



Adult and Pediatric Allergy

Ray S. Davis, M.D., FAAAAI  
Jeffrey M. Wright, M.D., FAAAAI  
Lisa V. Suffian, M.D., FAAAAI  
Gary M. Goodman, M.D., FAAAAI

456 N. New Ballas Road, Suite 129  
St. Louis, Missouri 63141  
(314) 569-1881  
FAX: (314) 569-3277

## ECZEMA

### WHAT IS "ECZEMA" AND WHO GETS IT?

Eczema, also called atopic dermatitis, is an itchy red rash that occurs mainly in the creases or bends of the arms and legs. Babies usually have eczema on their cheeks; older children and adults often have it on their hands, the back of their neck and sometimes all over their bodies. Often close relatives will be known to have eczema, asthma, or hayfever, and frequently a child with eczema will develop the other two over a period of years which is called the "Allergic march." Eczema is not "catching" (contagious), but occasionally, oozing areas may require antibiotic ointment or even an oral antibiotic.

### WHAT CAUSES ECZEMA?

No one knows what causes eczema, but in about 20% of patients, hidden food allergies can make eczema worse. When it occurs in infants, they often seem to "grow out of it", however, eczema may last for many years.

### WHAT CAN BE DONE TO TREAT ECZEMA?

The two major forms of treatment to effectively control eczema are: 1) to maintain good skin lubrication (moisture), and 2) to break to vicious "itch'n scratch" cycle.

Dry skin (chapping) is characterized by a fine scale that is most often seen on shins, backs of hands, and on the forearms. The dryness is due to the loss of water from the skin. Lower relative humidity in the winter literally "pulls" water from the skin. In addition, repeated exposure to solvents, soaps, and disinfectants allows more water loss. The key to understanding and treating dry skin is to remember that it is due to lack of water in the skin.

Based on these facts, the following are general instructions for care of dry skin:

1. No soap should be used except on the armpits, groin, and feet. The only exception would be if you get excessively dirty while working on a car or in the yard.
2. When using "soaps" you may want to use Dove, Dial, Tone, or Neutrogena to name a few of the best.
3. If you have a shower-tub combination, the best way to bathe is to shower using soap on the above mentioned areas. If you intend to shampoo your hair, do it at the same time. Next, shower off all the soap. Then, fill the tub while standing in the shower. Next, soak in the tub of plain water for 10 to 15 minutes. After getting out of the bathtub, apply one of the following lotions (Keri, Lubriderm, Aquaphor), or thicker preparations (Vanicream, Eucerine, Vaseline). Since these will work best if the skin is moist at the time of application, pat dry slightly, then apply the preparation to your skin while it is slightly wet. The thicker preparations should be used by those who have more problems with dry skin and may be used twice daily. **For infants, long cotton tube socks should be placed over upper and lower extremities before bedtime to prevent staining bed linens and sealing in the bath water.**
4. To break the "itch'n scratch cycle", oral antihistamines should be used at least nightly such as Zyrtec or Allegra (or the generic equivalent). If there are any inflamed or red areas, they should be treated with a topical cortisone ointment (most commonly triamcinolone or mometasone), but only milder steroid ointments such hydrocortisone 1% may be substituted on the face. Topical steroid ointments, if necessary, should be applied before using Vaseline or thicker emollients as above
5. If a **food allergen(s)** has(have) been discovered by testing, your doctor may ask you to eliminate the food or foods from the child's diet for a week or two, observe any improvement, and if the skin improves, then add one food back daily one week at a time to observe if the skin worsens again. This elimination and reintroduction of foods should be done **BEFORE** any of the above new skin treatment recommendations begin.

June 2014