



Frequently Used Compounds

PODIATRY

<u>Problem</u>	<u>Options</u>
Warts	<ul style="list-style-type: none"> ▪ Salicylic acid 20%/5-fluorouracil 5% in DMSO ▪ Salicylic acid 40% or greater ointment ▪ Deoxy-d-glucose ▪ Cimetidine ▪ Trichloroacetic acid ▪ Cantharidin & Cantharidin Plus
Nail remover, non-surgical	40% Urea ointment
Minor surgery, lacerations	Benzocaine, tetracaine, and lidocaine PLO
Diabetic neuropathy	Combination of any of the following neuropathic agents in PLO: <ul style="list-style-type: none"> ▪ Amitriptyline 2% - 5% ▪ Clonidine 0.1% - 0.2% ▪ Gabapentin 6% ▪ Baclofen 2% ▪ Ketamine 1% - 10% ▪ Lidocaine 2% - 10% ▪ Ketoprofen 5% - 10%
Toenail fungus, oral medication not tolerated and/or too expensive	<ul style="list-style-type: none"> ▪ Any azole antifungal (e.g., ketoconazole) in DMSO solution enhanced with 2% ibuprofen ▪ Terbinafine 2% in DMSO solution
Heel spur	Ketoprofen 10% in PLO
Hyperhidrosis of feet	Any of the following as a topical solution, gel or roll-on: <ul style="list-style-type: none"> ▪ Aluminum chlorohydrate ▪ Atropine or scopolamine ▪ Formaldehyde solution ▪ Methenamine ▪ Glycopyrrolate topical
Excessive foot odor	Any of the following alone or in combination as a topical absorbent powder: <ul style="list-style-type: none"> ▪ Antifungal agent ▪ Chlorhexadine ▪ Triclosan ▪ Tea tree oil
Ulceration or wound	Polyox bandage or topical gel containing combination of the following: <ul style="list-style-type: none"> ▪ Misoprostol 0.0024% ▪ Phenytoin 5% ▪ Aloe Vera 0.2%-0.5% ▪ Gentamycin or metronidazole for bacterial infection ▪ Nifedipine 2% (calcium channel blocker) to increase blood circulation/reduce scarring ▪ Pentoxifylline 5% as adjunct therapy to aid penetration of an active ingredient
Acute or chronic pain due to inflammation or trauma	NSAID (e.g., ibuprofen or ketoprofen) 2%-10% in PLO when inflammation or bone pain is present

** Does not represent full compounding capabilities. Custom and physician-specific formulations are encouraged.*