

ASTHMA & ALLERGY CENTER

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OUR RECOMMENDATIONS FOR ATOPIC DERMATITIS

1. DAILY SKIN CARE:

Daily rehydrating skin with water followed immediately by applying topical medications and moisturizers is the key for controlling eczema.

- Patient should take warm baths or showers for 10-20 minutes once or twice a day to hydrate the skin. If needed, not daily, may use a non-soap cleanser (with minimal defatting activity and a neutral pH) but not soaps. Avoid other irritants or nonessential toiletries such as washcloth or irritating scrubs, bubble baths or perfumes, highly fragranced or artificially colored soaps, hand sanitizer. **Bathing or showering should be followed by gentle pat drying and immediate (within 2-3 minutes) application of topical medicines on the rash and a moisturizer on the normal skin.** This is to seal in the water that has been absorbed into the skin and prevent evaporation that can lead to further drying of the skin. There are several forms of moisturizers. Both ointments such as Aquaphor or Vaseline and cream- based moisturizers such as Eucerin or Cetaphil cream are recommended, but not lotions. **The moisturizer can be applied as often as necessary to keep the skin soft and pliable.**
- Avoid alcohol and astringents in skin care products.
- Avoid wool clothing or other materials that may be irritating to the skin; cotton or cotton blends are generally preferred.
- New clothing should be laundered before wearing to remove formaldehyde and other chemicals. Use liquid detergents, which are easier to rinse out than powder detergents.
- Add a second rinse cycle to facilitate further removal of detergents.
- Avoid extremes of environmental temperatures or humidity; prolonged exposure to sun may lead to overheating and evaporation, as well as perspiration, all of which can be irritating.
- Use sunscreens with low irritancy potential, such as those made specifically for the face.
- After swimming, shower with a cleanser to remove chlorine or bromine.
- Keep fingernail short and clean.

2. TOPICAL MEDICINES & MOISTURIZER:

After bathing and pat drying, apply the followings IMMEDIATELY TWICE DAILY:

Body and extremity rash:

- 1% , 2.5% Hydrocortisone
- EpiCeram Emulsion
- 0.05% Fluticasone cream
- 0.1% Triamcinolone ointment
- 0.1% Betamethasone ointment
- 0.03% Protopic ointment

Face & ear rash:

- 0.5%, 1% hydrocortisone
- EpiCeram Emulsion 0.03%
- Protopic / Elidel

Scalp rash: 0.05% Fluticasone lotion.

Normal skin: Aquaphor Vaseline Aveeno Eucerin cream Cetaphil cream Vanicream

Apply the moisturizer **as many as needed**. Do not put the moisturizer on top of the medicines

3. WET WRAP DRESSING:

Wet-wrap dressing reduces itchiness and inflammation by cooling the skin and improving penetration of medicines. The wet wrap is not recommended if the skin is infected.

When to do wet wrap: First visit with severe/ uncontrolled eczema or severe flaring eczema.

How to do wet wrap:

1. Preparing cotton socks or sleepers. Be certain that the room is warm. Bathing or showering in warm water for 15-20 minutes immediately before this procedure. Pat skin dry with a towel.
2. Apply the topical medicines on the rash and a moisturizer on normal skin immediately as the above recommendation. Do not put the moisturizer on top of the topical medicines.
3. Soak some socks or a sleeper in warm water. Squeeze out excess water. The socks or sleeper should be wet, not dripping. Making the first wet layer with the wet socks covering the needed area by starting at the feet and move upward or the wet sleeper covering the whole body.
4. Immediately after putting the wet socks, making the dry layer of dressing with dry socks or sleeper put on the top of the wet layer. Do not use plastic as the dry layer.
5. Re-wet the wet layer every 1 hour by spraying or using wet towel for next 3 hours.
6. Apply the wet wrap dressing in the morning and in the evening. In the afternoon, if dressing is removed; apply the moisturizer to the entire body. At night, sleeping with dressing is recommended.

When to stop wet wrap:

Within 1 week or when a blister or a concern of skin infection develops, please call at 304-343-4300.

4. ORAL MEDICINES

Antihistamines:

Itch, a major symptom of eczema, evokes the desire or reflex to scratch; and scratching induces more inflammation and itchiness. Therefore, stopping the itchiness with anti-itch medicines, antihistamines, is essential for controlling eczema. A combination of the following antihistamines is recommended to minimize itchiness, scratching and skin inflammation.

- Zyrtec, _____ teaspoon/ tablet in the morning and at night.
- Hydroxyzine, _____ teaspoon/ tablet as needed every 6 hours for itching.

Antibiotics:

A bacteria skin infection and staph colonization in nares are common triggers or common causes of persistent eczema.

- Apply Bactroban on rash that shows yellow crusts
- Apply Bactroban nasal form (1gram/tube) in each nare twice a day for 5 days
- Oral Antibiotics if prescribed.

5. Bleach Bath:

An eczema bleach bath is thought to kill bacteria that grow on the skin, which reduces itching, redness, scaling and other symptoms of eczema. An eczema bleach bath is most effective when combined with other eczema treatments, such as medication and daily moisturizers. If properly diluted and used as directed, a bleach bath is safe for both children and adults. For best results:

- Add 1/2 cup (118 milliliters) of bleach to a 40-gallon (151-liter) bathtub filled with warm water.
- Soak the affected areas of skin for at least five to 10 minutes.
- Dry your skin thoroughly and apply a thick layer of moisturizer.
- Take a bleach bath no more than twice a week.

Though some people experience positive results, a bleach bath can cause skin dryness if the bleach concentration is too high or if the bath is done too often. If your skin is cracked or extremely dry, any bath (including a bleach bath) may be painful. Talk to your doctor before trying an eczema bleach bath.