

Thames Valley Priorities Committees

Buckinghamshire/Milton Keynes Priorities Committee

Policy Statement: Terbinafine (& other antifungal preparations) for Fungal Nail Infections

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The Thames Valley Priorities Committees' consider the treatment of onychomycosis (fungal nail infection) with terbinafine to be a LOW PRIORITY and not normally prescribed, with the exception of infection in the elderly, diabetic or other immunocompromised patients. In these patients, Terbinafine should only be initiated if infection is confirmed by microscopy and/or culture. Topical terbinafine should not be prescribed due to its inferior efficacy.

Terbinafine is an antifungal drug indicated in dermatophyte infections of the nails, It is also indicated for fungal skin infections where oral therapy is appropriate

Summary

Unightly nails due to fungal infection a cosmetic problem. In a few cases especially in the elderly, diabetic and other immunocompromised patients fungal nail infections can lead to cellulitis.

Topical treatment is inferior to systemic treatment. Systemic terbinafine is the most effective agent in dermatophyte onychomycosis but there is still a 20-30% failure rate. Treatment with oral antifungals should only be prescribed when absolutely necessary as they all have the potential to cause serious side effects e.g. liver failure.

A firm diagnosis should always be made before initiating drug treatment. A specimen of the infected nail should be assessed for mycology. Drug therapy should only be initiated if infection is confirmed by microscopy and/or culture.

Patients taking oral antifungals should be reassured that their nail infection might still respond even after the treatment course is finished. The importance of good nail hygiene should be emphasised

This statement will be reviewed in light of new evidence or further guidance from NICE

References

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