



St John's Institute of Dermatology

Treating scalp psoriasis

This leaflet has been written to help you understand some of the techniques you can use to treat your scalp psoriasis with prescribed treatments. If you have any questions or concerns, please speak to a doctor or nurse caring for you.

What is scalp psoriasis?

Psoriasis is a skin condition that can affect any part of the skin surface but most commonly appears on the elbows, knees and scalp. It usually appears as red, raised, scaly patches known as plaques. Scalp psoriasis may also involve the hairline, the forehead, behind the ears and the back of the neck. It can range from mild with slight fine scaling to very severe, with thick adherent scaling covering the entire scalp. This can in some cases cause hair loss, but the hair will normally grow back once the inflammation and scale has cleared. Psoriasis can be itchy, and may make the scalp feel tight and uncomfortable. It can also cause embarrassment if there is a lot of visible scale.

Why is scalp psoriasis more difficult to treat?

Scalp psoriasis can be more difficult to treat than psoriasis on the body because the hair can obstruct the area that needs treatment and can also trap the scale so it is less likely to rub off. The scale can therefore build up more quickly, causing a thicker plaque. It can be difficult to see the psoriasis on the scalp so it is more challenging to apply the treatment.

What treatments can be used in the scalp?

The treatment of psoriasis should be tailored for each person, taking into account lifestyle, time available and any physical limitations. Psoriasis is not curable but its signs and symptoms can be well controlled with a good treatment regimen. Prescribed treatments are available in special formulations for use on the scalp such as gels, mousses, shampoos and lotions. This means they can be more easily applied to the scalp.

Types of treatment for scalp psoriasis

Potent topical steroids

Potent steroids are the more commonly prescribed treatment for scalp psoriasis but these should be avoided on the face and around the ears (see Table 1 for examples). They can be used continuously for a few weeks at a time to bring the psoriasis under control, and then gradually phased out, switching to maintenance treatment with a coal tar shampoo and/or

emollients. Sometimes the steroid becomes less effective after repeated use and an alternative formulation or treatment may need to be tried for a while.

Vitamin D derivatives

Vitamin D derivatives are available as ointment, gel or lotion depending on the brand (see Table 1 for examples). They are usually applied once or twice a day and left in contact with the scalp (i.e. do not need to be washed out). They do not smell or stain clothing, and are relatively easy to use. They can be used to bring the scalp psoriasis under control and maintain that control. Two products (Dovobet® and Enstilar®) combine with a potent steroid and this must therefore be avoided on the face and behind the ears (see Table 1 below). Products without steroid content are safe to use on the forehead too but can sometimes cause irritation. It is best to test a small patch before applying it to the entire scalp. Avoid contact with the eyes.

Coal tar products

Tar lotions, gels, ointments and creams are commonly used to treat scalp psoriasis and can be used on the hairline, forehead and around the ears (see Table 1 for examples). They may be combined with other medications such as salicylic acid or coconut oil to help remove scale. Tar is effective but it can stain clothing and jewellery and has a strong smell, so it is a less convenient treatment. The precise instructions for use will depend on the formulation of the product but tar products are usually massaged into the scalp, left in contact for a period of time (perhaps 1-2 hours) and then washed off. Clothes and bedding can be protected from staining by wearing a shower cap during the contact period. Make sure you receive full instructions from your nurse, doctor or pharmacist on how to use the product safely and effectively.

Table 1 - Different types of scalp applications available

Product type	Medicine	Product name/s (if branded)
Only available with a prescription		
Potent topical steroid	Hydrocortisone Butyrate 0.1%	Locoid scalp lotion Locoid Crelo
Potent topical steroid	Mometasone Furoate 0.1%	Elocon scalp lotion
Potent topical steroid	Betamethasone valerate 0.1%	Betacap scalp application Betnovate scalp application Betnovate scalp lotion Bettamousse foam
Potent topical steroid	Betamethasone dipropionate 0.05%	Diprosone lotion
Potent topical steroid	Betamethasone dipropionate 0.05% with salicylic acid	Diprosalic scalp application
Very potent topical steroid	Clobetasol Propionate 0.05%	Dermovate scalp application Etrivex shampoo Clarelux foam
Vitamin D derivative	Calcipotriol 50mcg / mL	Scalp solution (no branded products)
Vitamin D derivative	Tacalcitol	Curatoderm lotion
Vitamin D derivative plus potent topical steroid	Betamethasone dipropionate 0.05% plus Calcipotriol 50 mcg/ gram	Dovobet gel Enstilar foam

Available without a prescription		
Coal tar	Coal tar solution 5% in an emollient basis	Exorex lotion
Coal tar	Coal tar 2.5%, lecithin 0.3%	Psoriderm scalp lotion
Coal tar	Coal tar solution 12%, salicylic acid 2%, precipitated sulfur 4%, in a coconut oil emollient basis	Sebco ointment Cocois ointment

Medicated shampoos

There are several coal tar and medicated shampoos for treating scalp psoriasis available from your local chemist. For further advice, speak to your pharmacist. You should bear in mind that medicated shampoos are designed primarily for treating the scalp rather than washing hair, so you may wish to use a normal shampoo and conditioner after your scalp treatments to reduce the smell of tar. When using a tar shampoo you should massage the shampoo into the scalp and leave for 5-10 minutes before rinsing out. Tar shampoo alone is not recommended for treatment of severe scalp psoriasis (i.e. where there is thick scaling and redness) but is sometimes sufficient if there is only mild flaking.

How do I apply the treatment to the scalp?

If you have someone to help apply the treatment to your scalp at home that can be helpful. If not, try to feel where the psoriasis is situated, you may feel a roughness, tightness or crusting if the plaques are raised. When you are using potent steroids on the scalp, take care not to let the treatment run onto your face or behind your ears, as the skin is much thinner in these areas and more prone to damage. It's important to wash your hands after using these treatments so you do not spread the treatment to other areas by mistake.

How long should I use the scalp treatment?

It can take at least eight weeks until you gain adequate control of the psoriasis, whichever treatment is used. If, however, you have seen no improvement after four weeks' continuous treatment you should return to your GP or nurse for further assessment. Remember to try to treat psoriasis daily when it is active.

Once you have achieved clearance, it is important to maintain the improvement, and this can usually be done with regular use of a tar shampoo and or by moisturising the scalp occasionally with an oil or emollient if it is becoming dry or mildly scaly. If you have no success in controlling your scalp psoriasis, you may require a period of nurse assisted scalp treatment in a specialist treatment centre or in rare cases a systemic (tablet) therapy.

Additional techniques for the removal of thick scale

Sometimes emollient ointments or oils can be useful in softening thick adherent scale on the surface of the psoriasis plaques before using other prescribed treatments. Prescribed treatments like steroids or tar will work better if the scale is removed first because they can then better penetrate the active disease area. There are no products specifically marketed for this purpose but oils such as arachis (peanut) oil, olive oil, and coconut oil can be used, or an emulsifying ointment which is available from pharmacies.

Method

1. An oil or a softened emulsifying ointment, can be massaged into the scalp section by section, trying to avoid too much going on the hair.
2. The scalp can then be wrapped in a towel, shower cap or cling film and left for 60 minutes or overnight if desired.

3. After this period, the hair can be washed with normal or tar shampoo.
4. If the hair is long comb it through. Then while the scalp is still damp, gentle manual removal of scales will be possible where they are softened and loose. You may find it easier to do this if you have someone to help.
5. Place a plastic, fine-toothed comb flat against the scalp and gently rotate it in a circular motion. Loosen the scale gently and try to comb it out of the hair. Do not remove scales too aggressively as this can damage the skin and cause hair loss.
6. You can then shampoo again to wash away debris from the scalp and remove the grease from the hair. The hair may need two washes if it remains oily.
7. You can use a hairdryer to dry your hair afterwards.

Are there any precautions to take?

Some treatments should not be used during pregnancy or breastfeeding, so before you use them, always check their suitability with your doctor or pharmacist. Treatments containing liquid paraffin are a fire hazard and materials that may have become soaked in the treatment should be kept from naked flames.

Useful sources of information

Watch our video about treating scalp psoriasis:

w: www.guysandstthomas.nhs.uk/dermatologyvideos

Psoriasis Association

w: www.psoriasis-association.org.uk

Psoriasis and Psoriatic Arthritis Alliance

w: www.papaa.org.uk

Skin Support

w: www.skincareaction.org.uk

Contact us

If you have any questions or concerns about treating scalp psoriasis please contact the clinical nurse specialist team on **0207 188 7847** (Monday to Friday, 9am to 5pm).

Out of hours, please leave a message and a member of staff will call you back in working hours; alternatively please contact your GP or NHS 111.

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

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

t: 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints) **e:** complaints2@gstt.nhs.uk

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