



THE AUSTRALASIAN COLLEGE
OF DERMATOLOGISTS



Royal Australian College of General Practitioners

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Topical steroids continue to provide relief for millions with debilitating skin condition

Topical corticosteroids (also known as topical steroids or flare control creams) are safe and effective when used as prescribed. Topical corticosteroids remain vital to provide relief, alongside the use of moisturisers and avoidance of triggers, for many with eczema.

That is the message from Eczema Support Australia, the Australasian College of Dermatologists (ACD) and the Royal Australian College of General Practitioners (RACGP), in response to recent media reports of individuals who report experiencing topical steroid withdrawal (TSW).

ACD President Dr Adriene Lee said, “Topical steroid withdrawal is a very rare reaction. Far more commonly what we see in those who experience a deterioration of their skin after discontinuing topical steroids is evidence of undertreated eczema or a resurgence of the underlying eczema. Anyone concerned about using topical steroids should discuss this with their GP or dermatologist.”

Eczema Support Australia’s Managing Director Melanie Funk said she was concerned that misunderstandings and a few publicised cases would deter people from using topical steroids, which have been used effectively to treat millions of people with eczema over the last 50 years.

“Eczema can be a debilitating, lifelong condition. Far more people with eczema benefit from topical steroids than experience a reaction. It would be a tragedy if some Australians were deterred from using a therapy that is proven to provide relief and prevent their eczema from worsening,” Ms Funk said.

Dr Lee added, “Millions of people around the world have used topical steroids to manage their eczema effectively. The benefits of topical steroids far outweigh any risks, which is why they continue to form the foundation of care for eczema.”

Dr Lee emphasised that the purpose of using steroid creams is to manage an eczema flare, and a skin flare following discontinuation of treatment was more likely to be due to the recurring nature of eczema.

“Unfortunately, dermatologists see far more suffering caused by the avoidance of topical steroid treatments, which in turn can lead to the development of more severe disease,” said Dr Lee.

One of the millions treated with steroids, NSW resident Kim Johnson has used topical steroids to treat eczema flares for 50 years, and says, “Topical steroids have enabled me to live a normal life. Without steroid creams, my eczema wouldn’t be under control.”

Dr Anneliese Willems, a general practitioner and representative for the Royal Australian College of General Practitioners Specific Interests Dermatology group, said that addressing steroid concerns was vital to ensure patients did not miss out on treatment that could relieve their eczema.

“Eczema is a complex and chronic condition that requires a high level of self-management, which makes it essential that there is time during consultations for patients to talk about their concerns relating to steroids, and for GPs and dermatologists to listen, explain the evidence behind these treatments, and tailor care to the individual,” Dr Willems said.

“As with all medications, a small number of patients can experience side effects, while many can benefit. Patients should seek advice from their GP or dermatologist if their eczema is not responding to topical steroids, before making any changes to their treatment,” Dr Willems said.

Eczema Support Australia is working closely with GPs, pharmacists, nurses and dermatologists to develop a series of educational resources to support Australians impacted by eczema.

“Anyone concerned should speak to their GP or dermatologist to ensure they have an Eczema Care Plan tailored to them for using their steroid creams, moisturisers and other treatments,” Ms Funk said.

In summary:

- Topical corticosteroids (also known as topical steroids or flare creams) are safe and effective when tailored to the individual and used as prescribed. They remain vital to provide relief, alongside the use of moisturisers and the avoidance of triggers, for many with eczema.
- The incidence of topical steroid withdrawal is believed to be rare. Far more people with eczema benefit from topical steroids than experience a reaction.
- It is most likely that a skin flare following the cessation of steroid treatment is not topical steroid withdrawal, but a resurgence of eczema.
- Like all medicines, topical steroids should be used at the right potency, quantity, formulation, location, and for the correct duration.
- During a flare-up, topical steroids should be applied as directed to the affected skin only, until the eczema is under control and the skin feels smooth and itch-free. Steroid creams are not intended to be used in between flare-ups.
- Seek advice from your GP or dermatologist if there is still no improvement after 2-4 weeks.
- Anyone concerned about topical steroids should speak to their GP or dermatologist before changing or discontinuing treatment.
- More information on caring for eczema can be found on www.eczemasupport.org.au

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