin
 - <mark>Gen</mark>atamicin







BACITRACIN

Folls More Types
Of Bacteria:
O

Active against streptococci, pneumococci, and staphylococci

 Also, most anaerobic cocci, neisseriae, tetanus bacilli, and diphtheria bacilli are sensitive.

MOA???

Side effects: Toxicity ???

Allergic contact dermatitis occurs frequently, and immunologic allergic contact urticaria rarely. Bacitracin is poorly absorbed through the skin, so systemic toxicity is rare.

NEOSPOR



- Frequently used in combination with other agents (polymyxin B and neomycin)
- Form: creams, ointments, and aerosol preparations
- Usually Antiinflammatory agents added
 - (Hydrocortisone)

GRAMICIDIN

- Only for topical use, in combination with other antibiotics such as neomycin, polymyxin, bacitracin, and nystatin
- MOA??

Hemolysis

POLYMYXIN B SULFATE

Kb + 2E(Entero + Escher..)

- gram-negative: Pseudomonas aeruginosa, Escherichia coli, enterobacter, and klebsiella.
- Proteus and serratia are resistant, as are all grampositive organisms.

• امزر عروك مرة وامزر صريقك الف مرة (بروتوس وسارة)

- ، يعني PROTEUS & SERRATIA عندهم مقاومة لهذا الدواء وبدايتهم نفس أول حرف من كل مقطع باسم الدواء (المقاومة من نفس أحرف الدواء)
- Side effects: total daily dose applied to denuded skin or open wounds should not exceed 200 mg in order to reduce the likelihood of toxicity "neurotoxicity and nephrotoxicity"
 - Allergic contact dermatitis NOT common.

NEOMYCIN & GENTAMICIN

Neomycin

- Aminoglycoside antibiotics
- gram-negative : E coli, proteus, klebsiella, and enterobacter.
- SE: allergic contact dermatitis
- Gentamicin generally shows greater activity against Paeruginosa than neomycin.
- Gentamicin more active against staphylococci and group A
- β-hemolytic streptococci.
- Be careful with systemic toxicity : esp in renal failure
- Hospital acquired resistant





Topical Antibacterials in Acne

- Clindamycin.
- Erythromycin.
- Metronidazole: rosacea
- Sodium sulfacetamide.
- Dapsone

Clindamycin

- 10% absorbed, so, possibility of *Pseudomembranous colitis*
- The hydroalcoholic vehicle and foam formulation (Evoclin)
 may cause drying and irritation of the skin, with
 complaints of burning and stinging.
- The water-based gel and lotion formulations.... well tolerated and less likely to cause irritation. Allergic contact dermatitis is uncommon.
- Clindamycin is also available in fixed-combination topical gels with benzoyl peroxide (Acanya, BenzaClin, Duac), and with tretinoin (Ziana).

Metronidazole

- Effective in the treatment of rosacea.
- The mechanism of action is unknown, but it may relate to the inhibitory effects of metronidazole on *Demodex brevis*;
 This drug may act as an anti-inflammatory agent by direct effect on neutrophil cellular function
- Adverse local effects include dryness, burning, and stinging.
- Less drying formulations may be better tolerated (MetroCream, MetroLotion, and Noritate cream).
- Caution should be exercised when applying metronidazole near the eyes to avoid excessive tearing.

Erythromycin

- In topical preparations, erythromycin base rather than a salt is used to facilitate penetration
- One of the possible complications of topical therapy is the development of antibiotic-resistant strains of organisms, including staphylococci
- Adverse local reactions to erythromycin solution may include a burning sensation at the time of application and drying and irritation of the skin
- Erythromycin is also available in a fixed combination preparation with benzoyl peroxide (Benzamycin) for topical treatment of acne vulgaris.

Topical Antifungal Agents

Azole Derivatives:

- Clotrimazole
- Econazole.
- Ketoconazole.
- Miconazole.
- Oxiconazole.
- Sulconazole.
 - Activity against dermatophytes (epidermophyton, microsporum, and trichophton) and yeasts, including Candida albicans and Pityrosporum orbiculare.

Topical Antifungal Agents

- Ciclopirox <mark>Olamine</mark>. أغنية دق الماني
- Naftifine and Terbinafine. نفط في التراب
- Tolnaftate. طولّنا فتفوتة



مرة ثنين طلعو رحلة في البكم ومشغلين أغنية دق الماني ، ووقفوا شوي عالطريق عشان يشربو مي (Ampho)ولقوا نفط بالتراب فطولوا لما روحوا . نعتبر أنه جو الرحلة استوائي TROPICAL اذن هذه الادوية







Topical Antifungal Agents

الماءيُعتبر أمفوتيري وبالتالي احتمالية أنه يكون حمض أو





قاعدة 50% (نص = NYS)

- Nystatin and Amphotericin B:
 - Only for Candida albicans.
 - Available as topical preparations, oral suspension, or vaginal tablets





Oral Anti<mark>fungal</mark> Agents

Azole Derivatives:

- Fluconazole.
- Itraconazole.
- Ketoconazole.
 - Affect the permeability of fungal cell membrane through alteration of sterol synthesis.
 - Effective in systemic mycosis, mucocutaneous candidiasis, and other cutaneous infections.
 - Might have systemic side effects: hepatitis and liver enzyme elevations, and interactions.

Oral Antifungal Agents

- Azole Derivatives.
- Griseofulvin:
 - Effective against epidermophyton, microsporum, and trichophton.
 - Requires prolonged treatment:
 - 4-6 weeks for the scalp.
 - 6 months for fingernails.
 - 8-18 months for toenails.
 - Has many side effects.

الغَرس (نبات) في التراب ونأكل الثمار <mark>بالفم</mark> إذن ORAL

Terbinafine:

- Recommended for *onchomycosis*.
 - 6 weeks for fingernails.
 - 12 weeks for toenails.

NYSTATIN & AMPHOTERICIN B

- Topical therapy of C albicans infections but ineffective against dermatophytes.
- Cutanuoes and mucosal candida infections

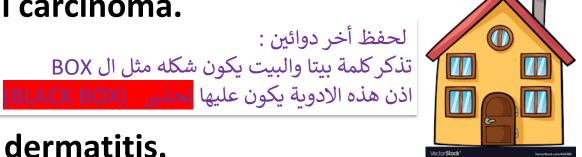
- Amphotericin B: broader antifungal intravenously in the treatment of many systemic mycoses and to a lesser extent in the treatment of cutaneous candida infections.
- Toxicity with systemic administration

Topical Antiviral Agents

- Acyclovir.
- Valacyclovir.
- Penciclovir.
- Famciclovir.
 - Synthetic **guanine** analogs with inhibitory activity against herpes viruses.
 - Ointments and creams are useful for recurrent orolabial herpes simplex infection

Immunomodulators

- Imiquimod:للحفظ نفس بداية العنوان
- Stimulates peripheral mononuclear cells to release interferon- ά and to stimulate macrophages to produce interleukins-1,-6, and -8 and tumor necrosis factor-ά.
- Uses:
 - For external genital and perianal warts.
 - Actinic keratosis on the face and scalp.
 - Primary basal cell carcinoma.
- Tacrolimus.
- Pimecrolimus.
 - Useful for atopic dermatitis.
 - Inhibit T-lymphocyte activation and prevent release of inflammatory cytokines and mast cell mediators
 - (Black box warning)



Ectoparasiticides

Permethrin:

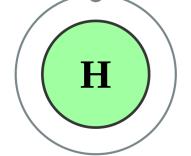
- Toxic to Pediculus humanus, Pthirus pubis, and Sarcoptes scabiei
- Pediculosis:cream applied for 10 minutes and then rinsed off with warm water.
- Scabies: cream applied for the whole body for 8-14 hours.
- Lindane(Hexachlorocyclohexane):
 - 10% absorbed and concentrated in fatty tissues.
 - Can cause neurotoxicity and hematoxicity
- Crotamiton.
- Sulfur.
- Malathion.

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ليندا مريضة مصابة بأحد الطفيليات اذن هذه الادوية ل Malathion ما لازم Malathion
تسافر ( تقريبا نفس لفظ SULFUR = سفر )
وما أخذت كرت جمعها كروت ( CROT )
إذن(PERMETION) بالسفر ( الفيزا )
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Agents affecting Pigmentation

Hydroquinone.

تحتوي ذرة الهيدروجين (HYDRO) على بروتون <mark>واحد</mark> (MONO)



- Monobenzone.
- Monobenzone may be toxic to melanocytes resulting in permanent depigmentation.
- Mequinol
 - Reduce hyperpigmentation of skin by inhibiting the enzyme tyrosinase which will interfere with biosynthesis of melanin.

Agents affecting Pigmentation

- Trioxsalen.
- Methoxsalen.

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المريض اللي بيكون عنده نقص بالصبغة بيكون <mark>زعلان (SALEN)</mark>
اذن هذه الادوية تنتهي بهذا المقطع
فنعطيه <mark>ميثا</mark>ن (<mark>Meth</mark>) <mark>ثلاثي</mark> (<mark>Tri</mark>) عشان نرجع الصبغة
اذن الميثان الثلاثي يرجع الصبغة (REPEGMENTATIOM)
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- Are psoralens used for the repigmentation of depigmented macules of vitiligo.
- Must be photoactivated by long-wave-length ultraviolet light (320-400nm) to produce a beneficial effect.
- They intercalate with DNA.
- Can cause cataract and skin cancer.

Sunscreens and Sunshades

قعدة بالربيع <mark>تحت الشمس</mark> فيها بابا (PAPA<mark>)</mark> واخواته (SISTERS=ESTERS) لما تقعد تحت <mark>المظلة</mark> (مصنوعة من معدن التيتانيوم) ما رح تتعرض لأشعة الشمس

- Sunscreens absorb UV light.
 - Examples are para amino benzoic acid (PABA) and its esters.
- Sunshades are opaque materials that reflect light, like titanium dioxide.
- Useful in polymorphous light eruption, lupus erythematosus, and drug –induced photosensitivity.