

Eczema (atopic dermatitis)

Information for parents and carers

www.allergynorthwest.nhs.uk

What causes eczema to flare?

Infection is one of the most common reasons. If the skin barrier is damaged, there is a risk of infection, particularly the staphylococcus bacteria. If infected, the skin becomes **painful** and starts to **weep**. There may be yellow **crusted** blisters / pustules (impetigo). Topical antiseptics or bath antiseptics help prevent infections. A course of antibiotic such as flucloxacillin may be required for up to two weeks.

Less commonly but importantly, eczema may sometimes be infected with the **herpes cold sore virus**. It appearances as a crop of small blisters [photo]. Later there may be “punched-out” lesions about 2mm in size. A doctor should be consulted as soon as possible as there is a risk the virus may cause more serious illness.



What about changing my child’s diet?

Don’t take foods out of children’s diets without advice from your doctor or dietitian. Removing foods can lead to poor growth and nutrition and in the longer term may lead to more troublesome allergies.

In children with severe eczema **where a specific food consistently causes eczema to flare**, see your doctor or dietitian. This is particularly important before removing dairy and wheat, which are very important for a balanced diet.

Where can I find more information on childhood eczema?

National Eczema Society	www.eczema.org
Patient UK	https://patient.info/health/atopic-eczema

How can I contact you if I need to?

Singh AM et al. Atopic dermatitis and food allergy. . . JACI Pract, 2022
Katoh N et al. Clinical Practice guidelines. . . J Dermatol, 2019
Arkwright PD et al.,. Atopic dermatitis in children. J Allergy Clin Immunol Pract, 2014

2022 version, For review 2025
Eczema Guidelines - North West Paediatric Allergy Implementation Group
This information should be used in conjunction with advice from a medical professional

What is eczema?

Eczema is an itchy red rash which comes and goes. It affects one in five children in the UK. One in 20 will have severe disease. In young children it is common on the face, while in older children the elbows, wrists, knees, and ankles. It usually starts in the first year of life and improves with time. Children may also develop asthma or hay fever.

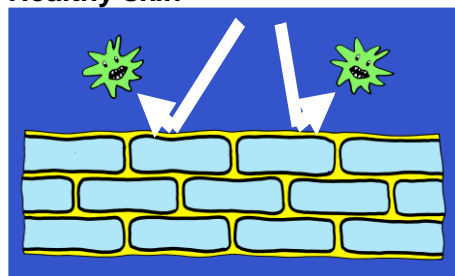
How is eczema diagnosed?

The diagnosis is made based on the appearance, rather than tests. Some conditions may mimic eczema, for example scabies.

What causes eczema?

Eczema is due to a leaky skin barrier. Water leaks out making it dry. Dirt and dust get in leading to it becoming red and inflamed.

Healthy skin



Eczematous skin

Allergy tests are **not** helpful as they only test for immediate allergic reactions and not those delayed by many hours, as with eczema. Inappropriate use of allergy tests often leads to unnecessary avoidance of foods, which can be harmful and promote new allergies.

How is eczema in children treated?

Moisturisers: Moisturisers are the mainstay of treatment. They help to restore the skin barrier and reduce itching and scratching. Use the moisturiser your child is most comfortable with. They are safe and should be applied regularly at least four times a day even when the skin

looks clear. Ointments are preferred as they contain less chemicals than creams.

Bath lotions are no longer recommended for children with eczema.

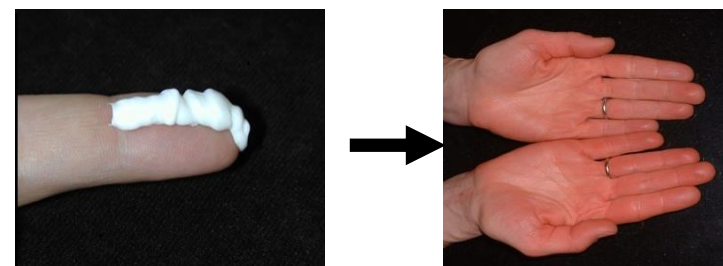
Garments / wraps: Cotton garments act as a “second skin” and help protect against damage from scratching. Although wet wraps may help to control severe eczema, they can promote skin infections.

Topical steroids and calcineurin inhibitors e.g. tacrolimus: These anti-inflammatory medications reduce itching and redness. Many people are concerned that steroids thin the skin. 1% hydrocortisone ointment is a mild steroid that can be used regularly long-term without causing this side-effect. Advice should be sought before using stronger steroids.

Tacrolimus ointment is an alternative to steroids. It won't thin the skin. It is used by specialists if mild strength steroids don't work.

How are eczema creams applied?

Apply the steroid or tacrolimus ointment before the moisturiser, and no more frequently than twice a day. A “finger-tip unit” is enough to cover skin the size of two hands of the person applying the treatment.



Do antihistamines reduce the itch in eczema?

No. Antihistamines do not relieve the itch in eczema. Sedative antihistamines help with sleep. Avoid in children less than six months old, and for long periods. The effect can last for a day and can affect a child's ability to concentrate at school.