

INFORMATION LEAFLETS FOR PARENTS / CARERS OF A CHILD

Caring for a child with Eczema (Atopic Dermatitis)



There is no single medication that will cure eczema. It is prone to flare ups. However, eczema can be managed using a combination of treatment including emollients, emollient baths and topical steroids.

Factors that may aggravate eczema in some children

- Animal dander
- Biological washing powder
- Perfumed products
- Woollen / synthetic clothing
- House Dust mite
- Grass / Tree pollen
- Teething (infant)
- Infections
- Temperature changes
- Eczema Herpeticum (cold sore virus)

Emollients (*moisturisers*)

- **Moisturise and soften the skin and repair the skin barrier to help reduce the incidence of infection by improving skin integrity.**
- Reduce itching and scratching.
- Safe for frequent use. Recommended use 3-4 times daily
- Apply in a thin layer frequently
- Apply in a smooth downward motion to prevent blocking hair follicles
- If using a tub avoid double dipping i.e. from skin to tub. If there is an infection on the skin, the emollient can become contaminated.
- Your doctor or nurse can advise you regarding the type of emollient to be used.

Baths

- Clean the skin and remove crusts and scales
- **Once or twice daily** may be required depending on severity of eczema flare.
- Always add an emollient to the bath to prevent skin from drying out either a bath oil or emollient product e.g. Use 2 tablespoons of emollient in a jug add hot water whisk and add to bath.
- Occasionally Milton (bleach) will need to be used in the bath to manage recurrent infections. You will be advised regarding this by the dermatology nurse specialist.
- 5-7 minutes in the bath with tepid water.
- Use a non-perfumed shampoo product
- After the bath pat skin dry, do not rub
- Baths are more effective than showers. If you cannot have a daily bath, try to fit in 2-3 baths in the week between showers. If showering, use an appropriate emollient.

Topical Steroids

- These vary in strength from mild to very potent and come as creams, ointments lotions and gels. Ointments are generally prescribed when skin is dry and creams are used when it is moist, weepy or wet eczema
- **When they are used appropriately and as prescribed by your doctor steroids are a safe and effective treatment of eczema.**
- Using the correct strength, to the correct body part for the prescribed time.

Potency	Topical Steroid	Topical Antibiotic+ Steroid
Mild	Hydrocortisone 1%	Fucidin H
Moderate	Eumovate Modrasone Betnovate RD	
Potent	Betnovate Elocon Locoid	Fucibet
Very Potent	Dermovate	

- **Topical steroids provide an effective means of reducing redness and inflammation and this in turn will lessen the itch associated with skin conditions**
- They are prescribed by your doctor
- Wash hands thoroughly before and after the application.
- More than one topical steroid can be prescribed and it is important to know **which cream to apply, to where and for how long.**
- Mild steroid to fragile areas - face, flexural area and napkin area
- If the doctor feels that the eczema is infected a preparation of a steroid /antibiotic cream is prescribed
- e.g. Fucidin H (mild potency). Fucibet (potent steroid)
- When applying the topical steroid, apply enough to cover the area of eczema. Skin should be **glistening in appearance** after application
- **Apply steroids, wait 30 minutes to allow to dry before applying emollients**
- For more widespread eczema, there is a guide called Finger Tip Unit Guide, (F.T.U.), **which is a guide** of how much steroid to apply according to the age of the child. One fingertip unit is the amount of topical steroid that is squeezed out from a standard tube along an adult fingertip, from the tip of the finger to the first crease in the finger

The following gives a rough guide of how much steroid to use

	3 – 6 months	1 – 2 years	3 – 5 years	6 – 10 years
Face & neck	1 FTU	1.5 FTU	1.5 FTU	2 FTU
Arm & hand	1 FTU	1.5 FTU	2 FTU	2.5 FTU
Leg & foot	1.5 FTU	2 FTU	3 FTU	4.5 FTU
Chest abdomen	1 FTU	2 FTU	3 FTU	3.5 FTU
Back buttocks	1.5 FTU	3 FTU	3.5 FTU	5 FTU

Antihistamines

- Useful as a sedative and aid sleep at night.
- Patient can become tolerant of these and may outgrow the effects.

Bandaging if required will be discussed with the dermatology nurse

- Wet wrap.
- Viscopaste Bandages.

Swimming

- Moisturise prior to entering the swimming pool
- Shower after leaving pool and apply more moisturiser.

Please remember even when skin is good moisturisers and bathing should be continued as maintenance. Occasionally a maintenance steroid may be required this will be decided by the dermatology team.

TREATMENT PLAN FOR MANAGEMENT OF ECZEMA

Bathing

Moisturisers

STEROID REGIMEN

Face / Neck

Trunk and Limbs

Protopic

Date:

Discussed / agreed with: *(Mum / Dad / Child)*

Signature of parent/s:

Signature of nurse:

Grade:

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