

Using Topical Gels and Creams

Topical gels and creams have become a go-to for many hospice nurses to treat symptoms of patients who have lost the ability to swallow or who cheek/spit out oral medications. Nurses over and over again sing the praises of a little cream just rubbed into the forearm. Pharmacists hear from nurses that it is an “easy” dosing option, it is a “dignified” dosing option and “it just works.” However, how much of the cream’s effectiveness is really a result of absorbed medication and how much is just human touch?

In a recent, randomized, double-blind, placebo-controlled crossover clinical trial to compare the effectiveness of ABH topical gel against a placebo gel. The trial was completed with 20 patients who had an active cancer diagnosis. Nausea in these patients was related to the following: pain, pain medication, bone marrow transplant, or related to their cancer. Results of this trial showed no difference in efficacy between ABH topical gel or the placebo gel for treating nausea or vomiting. The researchers concluded that ABH topical gel should not be used in cancer patients experiencing nausea.

The results of this trial are consistent with earlier research on healthy volunteers who received topical ABH gel and had serial blood samples drawn at various intervals up to 4 hours after application. (2) Blood levels of each of the 3 drugs were evaluated. That small study on 10 volunteers, published in 2012, demonstrated that none of the three medications in the ABH gel formulation were absorbed to any significant degree. The researchers concluded that topical application of this product was ineffective.

These studies show that topical gels/creams are therapeutically ineffective. Best practice is to use traditional routes of administration for patient comfort.

References:

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3. Mazlum, Seyedreza, et al. "The effect of massage therapy on chemotherapy-induced nausea and vomiting in pediatric cancer." *Iranian journal of nursing and midwifery research* 18.4 (2013): 280.