



Eczema Advice Sheet

Information for patients, parents and carers

Introduction

Eczema (atopic dermatitis) is an inflammatory skin condition with symptoms that include dryness, itching and reddened skin patches. It is an autoimmune condition that often runs in families. It is usually **not** caused by food allergies. Eczema may go away by itself, but there is no immediate cure and the aim of our treatment is to get better control of the eczema using topical (applied onto skin) treatments.

We hope the following will help you use these treatments effectively and with more confidence.


Emollients (moisturisers)

Emollients are used to moisturise the skin and help it to do its main job which is to act as a barrier, keeping water in and infections out. Emollients are the mainstay of treating eczema well. They work best when used regularly and long-term. They are very safe to use often and liberally, typically once or twice daily. Generally speaking, creams are better when skin is weeping or oozing, whereas ointments are better when skin is dry and flaky.

Tips:

- Remember to wash hands before use
- When using a tub (not a pump dispenser) use a spoon to take the emollient out to reduce possibility of infection
- Often best applied after bathing to slightly wet skin (typically after being lightly patted down with a towel, but not when completely dry)
- Should be applied in the direction of hair growth (downward), avoiding rubbing moisturiser back and forth
- Expect to use 250g-500g a week
- If you do not like the emollient you have been prescribed, try another
- Regular treatment can be arranged with school/childcare
- If you regularly stay at a relative's house, keep a supply of your treatments there too.



 **Fire risk** - ointments containing white soft paraffin and emulsifying ointment are easily ignited with a naked flame or cigarette.



Soap substitutes

Do not use soaps, shower gels, bubble baths, shampoos, or anything that makes bubbles. These can strip the skin of essential substances like oil, drying out the skin. Washing too often (more than once a day) can make the skin dry out further.

Soap substitutes do not do this and are much better for children with sensitive skin.

Steroids

These treat inflammation and reduce redness and itch. They are the most effective treatments for eczema and there are many different strengths. They are very safe treatments when used correctly.

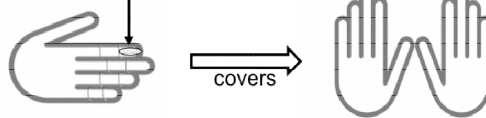
It is best to apply topical steroids either:

- By using the finger-tip method (more precise) or
- Just enough so that the area affected is glistening with no gaps (quicker)

They are best applied either just after bathing or approximately 30-45 minutes after a moisturiser. We find that often people use too little steroid rather than too much.

Finger-tip unit: squeeze ointment from the tube **along** front the tip of your finger to the first joint. One finger-tip unit will cover an area the size of **two** adult hands.

One fingertip unit of cream



Potency of steroid ointment or cream:

Very potent

e.g. clobetasol propionate

Potent

e.g. betamethasone valerate

Moderate

e.g. clobetasone butyrate

Mild

e.g. hydrocortisone

Calcineurin inhibitors

This is an option we sometimes try for children who need long term steroids. Calcineurin inhibitors tend to be very safe, but often sting in the first week. They can be used daily for much longer periods of time. They are not as powerful as the strongest steroids during severe flares. There is no proven risk of long-term harm, but theoretically there is the possibility of increased risk of skin cancer so sunscreen is recommended.

There are 2 strengths:

- Weaker Tacrolimus (Protopic) 0.03%,
Pimecrolimus (Elidel) 1%
- Stronger Tacrolimus (Protopic) 0.1%

Anti-histamines

Unfortunately, these usually do not help eczema as the itch is not entirely due to histamine. They do indeed help hay fever, hives, and minor food allergies as these are linked to histamine. For children with eczema, sedating anti-histamines at bedtime are the most effective as they can make your child sleepy.

Useful websites

British Association of Dermatologists: www.bad.org.uk

Patient support organisations

National Eczema Society: <https://eczema.org>

Eczema Outreach: www.eos.org.uk

Eczema Care Online: www.eczemacareonline.org.uk

Anti-bullying websites

Kidscape: www.kidscape.org.uk

Family Lives: www.familylives.org.uk/advice/bullying

Anti-Bullying Alliance: <https://anti-bullyingalliance.org.uk>

