

## Eczema

### What is it?

Eczema (ex-ih-muh) is a common skin condition. It is also called atopic dermatitis (ay-top-ick derm-uh-tie-tis). It seems to run in families with asthma, hay fever and certain allergies. Eczema affects almost one in five children.

### What does it look like?

Eczema causes your child's skin to be red, dry, scaly and itchy. Most times, in babies and small children, it is on the face and is not on the diaper folds or underarm area. Adults and teens most often get redness, dryness and thickening of the skin on the hands, neck and chest, inner elbows, backs of knees and ankles. The itching can be so intense that many patients, especially children, scratch or rub themselves until they bleed. It is common to lose sleep due to itching.

### What causes it?

No one knows what causes eczema. It is probably best to think of it as very sensitive skin that dries out too quickly and gets itchy from touching many things. People with eczema feel itchy easier than other people do. Many things can trigger itching or make it worse. Scratching damages the skin and will make the itching worse. The skin tries to protect itself by thickening, but this just makes the skin drier and itchier.

### Can it be cured?

Most people with eczema will have good weeks and bad weeks. They may get worse in the summer, when it is hot and they sweat, or in the winter, when the air inside the house dries out the skin. Most children grow out of eczema by the time they start school, but some children keep having bad spells, even as adults.

### Is it infectious?

No. You cannot catch eczema from someone or give it to others by touching them. It is not infectious, but it can become infected, just like a scraped knee can become infected. Eczema may look different than usual when it's infected. If your dermatologist thinks it has become infected, antibiotics may help.

### Does it turn into cancer?

No. It does not cause skin cancer and it is not dangerous.

### Does stress cause it?

Stress does not cause eczema, but it can make it worse.

### Does it leave scars?

No. Unless it becomes deeply infected, eczema will not leave any permanent skin marks or scars. Skin color changes should even out over several months once the rash is gone, although this may take longer in people with darker skin.

### Are there any jobs people with eczema should avoid?

Yes, any job that involves work with harsh detergents, irritating solutions or dusty areas (like nursing, auto mechanics, hairdressing or factory work). Jobs where frequent wetting of the skin is required are also hard for people with eczema.

### What can I expect from my child's treatment?

The goal of treatment is to make your child more comfortable. The entire rash may not go away. Many parents feel guilty or that they are bad parents because they cannot get the rash to go away. Other adults may make rude comments about your child needing a bath.

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### What can I expect from my child's treatment? continued

Or they might not let their children play with your child because they are afraid that the rash is contagious. Never forget — you are a good parent. Eczema can be very difficult and frustrating to treat.

### How often should my child bathe?

Many doctors suggest taking baths only once or twice a week, because the bath washes off the skin's natural oils. If your child rubs on a moisturizer as soon as the bath is over, while his skin is still wet, he may take a lukewarm bath or shower one or two times each day. Rubbing the moisturizer onto his wet skin will help trap moisture.

### How is eczema treated?

Use only the creams or ointments your doctor orders or suggests for your child. Thicker moisturizers, like ointments and creams, often work better than lotions or products that can be pumped or poured. You may use **Vaseline petroleum jelly, Aquaphor, lard, Eucerin cream or Cetaphil cream**. Do not use Vaseline Intensive Care, Jergens, Avon or other moisturizers that are perfumed or scented. These, and many other creams and lotions, contain preservatives that can make the itching worse.

- Practice good skin care by using creams and ointments, and avoid things that make the problem worse.
- Tell your child to stop scratching. Scratching makes the problem worse. Instead of scratching, wet skin with a cool cloth or ice cube, and gently rub some cream on the itch. If the itch happens when you cannot do these things, try patting the itchy spot once or twice, or rub it gently or even pinch it gently.
- Steroids (cortisone or hydrocortisone creams) are often used to treat the rash. Over-the-counter hydrocortisone creams are weak and will only help milder eczema on the face. Your doctor will prescribe stronger steroid ointments if needed. The side effects parents often hear about with steroids are usually only a problem if used every day for months to years.

- **The medicines are safe if you follow the instructions that we give you:**
  - Low-potency steroids for face, neck, groin, armpits: **Desonide, Aclovate, hydrocortisone 1% cream, Synalar solution**
  - Medium-potency steroids for body, arms, legs, scalp: **Elocon (mometasone), Triamcinolone, DermaSmoothe, Desoximetasone**
  - High-potency steroids for hands, feet: **Diprolene (betamethasone), Cordran Tape, Clobetasol**
- Medicines such as **Atarax** (hydroxyzine) or over-the-counter **Benadryl** may help control the itch, and they can help your child sleep if taken in the evening and/or at bedtime. However, Atarax or Benadryl can sometimes make children hyperactive.
- If the eczema is very bad, you may want to practice **wet pajama therapy**:
  - Have your child soak in a tub of cool or lukewarm water for 20 minutes.
  - Immediately rub on medicines or moisturizer.
  - Dip some cotton pajamas in lukewarm water, and put them on over your child's wet, greasy skin.
  - Then, to stay warm, wrap your child in a blanket or have her put on a layer of exercise clothes. This should soothe and hydrate the skin.
  - After 30 to 60 minutes, strip off the wet clothes, and gently wipe off excess cream or water. Your child can do this several times a day if needed.

#### FOR MORE INFORMATION

- Division of Dermatology, (206) 987-2158
- Your Child's Health Care Provider

*Children's will make this information available in alternate formats upon request. Please call Marketing Communications at (206) 987-5205.*

*This handout has been reviewed by clinical staff at Children's Hospital. However, your child's needs are unique. Before you act or rely upon this information, please talk with your child's health care provider.*