

Vehicles Always Matter

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It has been said that the best treatment for a given patient is the one that the patient will actually use. The comment, often spoken with humor, actually underscores several important aspects of dermatology care today. Foremost is the fact that patient adherence (as influenced by their satisfaction with treatment) is a critical driver of clinical success.

Additionally, dermatologists now often have a range of vehicle formulations from which to select treatment. Finally, there is large and growing body of evidence that the vehicle itself can have an impact on therapeutic outcomes.^{1,2}

Prominent among vehicle innovations has been the emergence of topical foam vehicles that provide certain clear benefits for patients. Foams are easy to apply to hairy skin and large body surface areas. They can be quickly spread over irritated or inflamed skin without causing much additional discomfort. And well-formulated foams tend to quickly “melt” into the skin, making them attractive for patients who want to expeditiously apply medication without worrying it will stain clothes or interfere with application of skincare or make-up.

It is important to note, however, that all foams are not created equal. A foam formulation might contain high levels of alcohol that could irritate and dry the skin or contain excipients that leave a sticky residue on the skin. Some formulations contain fragrances, which most prescribers prefer to avoid on eczematous skin and which are contraindicated in patients with known fragrance allergies.^{3,4}

As discussed in the pages ahead, VersaFoam technology revolutionized topical drug delivery with its “quick break” hydroethanolic-based foam formulation, which was found to be irritating because of its alcohol content. VersaFoam has continued to innovate, now offering four distinct foam-based vehicles that feature unique and desirable properties. The aqueous-based foam (VersaFoam AF) and the aqueous-based emulsion foam (VersaFoam AEF), in particular, have emerged as clinically favorable due to their “barrier friendly” formulations. Neither

contains ethanol or fragrance. Like all VersaFoam vehicles, these foams allow for penetration of active ingredients through the stratum corneum with ideal permeation into the epidermis and dermis.

Clinical trials document the efficacy of foam-based formulations of calcipotriene for psoriasis and tazarotene for acne.^{5,6} Of particular interest, application of tazarotene foam was associated with lower systemic exposure than was application of tazarotene gel.⁷

Patients rate VersaFoam-based formulations favorably, showing high rates of satisfaction with therapy. Of note, when patients rated their experience with this vehicle, they were blinded to their status as active treatment or control. This suggests that patient preference for the foam vehicles is independent of therapeutic outcome.⁸

Every new vehicle formulation comes to market with the promise of a clinical or practical benefit, and it is incumbent upon the prescriber to understand and assess the value proposition of each specific formulation. In the case of VersaFoam technology, clinical evidence, standardized assessments of subject satisfaction, and, indeed, the aggregate of patient and clinician experience over the past several years confirms that this technology enhances efficacy, supports adherence, and influences patient satisfaction.

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