

diprosone[®]*

(Betamethasone Dipropionate Cream USP /
Betamethasone Dipropionate Lotion USP)

Composition: diprosone cream contains: Betamethasone Dipropionate USP equivalent to Betamethasone USP 0.05% w/w, Excipients for Cream: Cetomacragol-1000 BP, Cetostearyl Alcohol BP, Methyl Hydroxybenzoate BP, Propyl Hydroxybenzoate BP, White soft Paraffin (White Petroleum Jelly) BP, Chlorocresol (PCMC) BP, Propylene Glycol BP, Sodium Dihydrogen Phosphate BP and Purified water BP.

Composition: diprosone lotion contains: Betamethasone Dipropionate USP equivalent to Betamethasone USP 0.05% w/v. Excipients for Lotion: Glycerin BP, Propyl Hydroxybenzoate BP, Propylene Glycol BP, Methyl Hydroxybenzoate BP and Purified Water BP, Citric Acid Monohydrate BP, Sodium Citrate BP.

Pharmacological category - diprosone is a synthetic adrenocorticosteroid for dermatologic use.

Pharmacological action - diprosone is effective in the treatment of corticosteroid-responsive dermatoses primarily because of their anti-inflammatory, anti-pruritic, and vasoconstrictive actions. It acts as a local anti-inflammatory agent, acting on skin and mucous membrane. It suppresses release of several mediators of inflammation including histamine, Prostaglandins, Leukotrienes.

Therapeutic indications - diprosone is indicated for the treatment of Psoriasis, Eczema, Lichen simplex and planus, Anal and vulval pruritus, Otitis externa, Contact & Seborrhoeic dermatitis.

Contraindication - diprosone is contraindicated in patients who are hypersensitive to betamethasone dipropionate.

Dosage and method of administration - While using **diprosone** cream apply a thin film to the affected skin areas once daily. In some cases, a twice-daily dosage may be necessary. While using **diprosone** lotion apply a few drops to the affected area and massage lightly until it disappears. Apply twice daily, in the morning and at night. For the most effective and economical use, apply nozzle very close to affected area and gently squeeze bottle. Apply Diprosone lotion in parting hair in the case of scalp.

Pharmacokinetics properties -

- Absorption - Percutaneous absorption
- Elimination - Via urine and bile

Adverse reaction - Systemic absorption of **diprosone** has produced reversible hypothalamic-pituitary-adrenal (HPA) axis suppression, manifestations of Cushing's syndrome, hyperglycemia, and glucosuria in some patients. Some of the rarely reported side effects are burning, itching, irritation, dryness etc.

Warnings & precautions for use in special populations - I)

Pregnancy - diprosone should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus.

ii) Nursing mothers - In nursing mothers systemically administered corticosteroids are secreted into breast milk in quantities not likely to have a deleterious effect on the infant. Nevertheless, caution should be exercised when topical corticosteroids are prescribed for a nursing woman.

iii) Pediatric Use - HPA axis (hypothalamic-pituitary-adrenal axis) suppression, Cushing's syndrome and intracranial hypertension have been reported in paediatric patients receiving topical corticosteroids.

Drug interactions - None has been reported on local application. Avoid using other topical medications.

Symptoms of over dosage & its treatment - Excessive prolonged use of topical corticosteroids can suppress pituitary-adrenal functions resulting in secondary adrenal insufficiency which is usually reversible. In such cases appropriate symptomatic treatment is indicated. If HPA axis suppression is noted, an attempt should be made to withdraw the drug, reduce the frequency of application, or to substitute a less potent steroid.

Storage conditions - Do not store above 30°C. Protect from sunlight. Keep out of reach of children.

Available as - diprosone cream is available in a Pack of 15g/30g tube. **diprosone** lotion is available in a pack of 30ml.

..