

Patient Information:

- ◆ **About Eczema**
- ◆ **How To Minimize Flare-ups**
- ◆ **Treatment**

Eczema (Atopic Dermatitis)

Eczema (atopic dermatitis) is a chronic inflammatory itchy skin condition. Family history is usually positive for allergies and/or asthma. If it doesn't itch, it usually isn't eczema!

Eczema occurs at the extremes of temperature: winter with low humidity and overly-heated buildings and summer with increased sweating that increases the itching.

Eczema isn't cured. Avoiding factors that aggravate your eczema and treating early when new areas appear are key for managing eczema. Treatment involves avoiding known irritants, managing your home environment, using prescribed topicals, and moisturizing, moisturizing, moisturizing.

FACTORS THAT MINIMIZE FLARE-UPS AND ITCHING:

These are as important as prescribed products.

- ◆ **Avoidance:** irritants (fibers, soaps/body washes, perfumes, cosmetics, cigarette smoke, chemicals) that are known to you that aggravate the itch-scratch cycle (the more you scratch, the more you itch, then you have to scratch more, and so on.
- ◆ **Bathing:** Take short, cool/lukewarm showers, followed within 3 minutes by moisturizer BEFORE drying off. Pat dry/gently dry off. Bathe no more than once daily. Do not take long hot showers (good for environment also!) *Recommended soaps: Basis, Dove, Aveeno Moisturizing Bar, Cetaphil, Olay products.*
- ◆ **Clothes:** loose, cool, soft clothes next to your body. Wash clothes in mild detergent. No bleach or fabric softener. Avoid compression type gym clothes; the increased sweating and heat from the compression increases itching. Itching increases at night.
- ◆ **Sleep** in a cool room to minimize sweating. Cool mist humidifier year round. Both air conditioning and heat rob the air of moisture.
- ◆ **Stress management.** This is the difficult one! Many people rub or scratch their skin when studying or when stressed. Be aware if you start to do this and make every attempt to stop. Even a quick break to take your mind off of it can be

helpful. Walking is a quick, easy stress-reliever.

TREATMENT:

Topical steroid creams/ointments and moisturizers are the mainstay of treatment.

Topical Steroid Creams/Ointments

- ◆ You have to be diligent and use them as directed. For it to work, you have to use it! Topical steroids come in different strengths.
- ◆ Over-the-counter strengths can be used on the face and genital area, but the strength isn't high enough to treat eczema on the rest of the body.
- ◆ Start to use topicals early at first sign of a flareup. The longer you wait, the longer it takes for improvement. If you scratch for long periods of time, the skin becomes thickened (lichenification) and it is much harder to treat.
- ◆ Occasionally oral steroids are prescribed for major flares.
- ◆ If topical steroids aren't effective with diligent/compliant use along with adequate moisturization, Protopic and Elidel are immunomodulator topicals that are sometimes prescribed. These are more expensive, can cause a burning sensation, and now have a "black box" warning (concern of increased risk of cancer with prolonged use in some people, not proven yet)

Moisturizers

Eucerin, Nivea, Aquaphor Lubriderm, plain petrolatum (Vaseline) are recommended ones.

- ◆ The ones that feel greasy are the best.
- ◆ Moisturize within 3 minutes before you dry off after bathing because the water on your skin helps to absorb the lotion and then the moisturizers help to seal the skin to trap the moisture.

Antihistamines

Antihistamines such as Benadryl (diphenhydramine) and Atarax (hydroxyzine) may be prescribed to stop itching at night. Non-sedating antihistamines (Claritin, Allegra, Zyrtec) used for seasonal or year round allergies do not offer much benefit for itching from eczema.