

Solaraze® - Patient Information

Solaraze® cream is effective at treating early and superficial changes in the skin caused by the sundamage. It works by destroying unstable skin cells and makes the immune system repair the damaged skin. It contains a non-steroidal anti-inflammatory called Diclofenac, and another topical ingredient called hyaluronic acid (which helps tissue penetration of the drug into active sites).

We generally use Solaraze® to treat persistent solar keratoses (>10 lesions). Solar keratoses are generally small red scaly lesions that irritate and appear on areas of skin that have become damaged by ultraviolet light. One of the advantages of using Solaraze® is that it will treat any underlying unstable skin cells as well as the solar keratoses. The downside of this, is that it will make any areas of skin become inflamed during the treatment process.

After application, it is normal to expect the skin lesions to look worse before improvement is seen. Expect some degree of redness, irritation, soreness and crusting for the duration of treatment and a few weeks afterwards. Once treated, the healthy skin should recover back to normal although some patients require repeated treatments at individual sites. It is generally 70-80% effective.

How is treatment applied?

Treatment should ideally be limited to relatively small areas of skin (<10cm) because it can cause quite intense inflammation of any unstable skin cells in the treated areas. For larger treatment areas, consideration rotating the treatment sites and gradually treat all areas over a number of weeks. Aim to treat each individual area for several weeks before moving on to another. It is often advisable to avoid treatment at weekends to let any inflamed skin settle.

Method 1 – Apply cream twice daily for 6-weeks excluding weekends



This method is the most effective but may cause intense inflammation of the treated skin. The Solaraze® gel is applied twice daily to the affected areas. Expect some mild redness, swelling and crusting as the treatment progresses. Do not apply at the weekends to allow the skin to recover. Wash the skin as normal during treatment and apply moisturisers as necessary. Occasionally, your GP may need to prescribe a topical steroid-antibiotic cream called Fucibet® to settle down the skin reaction if it is severe.

Do not be concerned if very little reaction develops. Some patients still respond to the treatment despite not experiencing much inflammation.

Method 2 – Apply cream once daily for 3-weeks



This method is more suitable for the treatment of smaller areas of sun-damaged skin or individual solar keratosis. Apply the Solaraze® in short 3-week bursts to any affected skin lesions. Consider once or twice daily application. If the skin reaction becomes severe, discontinue for a few days or refrain from treatment at the weekends. See your GP or ask for an appointment if the reaction is very severe. It can be helped by the application of a topical steroid/antibiotic cream called Fucibet®

How many times can I use Solaraze®?

Many individuals use Solaraze® intermittently to treat any sun-damage and there is no maximum limit to the number of times that treatment can be used. Your GP can always issue a repeat prescription of the medication.