**Caring for Your Skin, Hair and Nails when on “Targeted Therapies”**

**What to LOOK for:**

**Acne-Like Rash:**
An acne-like rash often begins 1-2 weeks after starting the drug. It may continue for many weeks and then slowly improve. It may look like acne but it is not acne and it will not improve with anti-acne medicines. The rash occurs most often on the face, neck, chest and back. The rash may cause discomfort or itching. For most people, the rash is mild to moderate and will not affect daily life. For some people, the rash is more severe and may make the person self-conscious about the way they look.

**Dry Skin:**
After a couple of months, you may notice that your skin looks dry and scaly. This may happen on your arms, legs or body. The dryness may be so severe that the skin on the fingertips and heels crack.

**Itching:**
Itching may start in the first few months of taking the drug. It may occur on the scalp, body, arms and legs. It also may itch where you have a rash or the skin is dry.

**Nail Changes:**
One of the later side effects of these drugs can be painful swelling and redness around the fingernails or toenails. Sometimes the nail area can become infected and require antibiotics.

**Hair Changes:**
After you are on the drug for awhile (usually over four months), your hair may change. Sometimes you can lose patches of hair or have hair thinning. On the other hand, you may also notice hair growing in areas such as the face. Eyelashes and eyebrows may grow very long. Long curling eyelashes may bother you and affect your vision.

**What You Should Do to Prevent or Manage Side Effects:**

**General:**
- Tell your doctor or nurse as soon as you have any skin, hair or nail problems.
- Avoid being in the sun and use a sunscreen with an SPF of 30 or more.

*If skin problems become severe, you may be sent to see a skin doctor, called a dermatologist.*

**Rash:**
- Your doctor may prescribe an antibiotic to try to prevent or treat the rash. Do not stop taking your drugs unless your doctor or nurse tells you to stop.
- Your doctor may prescribe special creams to put on the red, inflamed areas. Do not use acne drugs or creams on the rash.

**Dry Skin:**
- For dry skin, use over-the-counter moisturizers (Vanicream®, Eucerin®, Aquaphor®). In general, use ointments or creams sold in tubs and avoid lotions.
- For very dry skin that is scaly and flaky, use over-the-counter Am-Lactin® cream.
- For cracks in the fingertips, use creams or ointments containing zinc oxide (Desitin® regular or maximum strength®).
- Cracks also may be treated with Super Glue® to prevent pain and allow healing. Your doctor may prescribe special creams to put on dry patches that hurt or itch.

**Hair Changes:**
- Use electric razors to remove any new or increased hair growth. Avoid using a straight razor, waxing or chemicals.

**Itching:**
- For itchy skin, use over-the-counter creams that contain menthol. (Sarna Ultra cream®)
- Over-the-counter anti-histamines pills also may reduce itching (Benadryl®, Claritin®, etc.).
- Your doctor may prescribe other drugs or creams to be applied or taken by mouth. In general, anti-itch tablets cause drowsiness, so you may want to take them only at night.
- For itching on the scalp, try Selsun Blue®, Neutrogena T-Gel® or your doctor may order special foams or shampoos.

**Nail Changes:**
- For swelling and redness around finger or toenails, wear soft shoes and avoid extreme heat or cold or bumping them.
- Your doctor may use a special chemical (silver nitrate) that is put on every week.
- If there is pain or redness, soak fingers or toes in a solution of white vinegar mixed in an equal amount of tap water.
- Your doctor may prescribe antibiotics if there is an infection.

**Mouth changes:**
- If you have mouth sores eat soft, non-spicy foods. Your doctor may prescribe pain medicine especially if the pain affects eating.
- Good oral care is important. Be sure to brush and floss your teeth and see an oral health care provider before treatment and during treatment.

*This patient brochure has been adapted from a brochure of the Memorial Sloan-Kettering Cancer Center*