



ECZEMA OR DERMATITIS

Essential Eczema or Dermatitis is a chronic, itchy inflammatory condition. The cause is **unknown**. **Atopic Dermatitis**, one form of eczema, is predominately a disease of childhood, usually beginning before age one. Most children outgrow their disease by adolescence. Adults may continue to have atopic dermatitis manifested by patches of eczema on the hands, feet, and elsewhere. **Contact Dermatitis**, another form of eczema, is caused by exposure to irritating or allergic chemicals contacting the skin.

Treatment of eczema (dermatitis) is aimed at reducing itching and inflammation of the skin.

- 1. **Avoid irritants** harsh soap, wool clothes, solvents and other irritating chemicals, uncomfortable climate. Washing should be done with warm water using a mild soap such as Dove, Oil of Olay Sensitive Skin, or Cetaphil.
- 2. **Moisturizers** should be used liberally and frequently, particularly after bathing. There are a number of moisturizers available such as: Cetaphil, Lubriderm, Neutrogena, CeraVe Cream and plain petroleum jelly. Moisturizers reduce dry skin and itching.
- 3. **Steroids** may be prescribed. These should be used cautiously since topical steroids can cause thinning of the skin. Systemic steroids can cause high blood pressure, diabetes, thinning of the bones and adrenal suppression.
- 4. **Protopic and Elidel** are anti-inflammatory agents which are not steroids. They are very safe.
- 5. **Antihistamines** are used to reduce itching. Benadryl, Zyrtec or prescription antihistamines may cause sleepiness.
- 6. **Baths** oatmeal (Aveeno) or tar (Cutar) are sometimes used for their soothing effect on the skin.
- 7. **Antibiotics** are used when the skin is secondarily infected.
- 8. **Ultraviolet light** can reduce inflammation and itching.
- 9. For more information: National Eczema Association at www.nationaleczema.org.

OVER

CARE OF ATOPIC DERMATITIS (ECZEMA)

The following directions will help you maintain moisture within your skin. The goals of the following therapy is to use water from the bath to moisturize your skin and then to seal that water within the skin. This is done because the skin in eczema is often unable to maintain its own moisture, leading to more dryness and ore itch.

1.	Once a day you should take a soaking, lukewarm, plain water bath for 15-20 minutes. At the very end of the bath you may use a mild soap, such as Dove, to wash off dirty areas. The idea is to avoid sitting in soapy, potentially irritating, bath water which can flare your eczema. Lukewarm water is preferred because the hotter the water the more of you skin's natural moisturizing oils are washed off.
2.	Immediately after getting out of your bath, while your skin is still damp, apply to rashy areas on your body and to areas of your face. Then apply petroleum jelly or to areas of your entire body. The moisturizer should be applied over the entire surface of your body, including not only the areas of eczema, but also the areas of normal skin. The idea is to "lock in" all that moisture your skin absorbed in the bath. This not only helps the medicine get into the rashy areas but also helps prevent new rashes from recurring.
3.	At one other time each day, repeat this process (except for the bath). Apply to the rashy areas of eczema on your body and to the rashes on the face. Again, "lock" it all in with petroleum jelly or applied.
4.	Your doctor may have prescribed an oral medicine for itch at night. If so, take it as follows: Name of Medicine: Instructions: Take orally at bedtime as needed.
5.	Your doctor may have prescribed an oral antibiotic for infection of the skin. If so, take it as follows: Name of Medicine: Instructions: Take orally times a day for days.
6.	As your eczema starts to improve, continue to have a bath (preferably) or shower once a day. Some days there may be no rashy areas to put medicine on, if so, it is still important to moisturize the skin all over with petroleum jelly or to minimize the number of flares.
7.	Please keep a general idea of the following to help us adjust your skin care plan in the further if necessary: a. The number of consecutive days using medicine to an affected area before it clears up.b. The number of days that this area will remain clear before flaring again.

For more information please visit our website: www.pennstatehershey.org/web/dermatology/home and click on Health Information Library.

If you have any questions or concerns, please contact your provider at the location you were treated. Hershey Medical Center, UPC I, Suite 100 (717) 531-6820 or Nyes Road, (717) 657-4045. Penn State Hershey Medical Group, Colonnade Building (814)272-4445

