

Atopic Dermatitis/ Eczema Fact Sheet

What is atopic dermatitis?

Dermatitis means inflammation of the skin. Atopic dermatitis is a common type of skin inflammation that tends to occur in individuals with a history of allergies. People usually develop an itchy, dry, scaly rash which may go on to form tiny blisters, crusts or thickening. Eczema is a synonym for atopic dermatitis.

What causes atopic dermatitis?

The exact cause is still unknown. However, contact with allergens, chemicals or other irritants may precipitate the rash. Some predisposing factors may be a family history or personal history of asthma, hay fever or hives. Also food allergies to milk, peanuts, tree nuts, soy, wheat, fish or other foods may aggravate symptoms. Scratching the rash usually aggravates the symptoms and may introduce a secondary infection.

What can make it worse?

Extreme hot or cold temperatures; dry skin; wool or rough clothing; irritating soaps, lotions, perfumes, or colognes; some laundry detergents, water softeners, or dryer softener sheets; certain foods; scratching; common industrial agents; frequent bathing; and high stress.

What can make it better?

There is no cure. Your goal is to prevent dry skin, decrease itching and control the rash. Atopic dermatitis tends to be a chronic condition that may clear completely or flare if aggravated.

Medications

- **Antihistamines** can decrease itching. Loratadine (such as Claritin® 10 mg daily), diphenhydramine (such as Benadryl®) and chlorpheniramine (such as Chlortrimeton®) are available over-the-counter. Diphenhydramine causes some drowsiness so is most tolerable at bedtime.
- **Steroid creams, lotions or ointments** can decrease the inflammation from the rash. Your health care provider will recommend what's best for you to use. Hydrocortisone 0.5%-1% is available over-the-counter. Applying steroid creams soon after bathing, and lubricating can enhance their absorption.

Other tips

- Avoid contact with substances that cause itching. Use rubber gloves (over cotton gloves, if possible, to absorb perspiration) when handling irritants (eg, certain foods, chemicals, cleaning agents, or when washing dishes).
- Do not bathe too frequently or use hot water. If you must use soap, mild, unscented soaps such as Dove™, Tone™, Oil of Olay™, or Neutrogena™ are preferred as they are less drying. Non-soap cleaners such as Cetaphil™ are also a good choice. Lightly pat dry after bathing, don't rub.
- Use lanolin-free, scent-free, alcohol-free moisturizers frequently, such as Keri Lotion, Neutra Plus™, Neutraderm™, Wondra™, Moisturel™, Nivea™, Eucerin™, Curel™, or Aqua Care™. Apply these immediately after bathing and frequently during the day.
- Use less irritating laundry products (hypoallergenic) such as Liquid Downy Softener™, White King™, All Free™ or Cheer Free™. Avoid using dryer sheets.
- Try to keep the temperature and humidity in your home fairly constant.
- Drink plenty of water to help prevent skin dryness.
- Avoid scrubbing or scratching.

Check with your health care provider

- If your rash is spreading or getting worse
- If you are unable to control your symptoms
- If symptoms of an infection develop (redness and pain with or without pus)

Check our website: www.uhs.berkeley.edu to learn more about this medical concern or others.

For an appointment, visit www.uhs.berkeley.edu or call **510-642-2000** Clinic Nurse **510-643-7197** for advice

Online Resources:

- **National Eczema Foundation**
<http://www.nationaleczema.org/home.html>
- **American Academy of Dermatology**
<http://www.aad.org/public/publications/pamphlets/eczemaatopicdermatitis.htm>
- **British Association of Dermatologists**
<http://bad.org.uk/>
Search for eczema.
- **DermNet NZ (New Zealand)**
<http://www.dermnetnz.org/dermatitis/treatment.html>
- **Support Group for Patients**
<http://www.nationaleczema.org>

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