



Atopic Dermatitis

Atopic dermatitis (also known as eczema) is a type of skin condition that leads to dryness, itching and a characteristic rash on the body. The rash is red and the affected skin feels dry or thickened. It typically involves the insides of the elbows, backs of the knees, and the face but can cover most of the body.

Things that affect the severity of atopic dermatitis:

- Extremes of weather: cold weather or excessive humidity; sudden changes in temperature
- Skin irritants: harsh soaps, certain detergents that contain dyes and perfumes, fabric softeners, wool fabrics, industrial chemicals, alcohol containing skin care products
- Allergens: food allergies, pet dander, dust mites
- Skin infections: Staph aureus, molluscum contagiosum, fungus (ringworm or athlete's foot)
- Emotional stress

Treatment of atopic dermatitis:

- Bathe daily: Short (less than 10 minutes) daily baths in warm water (not too hot) work best. Use non-scented moisturizing bars or washes (eg. Dove Beauty Bar or Aveeno body wash works well). Avoid "soaps" as they are too alkaline and harsh on the skin (eg. Ivory soap). Pat dry afterward to leave the skin moist (do not rub).
- Moisturize the skin: Apply a cream or ointment onto the skin 2 to 3 times daily (eg. Eucerin cream, Aquaphor ointment, Cetaphil, petroleum jelly). It's best to apply them to wet skin, immediately after bathing. Lotions and oils are not rich enough and often can dry the skin further.
- Corticosteroids: For moderate to severe cases with flare-ups, your doctor may recommend a topical steroid (eg. hydrocortisone, triamcinolone, aclometasone). Be sure to use them sparingly and apply only a thin layer over the affected (red, scaly) skin for no more than twice a day. Your doctor will tell you when and for how long to use it. Generally it is best to apply the topical steroid on the inflamed skin right after the bath when the skin is still wet. Then apply the moisturizer liberally all over the body.
- Antihistamines: These are often recommended to reduce the itching since the itch itself can induce an eczema flare-up and worsen preexisting flare-ups (eg. Benedryl or hydroxyzine syrups).
- Antibiotics: Topical or oral antibiotics can fight off surface bacterial infections that may accompany flare ups. Your doctor will recommend one if needed.
- Wear the right clothing: Wear soft clothes that "breathe". Avoid wool, nylon or stiff fabrics.
- Environmental control: Especially for allergy-prone kids, keep furry pets outside or at least off beds, rugs and furniture where your child plays. If possible, remove bedroom carpets and wash bed linen frequently in hot water.
- Avoid skin irritants: Use gentle detergents that are dye and perfume-free (eg. Dreft). Do not use fabric softeners on clothing or bed linens. Avoid alcohol based skin care products. Make sure to wash off your child's skin after contact with other chemicals and substances (cleaning products, paint, clay, sand etc.)

When to call your doctor:

- If your child's skin does not improve within one week of generous moisturizing and use of other recommended medications.
- If you notice signs of a skin infection such as weeping or yellow crusting or small pus-filled bumps.
- If your child has frequent, recurrent flare ups that require almost continuous use of topical steroids. At this point your child may need to see a dermatologist to discuss daily prescription maintenance creams.
- If you suspect that your child's eczema is made worse by certain foods or environmental exposures.
- If your child develops allergic signs such as generalized hives, swollen face or breathing difficulty.