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Disclosure

www.google.com

www.bad.org.uk

www.pcads.org.uk/

Topical treatment

Fingertip unit:

Adult male: one fingertip unit provides 0.5 g

Adult female: one fingertip unit provides 0.4 g

Children of four years approximately $\frac{1}{3}$ of adult amount

Infants six months to one year approximately $\frac{1}{4}$ of adult amount

Amount of cream used / body part:

One hand: apply 1 fingertip unit

One foot: apply 2 fingertip units

Face & neck: apply 2.5 fingertip units

One arm: apply 3 fingertip units

One leg: apply 6 fingertip units

Trunk, front & back: 14 fingertip units

Entire body: 40 units (5g for a baby)

Acne

Mild Comedones Try topical gel e.g. retinoids(Isotrex) & Adapalene avoided in pregnancy



Benzoyl Peroxide, Azelaic acid,
+/- dianette

Mild –Moderate inflamed papules/pustules

Try long course of antibiotics 3m & assess

Doxycycline 100mg od (CI: child 12y, Pregnancy)

Lymecycline 408mg od,

Erythromycin 500mg bd,

Trimethoprem 300mg bd

Minocycline 100mg od (DRESS Syndrome)

If failed 2 or more Ab course ref for Isotretinoin 0.5-1mg/kg



Eczema

Emollients at least bd (ointment better than cream) e.g. Hydromol, Epaderm, 50/50 LP/WSP, Comfi Fast wrap suits

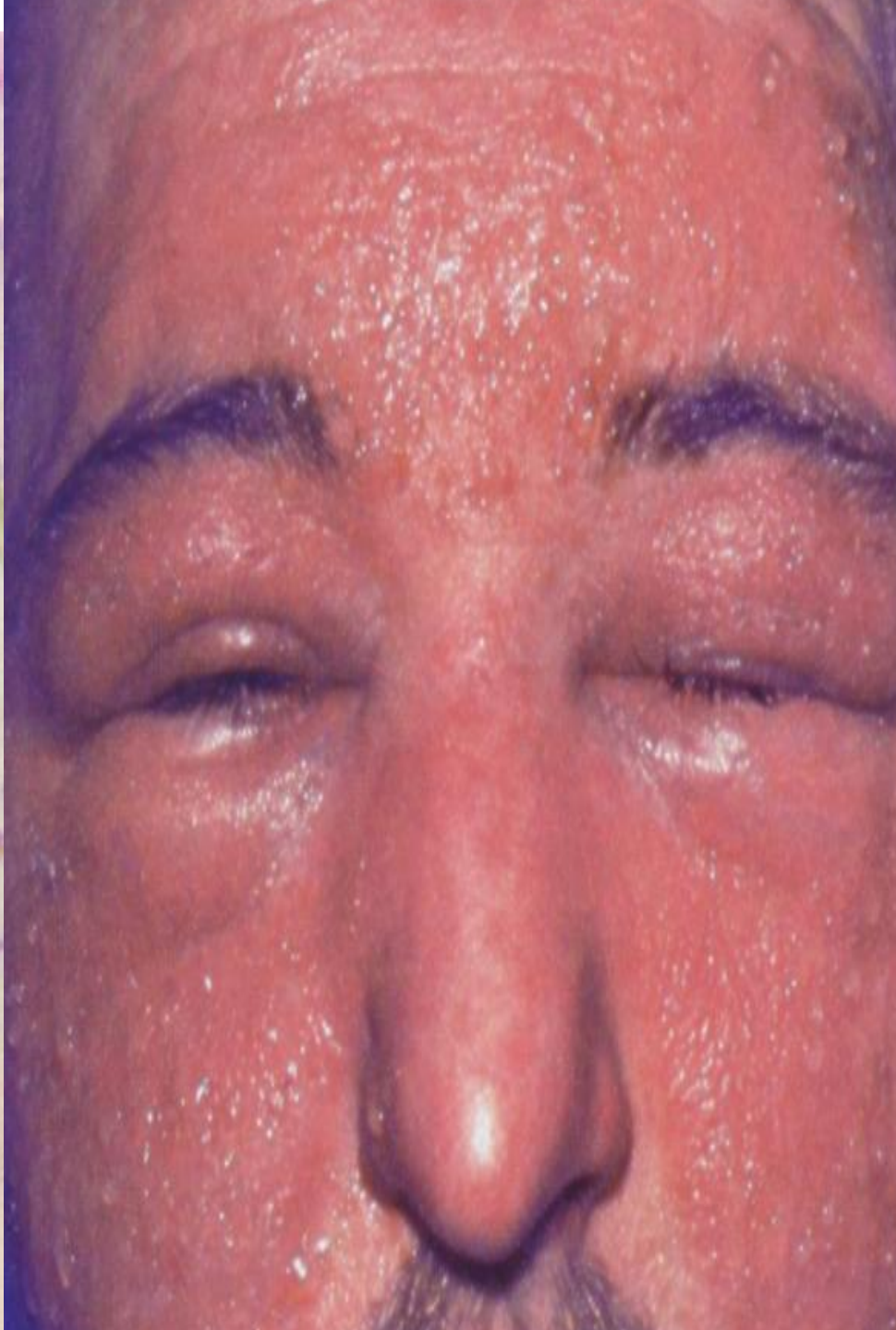
Bath od with Dermol cream or Oilatum bath oil

Topical steroids: weak face HC 1% od /PRN
 Potent Betnovate or very potent Dermovate
 od 3-5 days then moderate steroid Eumovate
 od 2weeks & review

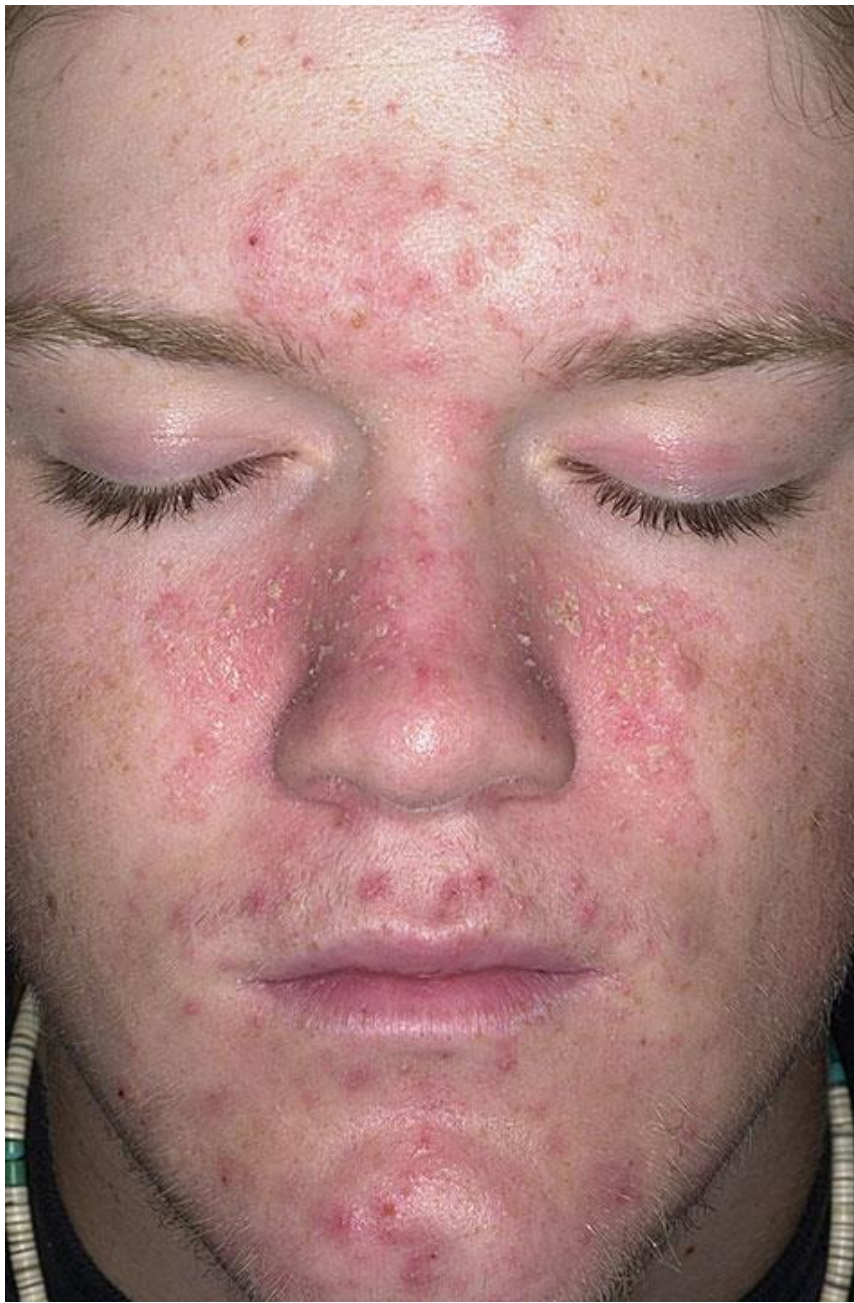
After improvement start Protopic 0.03% or 0.1% bd (pm/nocte & after 2years) face, eyelids, skin folds. Maintenance twice weekly

Watch for infection (Impetigo, HSV), food allergy, neglect, comorbidity

DD:











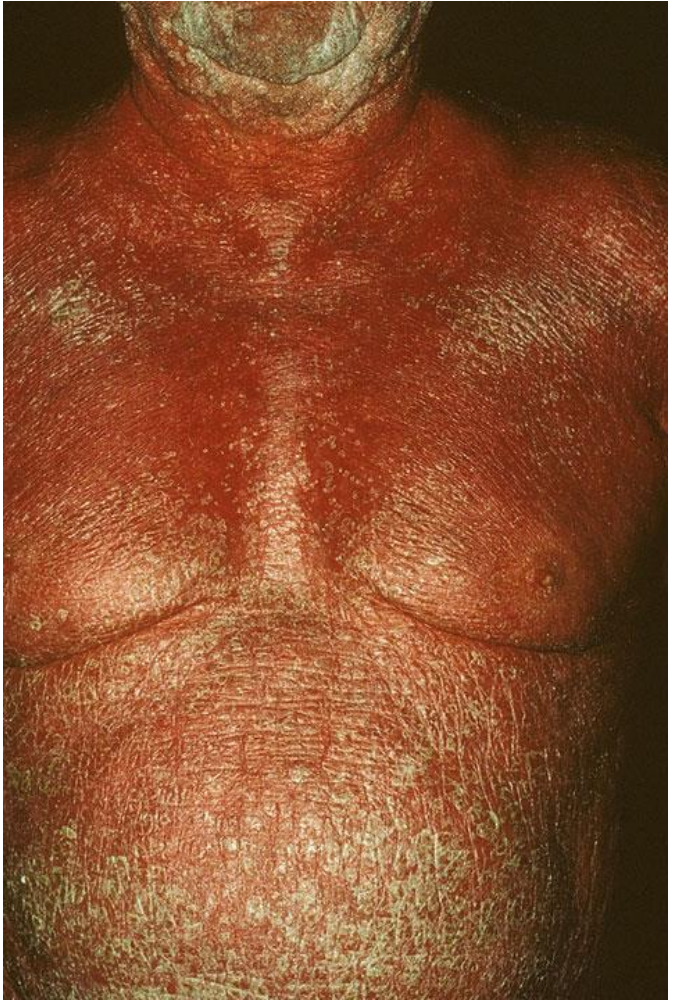




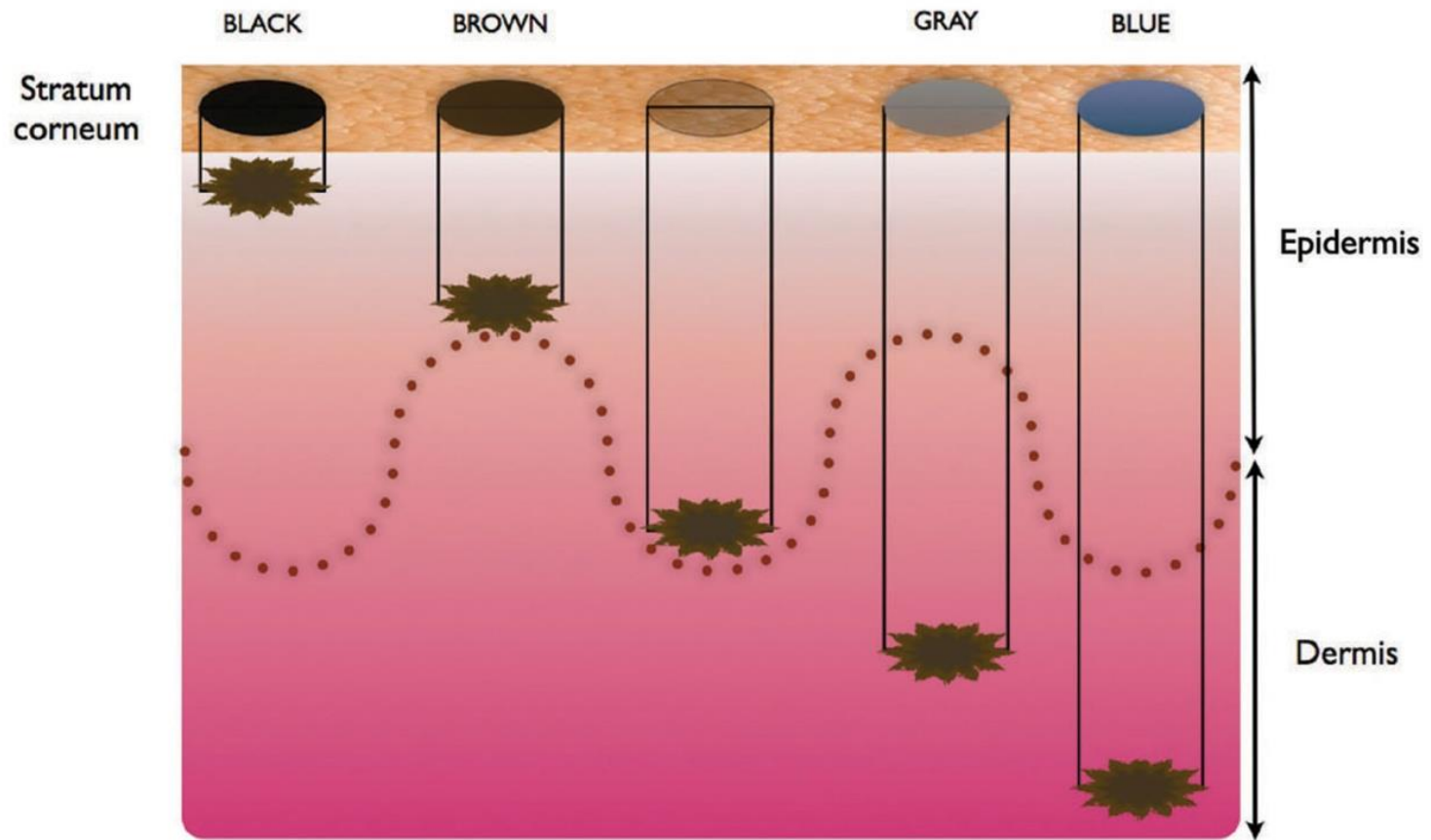




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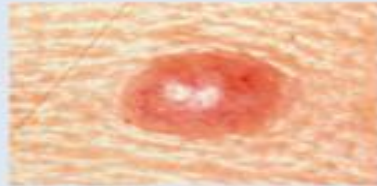






BENIGN**MALIGNANT****A: ASYMMETRY**

This benign mole is not asymmetrical. If you draw a line through the middle, the two sides will match, meaning it is symmetrical.



If you draw a line through this mole, the two halves will not match, meaning it is asymmetrical, a warning sign for melanoma.

B: BORDER

A benign mole has smooth, even borders, unlike a malignant melanoma.



The borders of an early melanoma tend to be uneven. The edges may be scalloped or notched.

C: COLOUR

Most benign moles are all one color—often a single shade of brown.



A variety of colours is another warning signal. A number of different shades of brown, tan or black could appear, as well as red, white or blue.

D: DIAMETER

Benign moles usually have a smaller diameter than malignant ones.



Melanomas are usually larger in diameter than the size of a pencil eraser ($\frac{1}{4}$ inch or 6mm), but they may sometimes be smaller when first detected.

E: EVOLVING

Common, benign moles look the same over time. Be on the alert when a mole starts to evolve or change in any way.



Any change—in size, shape, colour, elevation, or another trait, or any new symptom such as bleeding, itching or crusting—points to danger.







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16MD Global





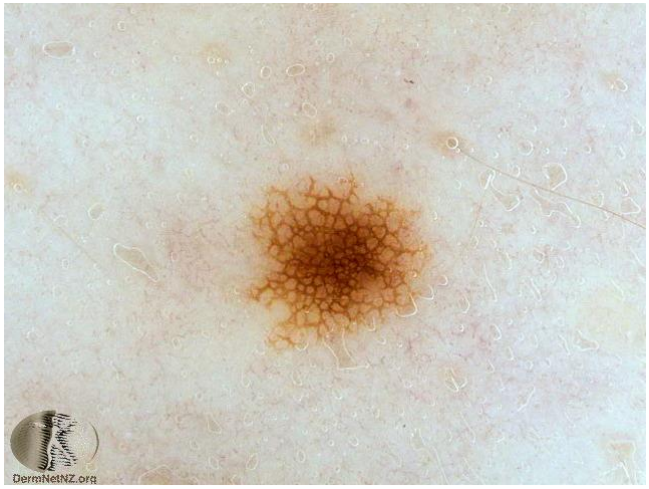












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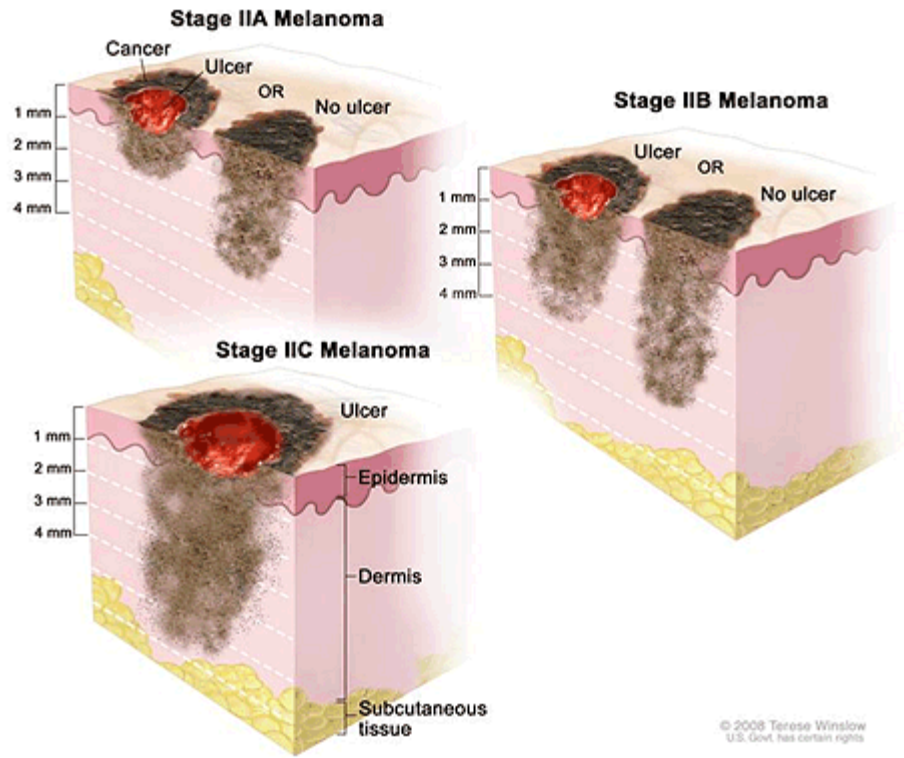






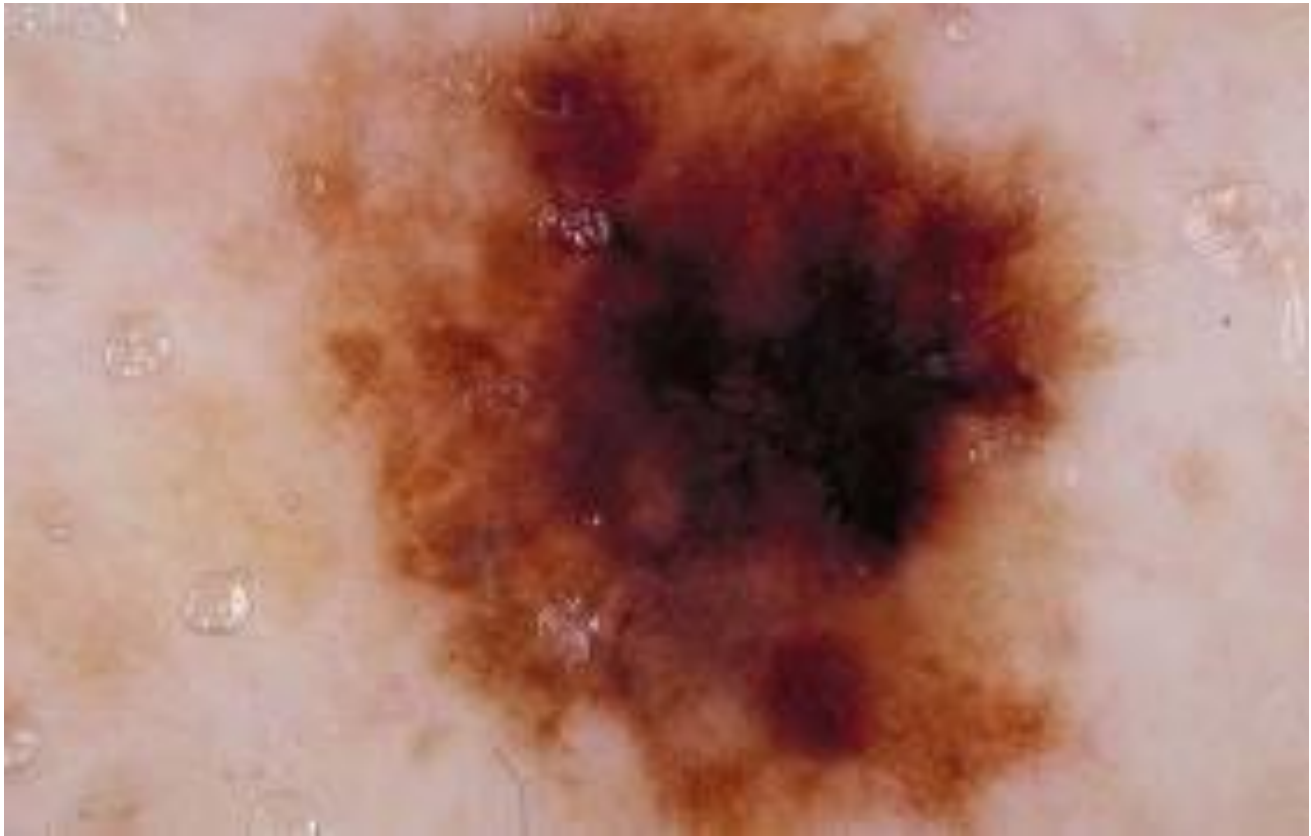


























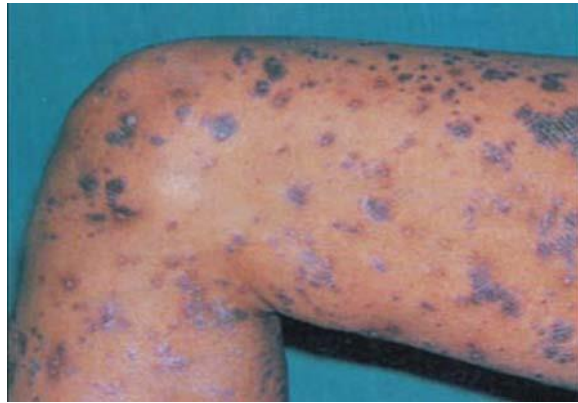














Any Ulcer that does
NOT heal
in 1 month
is an
SCC
until proven otherwise

GP 2ww referrals

- 60%- seborrhoeic keratosis
- 25% - BCC
- 10% - SCC
- - keratoacanthoma
- - benign moles

- <5 % - Malignant Melanomas

THE END