PATIENT PARTNERS IN NSCLC: Managing Skin Toxicities Associated With EGFR Inhibitors

Patients with non-small cell lung cancer who are being treated with EGFR inhibitors should be aware of potential skin toxicities because these are common side effects.

COMMON SKIN REACTIONS

1. Rash:

- Typically appears on the face, chest, back, and scalp
- Often resembles acne but is not the same and should not be treated with typical acne medications
- Can range from mild redness to more severe pustules

2. Dry Skin (Xerosis):

• Skin may become excessively dry, flaky, or itchy

3. Itchy Skin (Pruritus):

• Can occur with or without a visible rash and may be bothersome

4. Nail Infection (Paronychia):



WHEN TO CALL YOUR HEALTHCARE PROVIDER

Patients should seek medical advice if:

- The rash becomes severe or spreads significantly
- Symptoms interfere with daily life (eg, intense itching, painful nails)
- Signs of infection appear, such as redness, swelling, warmth, or discharge

Emotional and Social Impact

 Skin side effects may affect self-esteem or social interactions. Patients should discuss these concerns with their healthcare team to access supportive care or counseling if needed

Participate in open communication with your oncology care team to address these side effects promptly and ensure treatment adherence, a better quality of life, and improved patient outcomes.

WHY THESE REACTIONS OCCUR

EGFR inhibitors target epidermal growth factor receptors, which are present in both cancer cells and healthy skin cells. Blocking these receptors can interfere with normal skin renewal, leading to side effects.

MANAGEMENT AND PREVENTION

1. Skin Care Routine:

- Use gentle, fragrance-free cleansers
- Apply thick, hydrating creams or ointments daily
- Avoid harsh scrubbing or exfoliation

2. Sun Protection:

 Always use sunscreen (SPF 30 or higher) and wear protective clothing because the skin may become more sensitive to sunlight

3. Treatment of Rash:

- Mild: Use over-the-counter hydrocortisone creams or moisturizers
- Moderate to severe: A healthcare provider may prescribe topical or oral antibiotics (like doxycycline) or corticosteroids

4. Managing Dryness and Cracks:

- Use emollients and barrier creams on dry areas
- For fissures, protective dressings or liquid bandages may help

5. Nail Care:

- Keep nails short and clean
- Soak hands/feet in warm water with antiseptic solutions if paronychia develops





