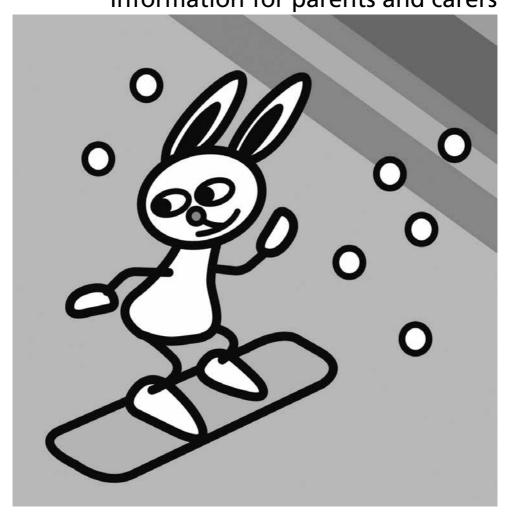


## **Eczema Treatment Plan**

for	
	Information for parents and carers



Atopic eczema is a long-term inflammatory itchy skin condition that often develops in early childhood and can run in the family. It can flare up and down, but may also be continuous.

Eczema causes the breakdown of the skin barrier, which makes skin more sensitive to irritants and allergens. These in turn can then make the eczema worse.

It is often difficult to diagnose what causes eczema. Testing (such as skin prick testing) does not generally show the cause.

Most cases of atopic eczema clear or improve during childhood, but it can sometime continue into adulthood.

Some children who have atopic eczema will go on to develop asthma and/or allergic rhinitis, hayfever or food allergies.

It is important to recognise a flare-up. This will include increased dryness, itching, redness, swelling and general skin irritability.

For further information please visit the website of the National Eczema Society: www.eczema.org

## Moisturiser (emollient)

Daytime:	 	 	 
,			
Niaht-time:	 	 	

#### Tips for applying moisturiser (emollient):

- Use moisturiser every day.
- Wash your hands before and after applying any cream.
- Use plenty of moisturiser on all dry areas of your child's skin every few hours, if possible. Also use at nappy change, if applicable.
- An ideal time to apply moisturiser is a few minutes after a warm bath or shower, while your child's skin is slightly damp.
- Apply downwards in the direction of their hair growth, especially on their arms and legs. Do not rub up and down or in circles, as this can cause irritation.
- If you are using a tub of cream, take what is needed and then replace the lid. Do not go backwards and forwards from skin to tub, as this may cause bacteria to get into the tub. You might want to use a clean spoon or paper towel to scoop the cream out. Ask your GP or nurse if the moisturiser comes in a pump dispenser.

### Bath additive oil

A daily bath is recommended, as it can soothe the skin, wash away old creams and dead skin, and reduces bacteria.

- Bathe your child for 5-10 minutes.
- Pat their skin dry, rather than rubbing.
- Never use soap, 'bubbles' or soap-based shower gel, as these can irritate the skin

## Soap substitute

All soaps tend to dry the skin, leaving it feeling tight and itchy. This can aggravate eczema.

Many moisturisers for eczema can be used as soap substitutes, apart from some of the urea based emollients and 50:50 emollient

The moisturisers can be applied to wet skin and rinsed off with warm water.

Warning – All skin products containing white soft paraffin or emulsifying ointment can easily catch fire with a naked flame or cigarette.

## Topical steroids – when to use

Bodv:	 				 	
Face:	 	 	 	 	 	

The topical steroid should always be applied to moist skin, after a bath or applying moisturiser. Leave about 30 minutes between moisturiser and steroid.

Apply the steroid in a thin layer on the affected areas and smooth in gently, so that the skin looks shiny. Steroids creams or ointments should be applied with clean hands, to help prevent infection.

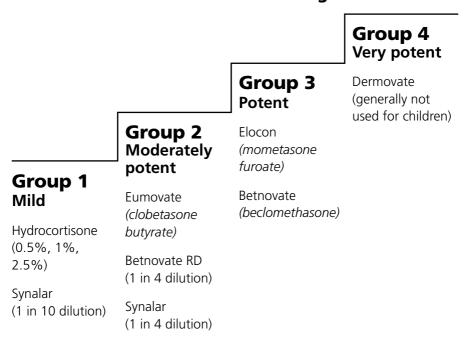
It's important to use the correct steroid (see the next page), depending on how severe the eczema is and where it is on the body.

If the eczema has a flare-up, stronger steroids may be prescribed, which can be used every day for two weeks. Once the eczema has calmed down, the stronger steroid can just be used for two consecutive days, such as a Saturday and Sunday. Please ask to see our 'Get control and keep control' leaflet for more information.

If the eczema is left untreated or undertreated, it will cause more damage to the skin. It is important to use the correct topical steroid, as the benefits will outweigh the side effects.

- Steroid treatment should be started as soon as the skin gets red or itchy.
- Steroid ointments are usually better than steroid creams your GP may be able to change the prescription to an ointment.
- Take care with the delicate skin around the eyes. Mild topical steroids can be used around the eyes, but not for long periods of time.

#### Steroids come in four different strengths:



# Steroid/antibiotic preparations and when to use them

These are not often prescribed. If your child needs this treatment, it is very important to use them correctly, following the advice below.

Body: .	 	 	 	 	
Face:	 	 	 	 	

A steroid/antibiotic cream should be used in the same way as taking a course of oral antibiotics, such as twice a day for 7-14 days. It should not to be used randomly (e.g. for a couple of days, then again a week later). This may make the antibiotic less effective

Use when individual eczema patches show signs of bacterial infection (yellow, crusty or oozing, or small blisters). Once the first course of steroid/antibiotic has been carried out, do not use the rest of the tube unless a healthcare professional thinks there is still an infection to treat.

Continue using the usual steroid cream/ointment on any non-infected eczema, but don't use this on the patches that you are treating with steroid/antibiotic cream.

If the infection does not improve after 14 days, starts to spread, or your child becomes unwell, see your GP. It may be that your child needs to take oral antibiotics (liquid or tablets).

#### **Antihistamine**

In most cases antihistamines are not helpful with eczema. However, sedating antihistamines (such as chlorphenamine) can help to break the 'scratch-itch' cycle at night time. If effective, these can be used for 7-14 days at a time.

#### Further advice

If you have any further questions, please contact your GP or Eczema Nurse.

If you need an interpreter or would like this information leaflet in another format, such as Easy Read, large print, Braille, audio, electronically or another language, please speak to the department where you are being seen. You will find their contact details on your appointment letter.

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