

Topical Vitamin D

What are topical Vitamin D treatments?

Topical Vitamin D treatments are often one of the first topical treatments to be prescribed to people with psoriasis. Topical means to apply to the skin and topical Vitamin D treatments can come in ointment, lotion, gel and foam formations.

With the exception of Dovonex ointment, topical Vitamin D treatments are only available on prescription and cannot be bought from a pharmacist. If you have a confirmed diagnosis of psoriasis (by a GP or Dermatologist) then it is possible to buy Dovonex ointment from some pharmacies. However, the cost is significantly more than if you receive the same treatment with a prescription.

These treatments act by slowing down the production of skin cells and have an anti-inflammatory effect. This leads to an improvement in psoriasis symptoms for some people.

Topical Vitamin D treatments are not the same as Vitamin D supplements that you might take orally in tablet or liquid form.

When should Vitamin D treatments be used?

Topical Vitamin D treatments may be used separately, or in combination with topical steroid treatments. (See separate information sheet on Topical Steroids)

It is recommended that a review appointment is arranged four weeks after starting any new topical treatment (two weeks for children), so that your doctor can assess what the results of the treatment are so far, and to check if you need any help with using the treatment.

As with all topical treatments, it may take a number of weeks of use for a Vitamin D treatment to become fully effective.

There are very few side effects as long as you do not use more than the recommended amount.

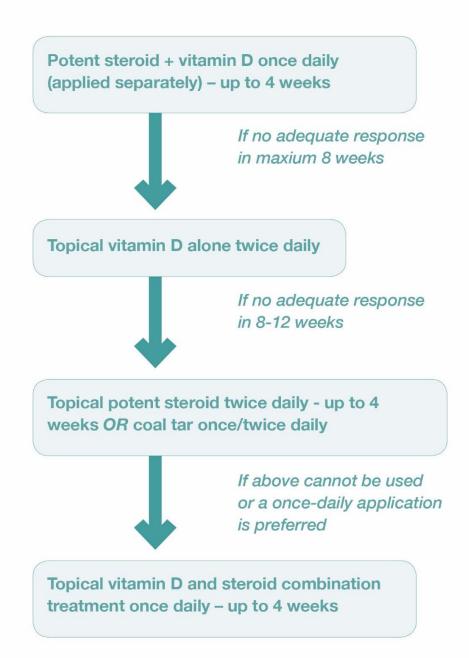
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The following flowchart issued by the National Institute for Health and Care Excellence (NICE) is a summary of the recommended order that topical treatments should be prescribed in, for people with plaque psoriasis on their tummy, back, arms or legs. This process may differ for people with psoriasis in different areas:

NICE Topical Treatment Guidance



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How should topical Vitamin D treatments be used?

Vitamin D treatments are easy to use and, when used properly, are unlikely to cause any side effects. As with all treatments, however, they should not be overused – too much topical Vitamin D could interfere with the body's absorption of calcium. Vitamin D products should be applied to areas of psoriasis only – avoid putting the treatment on unaffected skin.

Topical Vitamin D can also make the body more sensitive to UV light, and so people using these treatments might be advised to limit time out in the sun. Check with your doctor or refer to the enclosed patient information leaflet for further advice.

It is thought that 'active' topical treatments, including topical Vitamin D treatments, work better when the skin is well moisturised. Therefore, it is recommended that an emollient (moisturiser) should be applied and allowed to sink in for about half an hour before using a topical Vitamin D treatment.

It is recommended that if applying treatments once a day, to apply them at night in order for them to work most effectively.

Types of topical Vitamin D treatments

There are three Vitamin D treatments currently available in the UK and listed in the British National Formulary:

- Calcipotriol (**Dovonex**)
- Calcitriol (Silkis)
- A calcipotriol and steroid combination treatment that comes in different formulations (**Dovobet, Enstilar, Dalbecal and Wynzora**).

Commercial treatment names (or brand names) are used in the rest of this resource, as people are most likely to be familiar with them.

Dovonex

Dovonex is available as an ointment that is used to treat plaque psoriasis. It should be applied 1-2 times daily, and no more than 100g should be used per week. If you have been told to use Dovonex twice a day, try and leave a gap of 8-12 hours between using it. Do not use more than the dose recommended by your doctor.

For children over 12 years old, apply twice daily and do not exceed 75g per week. For children between 6 and 12 years old, apply twice daily and do not exceed 50g per week. There is limited

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experience of using Dovonex in children under 6 years of age, and so a maximum safe dose has not been established, but the Dermatologist will advise, if this is relevant.

Your doctor will tell you how long to use Dovonex for. It is important to keep using it until the psoriasis plaques are clear. Once your skin is better, your doctor will usually recommend that you stop using it. Using it after your skin has healed can increase the risk of side effects including high calcium levels in the body.

Dovonex should not be used on the face or other sensitive body areas, and you should avoid too much sunlight or the use of sun lamps. Possible side effects can include skin irritation such as redness, swelling, itching or dryness and allergic reactions. You should refer to the patient information leaflet that comes with the treatment for the full list of side effects and precautions.

You should not smoke while using Dovonex and should keep away from naked flames when using it. Fabric (clothing, bedding, dressings etc) that has been in contact with Dovonex burns more easily and is a serious fire hazard. Washing clothing and bedding may reduce product build-up but not totally remove it.

Silkis

Silkis is available as an ointment and is used for the treatment of mild to moderate plaque psoriasis covering up to 35% of the body. To help put this into perspective, the head covers 10% of the total area of the body.

Silkis should be applied to the affected areas twice per day – preferably morning and evening.

It is recommended that not more than 35% of the body surface* be exposed to daily treatment and not more than 30g of ointment should be used daily. Silkis should not be used in people with kidney or liver dysfunction, or in those who have problems with the absorption of calcium in their body.

Silkis can be used on the face with caution —Test a small patch first in case of irritation. Possible side effects of Silkis can include skin irritation and allergic reactions, however you should refer to the patient information leaflet that comes with the treatment for the full list of side effects and precautions.

Dovobet/Enstilar/Dalbecal/Wynzora

Dovobet/Enstilar/Dalbecal/Wynzora treatments are a combination of calcipotriol and a potent steroid (betamethasone, as in Diprosone). They come as an ointment or gel (Dovobet), foam (Enstilar), ointment (Dalbecal) or cream (Wynzora) and are used to treat plaque psoriasis. The gel, foam and cream formulations can also be used to treat scalp psoriasis.

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Dovobet should be applied to affected areas – up to a maximum of 30% body surface area* – once a day for a maximum of four weeks. After this time, your doctor should review the treatment progress. Application should be no more than 15g per day and 100g per week.

Enstilar foam should be applied once daily for a maximum of four weeks. After this period, your doctor should review the treatment progress. Like Dovobet, application should be no more than 15g per day and 100g per week. It is not recommended for use on children under the age of 18. You may be told by your doctor to use Enstilar twice weekly once your psoriasis has cleared or almost cleared. This may be referred to as a 'maintenance regime'. Enstilar should be applied twice weekly on two non-consecutive days (e.g. Wednesday and Saturday) to areas previously affected by psoriasis. Between applications there should be 2-3 days without Enstilar treatment.

If symptoms reappear you should use Enstilar once daily as outlined above and contact your doctor to review your treatment.

Dalbecal ointment should be applied to affected areas – up to a maximum of 30% body surface area* – once a day (it may be more convenient to use the ointment in the evening) for 4 weeks before being reviewed by a healthcare professional. Application should be no more than 15g per day. Dalbecal is not recommended for use on children under the age of 18.

Wynzora cream should be applied to the affected areas – up to a maximum of 30% body surface area* – once a day for a maximum of 8 weeks before being reviewed by a healthcare professional. Application should be no more than 15g per day. It is recommended that you allow 8 hours between applying Wynzora and taking a bath or shower to avoid washing it off, and to achieve the optimal affect (if using on the scalp, it is recommended that the hair is not washed immediately after application and to allow 8 hours before showering / washing off). It is not recommended for use on children under the age of 18.

Dovobet, Enstillar, Dalbecal and Wynzora should not be used in people who have problems with the absorption of calcium in their body, those with pustular psoriasis, skin infections, and certain other skin conditions. If using more than one of the products e.g. Dovobet for body + Enstillar for scalp the total for all applications should not exceed 15g per day.

Neither Dovobet, Enstilar, Dalbecal or Wynzora should be used in sensitive body areas such as the face, genital areas, or skin folds. Possible side effects of using the treatments in these areas can include skin irritation, blurred vision and allergic reactions. You should refer to the patient information leaflet that comes with the treatment for the full list of side effects and precautions.

*body surface area – the size of the palm of your hand is approximately 1% of your body surface area.

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Trusted Information Creator The information in this resource is not intended to replace that of a healthcare professional: If you have any concerns or questions about your treatments, do discuss this with your doctor or pharmacist and **always read the patient information leaflet** to make sure you are using them correctly.

For more information, or for a list of resources used in the production of this information sheet, please contact the Psoriasis Association.

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