Halcinonide (hal-sin-oh-nide)

**Halog**

**Classification:** Therapeutic: anti-inflammatories (steroidal)
Pharmacologic: corticosteroids

**Pregnancy Category:** C

**Indications**
Management of inflammation and pruritis associated with various allergic and immunologic skin problems.

**Action**

**Pharmacokinetics**
Absorption: Minimal. Prolonged use on large surface areas or large amounts applied or use of occlusive dressings may increase systemic absorption.
Distribution: Remains primarily at site of action.
Metabolism and Excretion: Usually metabolized in skin.
Half-life: Unknown.

**TIME/ACTION PROFILE (response depends on condition being treated)**

<table>
<thead>
<tr>
<th>ROUTE</th>
<th>ONSET</th>
<th>PEAK</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Topical</td>
<td>min–hrs</td>
<td>hrs–days</td>
<td>hrs–days</td>
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**Contraindications/Precautions**

- Contraindicated in: Hypersensitivity or known intolerance to corticosteroids or components of vehicles (ointment or cream base, preservative, alcohol); Untreated bacterial or viral infections.
- Use Cautiously in: Hepatic dysfunction; Diabetes mellitus, cataracts, glaucoma, or tuberculosis (use of large amounts of high-potency agents may worsen condition); Patients with pre-existing skin atrophy; Pregnancy, lactation, or children (chronic high-dose usage may result in adrenal suppression in mother and, growth suppression in children; children may be more susceptible to adrenal and growth suppression).

**Adverse Reactions/Side Effects**

- **Derm:** Allergic contact dermatitis, atrophy, burning, dryness, edema, folliculitis, hypertrichosis, hypopigmentation, irritation, maceration, miliaria, perioral dermatitis, secondary infection, striae.
- **Misc:** Adrenal suppression (use of occlusive dressings, long-term therapy).

**Interactions**

**Drug-Drug:** None significant.

**Route/Dosage**

**Topical (Adults):** Apply to affected area(s) 1–3 times daily (depends on product, preparation, and condition being treated).

**Topical (Children):** Apply to affected area(s) once daily.

**NURSING IMPLICATIONS**

**Assessment**

- Assess affected skin before and daily during therapy. Note degree of inflammation and pruritus. Notify physician or other health care professional if symptoms of infection (increased pain, erythema, purulent exudate) develop.

**Lab Test Considerations:**
- Periodic adrenal function tests may be ordered to assess degree of hypothalamic-pituitary-adrenal (HPA) axis suppression in chronic topical therapy of suspected. Children and patients with dose applied to a large area, using an occlusive dressing, or using high-potency products are at highest risk for HPA suppression.
- May cause increased serum and urine glucose concentrations if significant absorption occurs.

**Potential Nursing Diagnoses**

- Risk for impaired skin integrity (Indications)
- Risk for infection (Side Effects)
- Deficient knowledge, related to medication regimen (Patient/Family Teaching)

**Implementation**

- Choice of vehicle depends on site and type of lesion. Ointments are more occlusive and preferred for dry, scaly lesions. Creams should be used on excising or intertriginous areas.
- **Ointment** preferred in children.
Topical: Apply ointment or cream sparingly as a thin film to clean, slightly moist skin. Wash hands immediately after application. Apply occlusive dressing only if specified by a physician or other healthcare professional.

Patient/Family Teaching

- Instruct patient on correct technique of medication administration. Emphasize importance of avoiding the eyes. If a dose is missed, it should be applied as soon as remembered unless almost time for the next dose.
- Caution patient to use only as directed. Avoid using cosmetics, bandages, dressings, or other skin products over the treated area unless directed by a healthcare professional.
- Advise parents of pediatric patients not to apply tight-fitting diapers or plastic pants on a child treated in the diaper area; these garments work like an occlusive dressing and can cause more of the drug to be absorbed.
- Caution women that medication should not be used extensively, in large amounts, or for prolonged periods if they are pregnant or planning to become pregnant.
- Advise patient to consult a healthcare professional before using medicine for conditions other than indicated.
- Instruct patient to inform a healthcare professional if symptoms of underlying disease return or worsen or if symptoms of infection develop.

Evaluation/Desired Outcomes

- Resolution of skin inflammation, pruritus, or other dermatologic conditions.

Why was this drug prescribed for your patient?