

Instructions for the use of Topical Hydrocortisone 1% Cream or Ointment

This information is for patients who need to use Hydrocortisone 1% ointment/cream. It explains what Hydrocortisone 1% ointment/cream is and how to apply it. It also tells you about the possible side effects.

What is Hydrocortisone cream/ointment?

It is a mild steroid, which is applied to the wound. It is used to treat skin that is inflamed. In your case it is being used to control over-granulation which is where the bottom layer of the skin heals at a faster rate than the top layer of skin. If you apply Hydrocortisone 1% to the wound the top layer of skin will grow and the wound will heal. It is not a licensed product for use in over-granulating wounds but experience in wound care has provided evidence that it can help to control over-granulation. The cream is white and the ointment is a light amber colour. Both the ointment and the cream contain 1% hydrocortisone in a base of white soft paraffin. You will be given/prescribed either the ointment or the cream, but not both.

Are there any alternatives?

It is your choice whether or not to have this treatment. Without steroid treatment, an alternative dressing can be chosen but may not assist in the healing of the wound at the same rate as might be achieved with a topical steroid.

Asking for your consent

It is important that you feel involved in decisions about your care. We will get your verbal consent before applying any new dressing and you can choose to stop it at any time

When applying the dressing

The ointment/cream should be applied to the areas identified by the nurse in the Plastic Dressing Clinic. It is applied to all the raw, raised, red, lumpy areas in the wound.

1. Wash the affected area under running water or in the shower. Dry thoroughly with a clean paper towel.
2. Apply a thin layer of ointment/cream over the affected area, avoiding healthy surrounding skin or healed areas.
3. A non-adherent dressing needs to be applied over the wound to keep the ointment/cream in place. Your nurse will advise you which one to use. These are normally Jelonet, N/A Ultra or Silflex. A dry dressing will then be placed over everything to secure it.
4. Whichever ointment/cream has been prescribed and the assessment of your wound will determine how often the dressing needs to be changed, this will be: (please tick)

- Daily
- Alternate days
- 3 times a week
- Twice a week
- Weekly

Do not use a film dressing as this will make the wound too moist.

When changing the dressing

The dressing should be changed as directed by the nurse in the Plastic Dressing Clinic and as indicated above.

What are the possible complications of using this treatment?

The short duration of time for which we use topical steroid treatment means there is very little chance of experiencing long time side effects. However potential complications may include:

- Allergic reaction to the ointment/cream including redness/itching/swelling/rash. Treatment should be stopped immediately if this occurs.
- The wound getting larger. If this occurs, again stop the treatment and contact the Plastic Dressing Clinic.
- Prolonged use can result in thinning of the skin, widening of the blood vessels and stretch marks.
- The wound could become infected. Look for signs of infection (redness, heat, swelling and increasing pain). Hydrocortisone must not be used on the area if you think it is infected. You need to seek immediate attention from the dressing clinic between 9am and 5pm Monday to Friday. Outside of these hours you should attend the local Accident and Emergency Department. Make sure you also arrange to be seen at the Plastic Dressing Clinic at the earliest possible time.

Things you need to watch for are:

1. If you react to the dressing you should stop using it. Signs of a reaction include itching and redness.
2. You should watch the wound for any signs of infection. This includes redness, heat, swelling and increasing pain.
3. If the wound starts to get worse or you have concerns, you must contact the Plastic Dressing Clinic to discuss and arrange another appointment if necessary.

Will I have a follow-up appointment?

The nurse applying the above dressing will arrange a review in the Plastic Dressing Clinic between 1-2 weeks after starting the treatment.

Contact us

If you have any questions or concerns please contact the Plastic Dressing Clinic nurses on 020 8725 0473 or the lead clinical nurse in plastic surgery on 020 8672 1071, ask for bleep 6332 (Monday to Friday, 9am to 5pm). Out of hours, please contact Keate ward on 020 8725 3226 or 3227.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough Wing (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111



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