

Eczema (Atopic Dermatitis) *(See also Allergic Skin Conditions.)*

What is eczema (atopic dermatitis)?

Eczema (atopic dermatitis) is a long-lasting skin condition that causes the skin to be overly sensitive to many things. It can affect older children most often on the inside of the elbows, back of the knees, wrists, and neck. In younger children, it may just cause dry, rough patches of skin, particularly on the face and trunk. Sometimes the patches become open or even infected. It may appear thickened and leathery.

How common is it?

Estimations are that up to 20% of infants and young children in the United States may be affected by eczema at some point.

What are some common characteristics of children who have eczema or of eczema as children present with it?

- Children with eczema tend to have allergies and may have other signs of hay fever such as nasal congestion, sneezing, and itchy eyes.
- Food allergies, nasal allergies (allergic rhinitis), and asthma are more common in children with eczema.
- Eczema can be mild or severe.
- Eczema may come and go, especially during allergy season, but is commonly present all year long.

Who might be on the treatment team?

- The pediatrician/primary care provider in the medical home.
- Allergists and dermatologists may be consulted in difficult cases.

What adaptations may be needed?

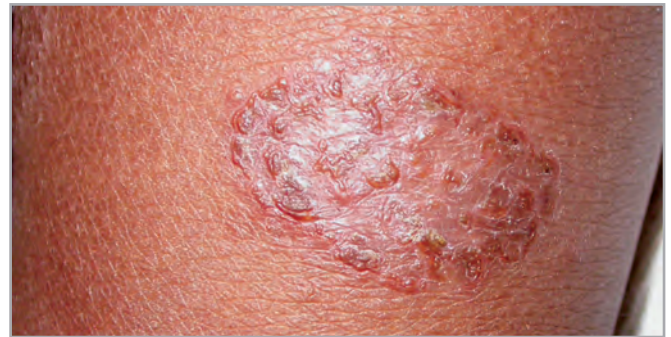
Medications

- Medications can be given to relieve the symptoms or cure the condition. Some of these medications require a prescription, and others are available over the counter.
- Moisturizers. Eczema is helped by frequently moisturizing the skin.
- Antihistamines.
 - Classic antihistamines include diphenhydramine (Benadryl), hydroxyzine (Atarax), and others. These medications can cause drowsiness in some children and hyperactivity in others; it is often difficult to predict what the reaction will be in each child.



Child with eczema patch

AAP



Child with an oval crusted eczema lesion

AAP

- Nondrowsy antihistamines include cetirizine (Zyrtec), loratadine (Claritin), and fexofenadine (Allegra). These medications tend to cause less drowsiness but may not control the itch as well.
- Steroids can be applied as a cream or an ointment. They can also be given orally in severe cases. The skin can change if strong steroid creams are used for prolonged periods. Side effects of oral steroids include appetite and mood changes, especially if used for more than a few days.
- Immune modulators such as tacrolimus (Protopic) and pimecrolimus (Elidel) creams are sometimes used to treat children with eczema.
- Medications to prevent the release of histamine, such as montelukast (Singulair), might be used.

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- Injectable epinephrine (EpiPen) may be prescribed if the child has more-serious associated allergies (anaphylaxis).
- Antibiotics (oral or topical) are used if a bacterial skin infection is worsening the eczema.
- Caregivers should be given information about any medications being used to control symptoms for children with eczema.
- All staff who will be administering medication should have medication administration training (see Chapter 6).

Dietary Considerations

Avoid food allergens.

Physical Environment and Other Considerations

- Children may need to avoid things that aggravate their allergies such as latex, food, creams, metals, and perfumes.
- Temperature extremes can aggravate some skin conditions but have to be balanced with the child's need to play. Avoid dust, perfumes, chemicals, and furry animals. Avoid wetting and drying the child's skin. Special precautions may be necessary for swim activities.
- Eczema is helped by frequently moisturizing the skin. You may want the child to decorate a pot to put the moisturizing cream in.
- Avoid contact with other blistering skin conditions such as herpes (specifically, cold sores) and chickenpox.
- Try to relieve itching with cool compresses.
- Avoid dressing the child in tight-fitting clothing and scratchy clothing such as wool. Sand or dust may worsen itching.
- Avoid vigorously rubbing the child's skin when drying after cleaning.
- It can be frustrating for children to hear "Don't scratch!" all day, so try a distraction, such as reading a story or doing a special activity.

What should be considered an emergency?

Generally, no emergencies are related to eczema, but children with eczema might be more prone to other allergic reactions, such as anaphylaxis.

What types of training or policies are advised?

Medication administration training may be helpful if children with eczema receive medications as part of their treatments, such as antihistamines and creams, during the hours of care.

What are some related Quick Reference Sheets?

- Allergies: An Overview (page 65)
- Allergic Skin Conditions (page 67)
- Anaphylaxis (page 71)
- Food Allergies (page 123)

What are some resources?

- American Academy of Pediatrics HealthyChildren.org: "Eczema: How to Help Your Child Avoid the Itch" (Web page), www.healthychildren.org/English/health-issues/conditions/skin/Pages/Eczema.aspx
- Medication Administration Packet (page 237), Emergency Information Form for Children With Special Needs (page 231), and Symptom Record (page 257) in Chapter 12

