

## **Eczema**

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With thanks to Dr. Sharon Witemeyer, and Araceli Domingo for contributing resource information.

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### **Definition**

"The word eczema is used to describe all kinds of red, blistering, oozing, scaly, brownish, thickened, and itching skin conditions." (American Academy of Dermatology October 2000) A condition associated with allergies, eczema may be focused one part of the body, such as the hands, neck, eyelids or feet, or may cover more of the body. Eczema, also referred to as atopic dermatitis, can be disfiguring, embarrassing, and irritating to the person.

Eczema usually starts soon after birth often as a rash first on the face and then spreading to areas such as the knees and elbows as the baby begins to crawl. Eczema may start as a rash, then become scaly, oozing, crusty, cracked and red. The eczema may disappear (go into remission) but then come back at later stages of life for example, when the child becomes a teenager. "...60 percent of these children will continue to have one or more symptoms of atopic dermatitis into adult hood". (American Academy of Dermatology October 2000) Eczema may start for the first time in adulthood but that is unusual.

### **Introduction**

People from all over the world have eczema. The American Academy of Dermatology (October 2000) estimates that "...about ten percent of infants and three percent of the U.S. population overall [have atopic dermatitis]", The American Academy of Dermatology (October 2000) also states that "Since 1970, the incidence of atopic dermatitis has nearly tripled. Studies point to environmental factors as contributing to the dramatic boost in the number of people with atopic dermatitis including irritants and allergens that trigger the immune system."

There are different types of eczema. "Examples of eczema include dermatitis, allergic contact eczema; seborrheic eczema, and nummular eczema." (American Academy of Dermatology October 2000).

While the cause of eczema is unknown, "It is suspected that a combination of genetic, environmental, and immunological factors are involved." (American Academy of Dermatology October 2000).

Eczema is "often associated with a personal or family history of atopic disease (asthma, allergic rhinitis, and atopic eczema)." (Wyngaarden 1992) "While most people with atopic dermatitis have family members with similar problems, 20% may be the only one in their family bothered by this problem." (American Academy of Dermatology October 2000).

Environmental factors can make eczema worse. For example, factors such as stress, dust mites in bedding and other household items, wool, make-up, sweat, cleansers, and, rarely, certain foods can trigger or complicate eczema.

### **Diagnosis**

"A physician will rarely have difficulty diagnosing atopic dermatitis, based on three factors: an 1) itchy, 2) "eczematous" or bubbly rash in an 3) atopic individual. If one of these three features is missing, your physician should consider other causes." (© copyright 1996-2000, American Academy of Allergy, Asthma and Immunology. All rights reserved.)

Physicians making a diagnosis also consider how long the "lesions" have been there, where they occur and family history of "atopic disorders" (The Merck Manual of Medical Information 2000) The Merck Manual of Medical

Information (2000) also cautions that the doctor should make the diagnosis after examining the person several times to make sure it's not another condition such as contact dermatitis.

### **Prevention and Treatment**

Although the genetic factors that contribute to eczema cannot be prevented, some of the factors in the environment can be controlled. One wellness area to focus on is stress reduction. A person can develop a variety of ways to cope with stress. As Brody (1991) commented "many adults with eczema have flare-ups when under stress, and chronic tension may be the direct cause of nummular eczema. When patients with these types of eczema are encouraged to talk about their feelings, their skin problems often clear up."

The American Academy of Family Physicians (Revised October 2000) has developed a useful handout with tips for people with eczema entitled Eczema: Tips on How to Care for Your Skin which is available on their website: <http://familydoctor.org/handouts/176.html> This handout makes specific recommendations about dealing with environmental factors by avoiding contact with irritants, wearing gloves, wearing cotton or cotton blend clothing, bathing with mild soap avoiding hot water and using moisturizer, using prescribed medicine as directed, avoiding scratching the itchy areas, avoiding sweating, managing stress, and continuing to care for skin even after the eczema is gone.

It can also be helpful to keep fingernails short to avoid infection from scratching.

If, as happens rarely, a specific food has been related to the eczema, the person should avoid eating that food.

One major focus in treating eczema is to stop the itching. The doctor may prescribe oral antihistamines and topical medication such as cortisone. "Because topical corticosteroids are expensive, supplemental use of white petrolatum, hydrogenated vegetable oil (as for cooking), or hydrophilic petrolatum (unless the patient is allergic to lanolin) may be advisable ...[as they] also help hydrate the skin..." (The Merck Manual of Medical Information 2000) Keeping the skin moist (hydrated) is especially an issue in dry climates such as New Mexico and in winter months when central or wood heating is used and can dry out the skin.

Doctors also sometimes prescribe use of ultraviolet light for older adults.

Since adults can develop cataracts either from the eczema or as a medication side effect, regular eye exams are a must.

### **Emergency Situations – What can go wrong?**

Itching is a big problem with eczema. It, as well as skin inflammation, can disturb sleep and work and leave the person feeling "tense, resentful, aggressive and restless". (Wyngaarden 1992) If itching is uncontrolled, eczema can become infected.

As part of the eczema or as a reaction to certain medications (for example, cortisone), adults may develop cataracts in their eyes.

If environmental irritants, such as dust mites, are not controlled, the person's eczema can become much worse.

### **Conclusion**

Eczema, also referred to as atopic dermatitis, is a skin condition, which often starts in infancy and may continue, or reoccur, in later life. While there are different types of eczema, a common feature is red, itchy, scaly, crusty, oozing skin that may be confined to specific parts of the body or be more widely spread. A family history of eczema puts a person at risk of developing this condition, which is thought to also have an immunological and environmental basis.

People with eczema can apply a number of practical preventative measures to minimize emotional and environmental triggers of eczema as well as keep their skin healthier. In combination with these preventative measures, a physician might proscribe treatment ranging from medication to use of ultraviolet light. Possible complications of eczema include infection, sleep disturbance, irritability and cataracts.

Direct Support Professionals can help by:

learning about the symptoms and treatment of eczema

educating about and encouraging wellness practices such as talking about feelings and other techniques to reduce stress

assuring that the person diagnosed with eczema is educated about eczema and wellness

supporting the person to remember to do relevant wellness activities

gathering base-line information about the person (such as sleep patterns, moods, where and when the eczema is showing up) and any family history of eczema

noticing if a secondary infection is developing and reporting it

supporting the person's self-esteem, for example by (with the permission and participation of the person) educating others in the person's environment about eczema and discouraging teasing or other negative reactions to the person's condition

learning about and reporting potential side-effects of medication for eczema

supporting the person when they go to needed appointments such as regular eye exams (for example, by sharing related baseline information)

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Developed 12/00

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