

## Position statement on the prescribing of camouflage (covering) creams and powders on GP FP10 prescription

SW London CCGs\* do not routinely commission cosmetic treatments, including camouflage creams and powders.

The Advisory Committee on Borderline Substances (ACBS) recommends that the prescribing of camouflage creams and powders is restricted to the following conditions<sup>1</sup>:

- Post-operative scars and other deformities and
- As adjunctive therapy in the relief of emotional disturbance due to disfiguring skin disease, such as vitiligo.

For the above conditions, the following products **are allowed** on prescription<sup>1,2</sup>, as recommended by the Advisory Committee on Borderline Substances (ACBS). (Endorse 'ACBS' on the prescription).

- Covermark® Classic Foundation
- Covermark® Finishing Powder
- Dermacolor® Camouflage Cream
- Dermacolor® Fixing Powder
- Keromask® Finishing Powder
- Keromask® Masking Cream
- Veil® Cover Cream
- Veil® Finishing Powder

Conditions contra-indicated for skin camouflage i.e. conditions that need medical treatment and must NOT be concealed with camouflage products include<sup>3</sup>:

- Allergic reactions
- Bacterial and fungal infections e.g. impetigo and tinea (ringworm)
- Blister and ulcerated skin
- Chilblains
- Illnesses that visually manifest on skin e.g. chickenpox and measles
- Infestations e.g. scabies and lice
- Occupational / contact dermatitis
- Open wound
- Over sutures (stitches)
- Moles
- Photodermatoses e.g. actinic dermatitis
- Psoriasis to nails, persistent palmoplantar and pustular forms of psoriasis
- Skin cancer
- Strawberry birthmarks
- Undiagnosed lesions
- Undiagnosed rashes
- Varicose veins
- Viral infections e.g. herpes simplex, herpes zoster (shingles) and warts

**References:**

1. Drug Tariff February 2018: <https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/drug-tariff>
2. British National Formulary (online), accessed July 2018: <https://bnf.nice.org.uk/borderline-substance-taxonomy/>
3. The British Association of skin camouflage (accessed February 2018): <http://www.skin-camouflage.net/index.php/consultations/who-benefits-from-camouflage/57.html>

**Guidance for clinicians****Recommendations**

- Ensure the dermatological condition is clearly documented in the patient's clinical notes.
- The prescribing of camouflage (covering) creams and powders for non-clinical, cosmetic purposes are not recommended and should be reviewed.
- Existing patients should be reviewed to ensure they meet the criteria.
- Where the patient meets the prescribing criteria, a suitable preparation can be prescribed. Prescriptions should be issued as an 'acute' prescription and not added to repeat.
- A small amount of cream should cover a large area if applied correctly. For patients who request prescriptions frequently, review application area and technique.
- Camouflage creams and powders are available to buy from most community pharmacies and retail outlets.

**Guidance for patients, carers and guardians**

- Camouflage (covering) creams and powders are available to buy from most community pharmacies and retail outlets.
- A small amount of cream should cover a large area if applied correctly. The creams are waterproof and may remain on the face for 12–18 hours.
- Community pharmacists can offer advice on how to manage the condition, and when to seek medical advice.
- Patient information leaflets are available to download from the British Association of Dermatologists' website ([www.bad.org.uk](http://www.bad.org.uk))

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