

BASIC GUIDANCE AND ROLE OF COMMUNITY PHARMACISTS IN MANAGING CANCER TREATMENT INDUCED SKIN REACTIONS

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OBJECTIVES

To develop a practical care algorithm outlining the role of community pharmacists the management of skin reactions induced by cancer treatments, informed by a multinational survey evaluating current pharmacist practices, a review of the literature, and insights from a global FIP expert board.

BACKGROUND

Skin reactions are among the most frequent adverse events (AE) associated with cancer treatments and can negatively affect quality of life, lead to dose reductions, and cause treatment discontinuation.¹ These AE primarily result from alterations in skin barrier function, inflammation, immune responses, and phototoxicity.² Maintaining skin barrier integrity and ensuring adequate photoprotection may help prevent and manage cutaneous AEs, thereby optimizing treatment outcomes.

Eighty percent of patients undergoing cancer treatments will present skin AE; up to 50% of patients presenting skin reactions will interrupt their treatment.

Pharmacists are well positioned to counsel patients receiving long term therapies about potential skin reactions, supporting adherence by reducing AEs and addressing unrealistic expectations.³ Pharmacist-led interventions that provide skin care guidance, assess and manage ongoing skin reactions have been shown to reduce their incidence.⁴⁻⁵

METHODS

A literature review on the pharmacist’s role in dermatological care was conducted in December 2025 using PubMed and AI-assisted research tools. Current guidelines were also identified and reviewed.

An online survey was conducted among FIP members in March–April 2026 to assess current practices, knowledge, and perceived barriers to greater pharmacist involvement. A structured online questionnaire was distributed by FIP, and 142 completed responses from 51 countries were included in the final analysis.

Based on the review and survey findings, an expert FIP panel of 13 pharmacists from five continents recommended developing practical guidance on cancer treatment-induced skin reactions and other skin conditions to enhance pharmacists’ skills and support pharmacy practice. An algorithm illustrating the pharmacist’s role across the patient journey was developed as basic guidance.

RESULTS & DISCUSSION

The survey and insight board indicate that pharmacists are more confident managing common dermatological conditions than complex or higher-risk presentations, highlighting the need for practical training and clinical guidance. They also point to a strong interest in expanding pharmacists’ role in supporting patients with cancer treatment-related skin reactions, particularly through enhanced education and support tools.

Management of skin reactions should begin with proactive essential skin care at the start of cancer therapy. When appropriate, pharmacists may also suggest camouflage options, such as makeup for sensitive skin.²

Open communication between community pharmacists and patients further supports prevention and monitoring of skin AEs.

ESSENTIAL SKIN CARE ADVICE DURING CANCER THERAPY:²

3-STEP STARTER KIT FOR A HEALTHY SKIN BARRIER:

- Gentle cleanser (pH ~5).
- Moisturizer (eg, emollients plus) that support the skin microbiome and contain shea butter, niacinamide, and/or ceramides.
- Photoprotection
- Avoid products containing allergens or irritants.

PHOTOPROTECTION MEASURES:²

- Minimize sun exposure by wearing protective clothing, sunglasses, and hats; avoid direct sun at mid-day.
- Sunscreen with UV broad spectrum UVA/UVB filters on all sun exposed areas (teaspoon rule, reapplication every 2h, use indoors near windows).



Patients with darker phototypes are at higher risk of pigmentation changes!

PATIENT INITIATING CANCER THERAPY

PROACTIVE PREVENTION

- Essential skincare
- Photoprotection measure
- Collect patient history

NO

SKIN REACTION?

YES

GRADE 1-2¹ MONITOR WEEKLY

- Papules/pustules covering 10%-30% of body surface area, with pruritus or tenderness.
- Psychosocial impact
- Limiting instrumental activity of daily living

GRADE ≥ 3¹ REFER TO DERMATOLOGIST

- Papules/pustules covering >30% of body surface area, with pruritus or tenderness.
- Limiting self-care activities of daily living.
- Presence of local superinfection.

RESOLUTION/POST-TREATMENT

Continue essential skin care

CONCLUSION

Community pharmacists can play an important role in the prevention and management of cancer treatment-related skin reactions through patient education, dermocosmetic recommendations, photoprotection counselling, monitoring, and referral. Pharmacist-led interventions for the management of skin reactions induced by cancer treatments in community pharmacies can improve adherence, quality of life, and clinical outcomes, and their implementation should be expanded globally.

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