**Butenafine (byoo-ten-a-feen)
Lotrimin Ultra, Mentax**

**Classification**
Therapeutic: antifungals (topical)

**Pregnancy Category B**

**Indications**
Treatment of a variety of cutaneous fungal infections, including tinea pedis (athlete's foot), tinea cruris (jock itch), tinea corporis (ringworm), and tinea versicolor.

**Action**
Affects the synthesis of the fungal cell wall. **Therapeutic Effects:** Decrease in symptoms of fungal infection.

**Pharmacokinetics**
**Absorption:** Absorption through intact skin is minimal.
**Distribution:** Distribution after topical administration is primarily local.
**Metabolism and Excretion:** Hepatic via hydroxylation.
**Half-life:** 35 hr.

**TIME/ACTION PROFILE**

<table>
<thead>
<tr>
<th>ROUTE</th>
<th>ONSET</th>
<th>PEAK</th>
<th>DURATION</th>
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<tbody>
<tr>
<td>Top.</td>
<td>unknown</td>
<td>up to 4 wk</td>
<td>unknown</td>
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**Contraindications/Precautions**
**Contraindicated in:** Hypersensitivity to active ingredients, additives, preservatives, or base; Some products contain alcohol or bisulfites and should be avoided in patients with known intolerance.
**Use Cautiously in:** Nail and scalp infections (may require additional systemic therapy); OB, Lactation: Safety not established.

**Adverse Reactions/Side Effects**
**Local:** burning, itching, local hypersensitivity reactions, redness, stinging.

**Drug Interactions:** None significant.

**NURSING IMPLICATIONS**

**Assessment**
- Monitor involved areas of skin and mucous membranes before and frequently during therapy. Increased skin irritation may indicate need to discontinue medication.

**Potential Nursing Diagnoses**
Risk for impaired skin integrity (Indications)
Risk for infection (Indications)

**Implementation**
- Consult physician or other health care professional for proper cleansing technique before applying medication.
- **Topical:** Apply small amount to cover affected area completely. Avoid the use of occlusive wrappings or dressings unless directed by physician or health care professional.

**Patient/Family Teaching**
- Instruct patient to apply medication as directed for full course of therapy, even if feeling better. Emphasize the importance of avoiding the eyes or vaginal area.
- Inform patient that some products may stain fabric, skin, or hair. Check label information. Fabrics stained from cream can usually be cleaned by handwashing with soap and warm water.
- Advise patient to report increased skin irritation or lack of response to therapy to health care professional.
- Early relief of symptoms may be seen in 2–3 days. For tinea cruris, tinea corporis, and tinea versicolor, 2 wk are needed, and for tinea pedis, therapeutic response may take 4 wk. Recurrent fungal infections may be a sign of systemic illness.

**Evaluation/Desired Outcomes**
- Decrease in skin irritation and.
- Resolution of infection.

**Why was this drug prescribed for your patient?**