

Table 1 Factors determining choice of active therapy from six main alternatives. The scoring is based on the authors' evaluation of efficacy, ease of use, morbidity and cost-benefit

| | Cryosurgery | 5-FU | Diclofenac | Imiquimod ^a | Curettage | PDT | Comments |
|---|-------------|------|------------|------------------------|-----------|------|---|
| Main characteristic of AKs | | | | | | | |
| Low number of AKs | | | .. | .. | . | . | |
| High number of AKs | ... | | ... | ... | . | ... | |
| Thin AKs | ... | | ... | ... | . | .. | Thin lesions may not always require treatment |
| Hypertrophic AKs | .. | . | . | . | | . | Histology may be required. Formal excision may be preferred |
| Isolated lesions failing to respond to other therapies | .. | . | . | . | | . | Histology may be required. Formal excision may be preferred |
| Confluent recalcitrant AKs, failing other treatments | ... | ... | . | ... | . | ... | Certain lesions within a resistant field may require histological assessment |
| Location | | | | | | | |
| Scalp, ears, nose, cheeks, forehead, perioral | | | ... | | ... | ... | |
| Periorbital | ... | . | . | . | ... | ... | Topical therapies can be difficult to use near mouth and eyes |
| Confluent scalp | ... | | ... | | . | | Pretreatment with 5% salicylic acid ointment may improve outcome |
| Below the knee | ... | . | .. | . | | | Poor healing is a particular concern at this site. All modalities can lead to ulceration. Treatment may be combined with advice on elevation and compression bandaging where possible |
| Back of hands | | | .. | . | ... | ... | Courses of topical therapy may need to be extended and pretreatment with 5% salicylic acid ointment may improve outcome |
| Characteristics of patient (rating may be considered in context of clinical need indicated by characteristic of AK and location) | | | | | | | |
| Medically | ... | .. | ... | . | . | ... | Morbidity of treatment |

| | Cryosurgery | 5-FU | Diclofenac | Imiquimod ^a | Curettage | PDT | Comments |
|--|-------------|------|------------|------------------------|-----------|-----|---|
| dependent or senile | | | | | | | may dictate choice of modality |
| Self-reliant | ••• | •••• | ••• | •••• | • | • | 5-FU may be repeated at sites of relapse or new lesions in primary care |
| One-off treatment | •••• | •••• | • | •••• | ••• | ••• | |
| Lives far from hospital | ••• | •••• | ••• | •••• | – | – | May favour treatment that allows monitoring in primary care |
| Part of continuous management plan | •••• | •••• | ••• | • | • | ••• | |
| <p>5-FU, 5-fluorouracil; PDT, photodynamic therapy; AKs, actinic keratoses; ••••, good treatment; •••, fair treatment, ••, can be used depending on circumstances; •, rarely used in these circumstances. ^aImiquimod is not currently licensed for use in the treatment of AKs.</p> | | | | | | | |