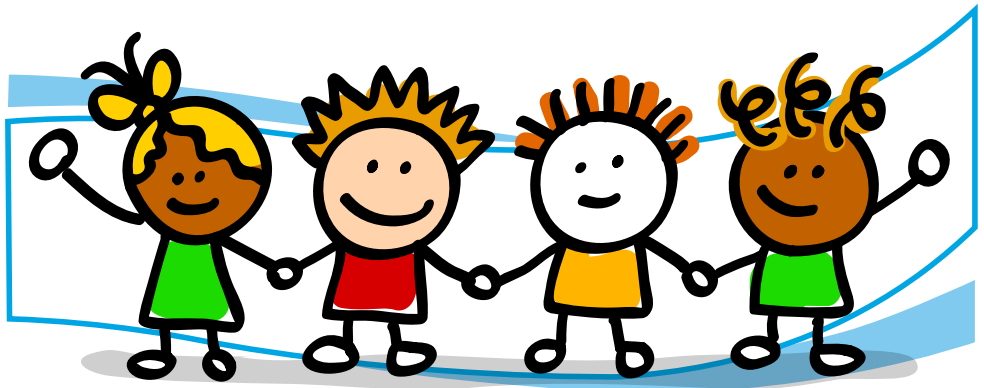


# Managing Eczema

## Information for families



Name: .....

Date: .....

Follow-up appointment: .....



## What is eczema?

Eczema is a condition that causes the skin to be very dry and very itchy. No one knows the exact cause of eczema but it is likely that the skin is abnormally leaky, allowing water to escape out of it leading to dryness and allowing things in the environment (for example house dust mite droppings, grass, foods, smoke and fragrance) to 'get in' and cause allergy or irritation. Other 'triggers' include sweating and heat.

Eczema is not infectious and it cannot pass from person to person.

## Bathing

Bath or shower your child for 5-10 minutes once a day if you can. This will clean the skin and help reduce the risk of skin infections. Longer baths may cause the skin to dry out. Avoid hot water which triggers scratching and can lead to stinging. Add bath oil to the bath water and use a soap substitute (emollient) to wash with. Do not use any product that lathers, this includes soap, shower gels or bubble bath, as these dry the skin. Use shampoo as little as possible as it too dries the skin. Young children should have their hair washed with the soap substitute. If using shampoo, use a gentle un-fragranced variety and wash hair at the end of bathing then rinse off and take your child immediately out of the bath. Older children can have their hair washed over the bath, rather than in it, to avoid shampoo contact with the skin.

Broken skin may sting when in contact with water. Only undress your child when the bath is ready, because children with eczema tend to scratch when undressed and the resultant broken skin can sting. Applying moisturiser before they get into the bath or shower may help.

After the bath or shower, pat the skin dry (do not rub the skin as this can cause it to itch) then apply moisturiser or emollient.

When you get out of the bath or shower pat your skin dry, do not rub the skin as this can cause it to itch. Always put your moisturiser on as soon as you have dried after your bath or shower.

## Emollients and Moisturisers

Emollients are very important in the treatment of eczema: they help keep moisture in the skin and stop irritants getting in to make it itchy. It is best to apply at least 2-3 times a day. You may need to apply it more often if your child's skin is very dry, sometimes as much as 4-5 times a day.

The emollient helps to cool and soothe the skin and can help stop it itching. Apply using downward strokes and do not rub in, as this irritates the hair follicles.

### Important!

When using tubs of ointment always transfer the amount, you think you will need, onto a saucer or piece of kitchen roll with a spoon. Apply from this then throw out any ointment remaining on the saucer when finished. Never put your hand into the tub then onto the skin and back again as bugs from the skin could grow and cause infections on the skin.

## Steroids

While emollients help to treat dryness and you apply all over, topical (cortico-) steroids help to control redness and itching and you should only apply to areas of active eczema.

Different steroids have different strengths eg

**Weak:** 1% Hydrocortisone & Daktacort®

**Moderate:** Trimovate® & Eumovate®(clobetasone butyrate), Alclometasone, (Modrasone®)

**Strong:** Mometasone (Elocon®), Fluocinolone (Synalar®) and betamethasone valerate (Betnovate®)

Diluted steroid is weaker (eg Synalar 1 in 4 is moderate not potent). In general, mild steroids are used for eczema on the face (sometimes a short 3-5 day spell of moderate steroid can be used for flares only if directed by your doctor) and moderate or strong steroid for areas on the body, depending on the severity of the eczema.

Apply the topical steroid thinly to red areas only, preferably 30 minutes (but at least 10 minutes) after the moisturiser. The amount of cream that covers the fingertip to the first crease should cover an area equivalent to two handprints.



It is better to treat a flare quickly than wait until the skin becomes very inflamed before applying the steroid. Scratching will, in turn produce more damage to the skin and can introduce infection by breaking the skin.

Only apply the steroid once daily. Very occasionally, we may ask you to use it twice daily but only for short periods. If the redness or itching settles sooner than the period of time the doctor has asked you to use the steroid, use it for 2 days after the redness has settled.

In general, you should only use daily steroids for a short spell to settle a flare of eczema; this may be a week on the face and up to 2 weeks on the body. If the eczema flares more than twice each month, apply steroid twice weekly to help prevent flares as well as treating flares. There is no evidence of long-term harmful effects when you use the appropriate strength of topical steroid in this way. Areas of the body where we need to be cautious with the strength of steroid used are sites on the body where the skin is naturally thinner, such as the face, skin creases, armpit and groin area. If eczema in these sites is difficult to control with the appropriate topical steroid, we may ask you to use Tacrolimus.

## Tacrolimus

Tacrolimus is a type of medicine called an immunomodulator, that is controls the immune system. When applied to the skin it decreases skin inflammation and is a useful treatment for controlling very chronic eczema that fails to settle with a safe amount of topical steroid (as above). We use this only for eczema on sites where the skin is naturally thinner. The skin does not easily absorb this, so it does not tend to work well on thicker skin. It is slower to work than topical steroids, so not as useful for flares and in addition, if applied to very inflamed or flared eczema, it can cause stinging. We may recommend that you use topical steroid for a few days before you use this to reduce the inflammation more quickly and reduce the chance of stinging.

## Bandages and Garments

In children with more severe eczema we may suggest tubular bandages or garments that can be put on over creams at night, to help stop damage to the skin caused by scratching while sleeping. Covering the creams also helps them work better. Sometimes we will prescribe another ointment or paste to apply on top of the steroid and under the bandages or garments. This ointment helps to soothe and cool the skin and you can use it all over.

These garments are ready made and are available as a long sleeved vest, tights and leggings, while you have to cut the tubular bandages to size. The dermatology nurse will show you how to apply the treatments and bandages.

## Helpful Hints

Emollient and steroid creams and, to a lesser extent ointments, can sting on very inflamed skin. Applying emollient ointment first may help and try steroid ointment rather than cream. Stinging should stop after a few minutes and will lessen over the next few days and on successive days, stinging will reduce. Keep fingernails short to reduce damage to the skin from scratching.

If your child goes swimming, apply moisturiser before they get into the pool to reduce irritation of the skin by the chlorine and long spells in water. You should also avoid fragranced products.

## Clothing

It is best to wear soft cotton or fleece; avoid wool, polyester, nylon or acrylic fabrics, as the fibres can irritate the skin.

- Remove clothes labels that rub against the skin.
- Wash new clothes before wearing them to soften them.
- Use a non- biological washing powder or liquid. If your child has severe eczema, it may be worth trying a non-fragranced washing powder and fabric softener.

## Temperature

- Children with eczema are very sensitive to changes in temperature and this can flare when it is warm inside in winter, or outside in summer.
- Put on layers of clothes rather than one thick item and then if your child gets warm you can take off a layer.
- Make sure your house is not too warm (ideally 16-18°C, bedrooms should be slightly cooler) as overheating can cause sweating, which can lead to itching and scratching.
- Children overheat easily in bed; pyjamas should be 100% cotton. Consider layers in bed too with a low summer tog (4) duvet (or infant sleeping bag) all year round and in winter add a fleece blanket or 'bedspread' that can be pulled up or pushed down if your child feels warm or cool.

## The Scratching Struggle

- Eczema is a very itchy condition, but scratching makes both the eczema and the itch worse; the more you scratch the more you itch.
- Scratching damages the skin and can lead to infection because, when the skin gets broken, bugs can get in.
- Encourage your child to try to rub or pinch the skin rather than scratching it. Sometimes scratching becomes a habit or something you do when you are bored. If you find your child scratching at these times, try to distract them or give them something to do with their hands to help keep their mind off scratching. If your child is itchy, put some moisturiser on, as this will help. Carry some around with you in a small tube or tub.
- Keep fingernails short and clean so that if your child does scratch they do less damage to the skin.

## Infections

- Children with eczema often get skin infections. The skin is a barrier to keep bugs out, but if it is scratched and broken, bugs can get in and cause infection.
- If your child is unwell, their eczema can flare as this puts stress on the body. If you notice any weeping or crusted areas on your child's skin or any small spots that are spreading, your child might have an infection on their skin. Use the cream given specifically for infected eczema as directed. If it worsens, you should contact your doctor.
- Children with eczema should not have close physical contact with anyone who has an active cold sore. Tiny blisters on the skin or tiny circular broken areas can be a sign of infection of the skin by the cold sore virus and you should contact your doctor.



## Bleach baths

- Mild bleach and water solution helps decrease bacteria on the skin, reducing skin infections. Use  $\frac{1}{2}$  a cup of household bleach to a full bathtub of water;  $\frac{1}{4}$  a cup to a half tub, then soak the child for up to 10 minutes and rinse off; this is best done 2-3 times a week.

## Sunscreen

- Sunscreen contains a range of chemicals to filter out the sun's rays, prevent breakdown of the sunscreen (preservatives) and some contain fragrance. Any of these can cause irritation and it is common for children with eczema to develop irritant reactions to many different sunscreens, with stinging and redness occurring soon after application.
- For children with eczema, always use a non-fragranced sunscreen. Those labelled as being for toddlers or for sensitive skin tend to use less sunscreen chemical and are therefore less likely to irritate. If there is still irritation with these, try a reflective sunscreen that contains no sunscreen chemical but uses particles (zinc oxide or titanium dioxide) to reflect the sun's rays. In the morning, apply your child's emollient at least 30 minutes before the sunscreen.
- Use a sun-suit that covers the elbow and knee flexures. Either shop around for one with longer sleeves or buy a bigger size, so you do not have to apply sunscreen to these areas that are particularly prone to irritation.

## House Dust Mite

- Older children can become sensitised to the droppings of house dust mite (HDM), these live off flakes of human skin so may be particularly abundant in the room of a child with dry flaky skin. Children who also suffer from nasal congestion and have eczema that is worse on the face and neck may be flaring because of HDM.
- Wash bedclothes regularly in a 60°C wash and freeze pillows and teddies to kill the HDM. Try to limit soft toys and lift carpets, as these can harbour HDM. Wooden or vinyl flooring should then be damp mopped frequently and surfaces damp dusted to remove dust.



# My Treatment Plan

My bath oil is: .....

My moisturiser is (apply all over): .....  
.....

My steroid creams are (only to red areas)	How many times a day?	W
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.....	.....	.....
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Other creams:  
.....  
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My soap substitute is: .....

..... How many times each day? .....

..... How many times each day? .....

here to?

For how long?

Then (e.g. how often or switch to)

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