Eczema/Atopic Dermatitis

Eczema, or atopic dermatitis, is a common allergic skin reaction often affecting the face, elbows, hands, and knees. This red, scaly, itchy rash is usually seen in young infants, but can occur later in life in individuals with personal or family histories of other allergic conditions, such as asthma or hay fever. There is no cure for the condition, but individuals can try to prevent and treat the condition when it is symptomatic.

Itching is the hallmark symptom of eczema and can sometimes be very intense. The rash that develops may appear very dry, with flaking skin, or can have small bubble-like lesions that may ooze. Open areas of affected skin may become subsequently infected by bacteria due to scratching. This secondary infection may have honey-colored discharge or crusts, and should be treated with an antibiotic.

Identifying the cause of the itch is essential in relieving the dermatitis. Common triggers include allergens, overheating or sweating, emotional stress, eating certain foods and contact with irritants such as wool, pets, soaps, or other agents.

Prevention and Treatment

Here are some at-home tips for controlling reactions and preventing future ones:

**Contact Dermatitis**
- Avoid the agent that caused the outbreak such as certain foods, oils (i.e. poison ivy), skin products, nickel, and latex
- Wear cotton or cotton-blend clothing
- Calamine lotion
- OTC hydrocortisone cream or ointment

**Atopic Dermatitis (Eczema)**
- Moisturize frequently
  - Moisturizing creams or ointments should be applied to wet skin following every shower or bath and as many other times during the day as possible
  - Recommended products:
    - Eucerin
    - Lubriderm
    - Cetaphil
    - Plain white petroleum (Vaseline)
- Use only mild soaps (i.e. Dove, Purpose, or Basis) or soap substitutes (i.e. Cetaphil)
  - Limit soap to only areas of the body that sweat and/or are visibly dirty
  - Do not scrub with a washcloth, as this removes the natural oil coating that protects our skin
- Avoid long and hot showers, which dry out your skin
- Apply cool, wet dressings to relieve itch
- OTC antihistamines or hydrocortisone cream for itch
  - The most effective antihistamines are first generation, although they tend to cause drowsiness. An example of a first generation antihistamine is *diphenhydramine (generic for Benadryl).*
  - The newer (non-sedating) antihistamines are an alternative. Examples are *Loratadine (Claritin), Fexofenadine (Allegra – prescription required), and *cetirizine (Zyrtec).*
- Avoid sudden changes in temperature or humidity
- Use a room humidifier in the winter months
- Avoid sweating or overheating the skin, which can increase itch
- Reduce stress
- Avoid scratchy materials/clothing
- Be aware of any food that may cause an outbreak and avoid those foods

When moisturizer is not enough, or if a flare-up in the condition occurs, a steroid cream/ointment may need to be prescribed by your health care provider. Steroids reduce inflammation and are typically used episodically for 1 – 2 weeks at a time. If your rash doesn’t improve with the potency prescribed, a stronger steroid may be needed and you should follow-up with your prescribing clinician.

Test Results and Advice Nurse

Please call the nurse for test results and advice: 863-4463

Appointments

Appointments can be made online via the UHS website, by phone or in person. If you are unable to keep your appointment, please call and cancel. Otherwise you will be charged for the visit.

To schedule or cancel appointments call 863-0774 or schedule your appointment online through the UHS website

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