

eczema

Eczema is a very common skin problem. Children with eczema have red, dry, itchy patches on the skin that is caused by inflammation. Itching may be severe and constant. With frequent scratching, the skin may develop blisters, oozing, crusting, or sores from infection. Sometimes, if the child scratches for many weeks to months, the skin may become very rough, leathery, and darker in color. Eczema is not contagious.

Atopic dermatitis is the most common form of eczema and is chronic (long lasting). About 13% of children in the US have atopic dermatitis. Children with this have a form of sensitive skin. Their skin may be more easily irritated by:

- Sweating
- Heat
- Rough clothing
- Some detergents, soaps and cleansers

Children with atopic dermatitis may:

- Also have allergies to foods, pets or other animals, dust mites, tree pollens, and grasses
- Develop sensitivities to chemicals in their moisturizers, other skincare products, clothing or medications
- Also have asthma

In infants, atopic dermatitis usually affects the face, scalp, arms, and legs. In other children, atopic dermatitis may involve only the insides of the elbows and back of the knees. Some children with severe atopic dermatitis may have it on their entire body.

There is no cure for atopic dermatitis. It can usually be controlled with good skin care and attention to triggers in the environment. Most children improve by the time they become adolescents.

bathing

For children with environmental triggers such as pollen and animal dander, bathing after contact with known triggers may be helpful.

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When bathing:

- Use a gentle, non-soap cleanser such as Dove® Sensitive Skin bar soap or Cetaphil® cleanser.
- Limit time in the tub/shower to 10-15 minutes
- Do not use a washcloth, hot water or bubble bath
- Pat skin dry with towel. Do not rub.
- Apply topical medications or moisturizers as instructed, immediately after bathing while the skin is still damp.

topical (skin) medicines

Your doctor may prescribe topical steroids or other creams or ointments to treat your child's eczema. Apply a thin film of medicine to affected areas up to two times per day, as needed to keep the eczema under control. You may not need to use the medicine every day. **ALWAYS apply the topical medication before any moisturizer. Try to wait at least 15-20 minutes for medicine to completely soak into the skin before applying any moisturizer. The moisturizer will then seal in the medicine.**

If your child's eczema flares, you may need to use a stronger topical steroid for some time. Use these steroids twice a day, or as instructed by your doctor on areas that have flared. These will be in place of your everyday steroids. Call the office if it doesn't get better after seven days.

DO NOT overuse or abuse the topical steroids. Doing so can harm your child's skin.

moisturizers

In general, ointments or creams are preferred over lotions. Do not use a moisturizer that comes in a pump-bottle, as these are usually lotions. Some children find ointments such as Vaseline® and Aquaphor® too greasy to use in the summertime. They may find it makes them uncomfortable when they sweat. Your doctor may suggest something else. Or, you may find a different product that your child likes.

Listed below are some brands that your doctor may recommend:

- Vaseline® or petroleum jelly (in a tube or jar)
- Aquaphor®
- Eucerin®
- Cetaphil (including Restoraderm)
- CeraVe®
- Vanicream®

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Even when your child is not showing signs of active eczema, you should continue to use the moisturizer at least twice a day to help prevent flare-ups.

antihistamines

Antihistamines are a type of allergy medicine. They can also be used to decrease itching. They are most helpful when given before bedtime (they can make your child sleepy). Antihistamines include hydroxyzine (Atarax) and diphenhydramine (Benadryl).

Some children with environmental allergies and allergic rhinitis (itchy watery eyes and stuffy nose) may also need to take a daily, non-sedating antihistamine such as cetirizine (Zyrtec), loratadine (Claritin), or fexofenadine (Allegra). Your child can take these in the morning or evening to control their allergy symptoms.

other therapies

Your child's atopic dermatitis should get better with these treatments:

- Attention to good skin care
- Avoiding known triggers or allergies
- Using topical medications

If not, they may need an oral immunosuppressive medication. Oral corticosteroids, such as prednisone, are NOT recommended for the treatment of atopic dermatitis. They often result in a flare of the eczema after they are stopped. They also have many potential side effects such as high blood pressure, weight gain and poor growth.

environmental triggers

Avoid foods or environmental triggers such as dog or cat dander, dust mites, and tree pollens that may make your child's eczema worse. Here are some helpful hints:

- Keep skin covered with cotton clothing (long sleeves and pants)
- Keep your home at a comfortable indoor temperature (sweating can lead to itching)
- Avoid harsh, itchy materials such as wool and non-breathable fabrics such as polyester
- Avoid fuzzy toys, stuffed animals and pets
- When humidity is low, a vaporizer or humidifier may be helpful
- Minimize exposure to extreme heat and sweating

skin infections

Skin infections are common in children with eczema. If your child has a skin infection, your doctor may temporarily change their skin care routine. They may also prescribe either a topical or an oral antibiotic.

To use topical antibiotics, such as mupirocin (Bactroban):

- Apply twice daily to any open or crusted areas on the skin for several days until these areas heal.
- Continue to apply the topical medications and moisturizers to these areas.
- other instructions

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Your doctor may also recommend that you do one of the following:

- Wet wraps
- Bleach baths (add ¼ cup of Clorox or other laundry bleach in the bathtub one to two times per week)

follow up visits

Follow up visits are very important. The doctors will examine your child's skin and may change the medicines being used. It is important to follow the doctor's instructions and keep all follow up appointments. Please call our office if you have any questions or concerns.

Information adapted from National Eczema Association. This handout is for general information only and should not be considered complete. For more specific information, please ask your child's health care provider.

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