

SKIN TO SKIN

caring for your eczema skin

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This leaflet was fully funded by a hands-off grant from Sanofi



Contents

What is atopic eczema?	3	Topical treatments	13
What does atopic mean?	4	Topical steroids	13
What does atopic eczema look like?	5	Managing infected eczema	14
Dry skin	5	Top tips for managing eczema to prevent infection	14
Redness or inflammation	5	Itching and scratching	15
Scratching	6	Tips to help relieve itch	15
Darker / lighter patches	7	Eczema in children	16
Infected eczema	7	Food allergy and eczema in children	16
Allergens and irritants	8	Relaxation and sleep	17
What about allergy testing?	9	Support for your eczema	19
Can eczema be cured?	9	When to seek help	20
Emollient therapy	10	Useful resources to help manage anxiety and stress	21
Why is emollient therapy important?	10	Further sources of information and advice	21
Which emollient to use?	11		
Soap substitutes	12		
Top tips for bathing eczema skin	12		

What is atopic eczema?

Atopic eczema is a common dry skin condition that affects approximately one in five children and one in 10 adults in the UK.

1 in 10 adults



Itching is the most common symptom



1 in 5 children



Eczema can appear at any age but often appears within the first year of life and for most children it improves as they get older.

Eczema can be mild, moderate or severe and treatment of the eczema will depend on the severity. Everyday treatment for eczema is complete emollient therapy (moisturisers and soap substitute) but when eczema becomes worse (flares) other treatments like topical steroids may be used.



Eczema can range from small patches of dry skin, to widespread inflamed, itchy, cracked and sore skin all over the body. Inflamed skin can look red on lighter skin and darker brown, purple or grey on skin of colour which can be more difficult to see clearly.



Eczema
Papules and nodules



Infected eczema



Eczema
Localised erythema

Eczema often affects sleep and everyday activities for both the individual and their families. It can impact school or work performance, as well affecting your relationships, general well being and mood.

What does atopic mean?

If you are atopic, you are more likely to develop allergies, such as eczema, asthma, hay fever or food allergy, than someone who is not atopic. Being atopic means that you have a genetic (inherited) tendency for your immune system to make increased levels of IgE antibodies to certain allergens.



What does atopic eczema look like?

Eczema is a very itchy dry skin condition that can cause the skin to become cracked, sore and very inflamed. Eczema can affect any gender, ethnicity and race and can look different depending on your skin tone. This can sometimes make it difficult to recognise symptoms clearly, especially on skin of colour.



Dry skin



Dry skin with thickening of the skin

Dry skin

Dry skin can often feel slightly rough or bumpy, and can be very itchy. Regular emollient therapy can help to relieve dry skin and itch.



Inflamed eczema to face of baby



Eczema on the back of child's legs

Redness or inflammation

Eczema skin can easily become inflamed. This is often a key symptom of an eczema flare. Inflammation is often described as being painful, tender or sore to touch. This may look red in lighter skin tones, but can be harder to see in darker skin tones. Inflammation can often be seen as dark red or brown in olive or light brown skin tones and, brown-red, grey, purple, violaceous or darker brown/black in darker skin tones.



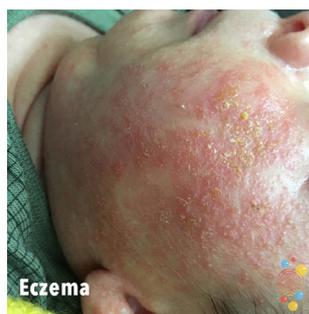
Inflamed eczema on baby's back



Inflamed eczema on hands

Eczema often affects the face and areas of the body that bend or crease e.g. inside elbows and behind knees. But any part of the body can be affected, including the hands, feet and genital areas. The rash often feels rough, coarse or bumpy, and the skin can look very dry or be weepy and crusty, especially if the skin is infected.

In skin of colour, eczema can also affect the outer area of the elbows and knees, as well as the inner area. The skin may have a bumpy appearance, often called follicular eczema.



Eczema

Infected eczema



Eczema

Flexural eczema affecting the inner aspect of the arm



Follicular eczema



Eczema

Scratching

Continuous scratching or rubbing of eczematous skin can lead to open sores and increase the risk of infection. But over time, the area of skin being scratched or rubbed can also become thickened and dry. This is called lichenification.



Eczema

Areas of thickened skin to wrist and hand from repeated scratching



Darker / lighter patches

Inflammation, constant scratching that breaks the skin, can cause an increase in melanin being released into the skin. This results in darker patches of skin appearing (hyperpigmentation). This darkening of the skin is more obvious in skin of colour due to higher melanin content. It can also be seen on lighter skin, but it is not as noticeable.



Patches of lighter skin (hypopigmentation) can also occur once the eczema starts to improve. These changes in skin colour can be quite worrying, but this should settle once the eczema has improved. Although, it may take some months for the skin to go back to normal.



Images to areas of lighter (hypopigmented) patches on skin

Infected eczema

It is important to always be aware of the signs of infection. This can include increased itch, weeping, crusting, redness, swelling and heat to the skin.



Children with atopic eczema are more prone to viral skin infections such as molluscum and viral warts.

A rare but serious viral infection called eczema herpeticum, is caused by the herpes simplex virus and is a condition that needs immediate treatment to prevent complications.

If you are concerned that your skin is not improving with normal topical treatments and looks different, or if you suspect you may have an infection, it is important to seek advice immediately from your healthcare professional.

Allergens and irritants

Skin with eczema can 'flare up' or be irritated by many different things.



Skin infection



Generally unwell



Change in temperature



Stress



Detergents



Fragrance



Perfume



Fabrics



Sweat



Saliva



House dust mite



Pets



Pollen



Mould spores



Foods

Trigger irritants and allergens can vary hugely from person to person. Often you will find that you have more than one trigger factor that can cause a flare of eczema. Some trigger factors may be easy to identify, whilst others may not be.

If you suspect something in the environment may be affecting your skin, keeping a symptom diary

can help identify any patterns of exposure and symptoms. This can be useful when speaking to your healthcare professional to identify potential triggers.



What about allergy testing?

Allergy testing for allergens in eczema is often not useful. This is because the immune mechanism that causes eczema, is not the same immune mechanism that causes immediate type allergies, where allergy testing is used.

Testing, such as skin patch testing, is useful for contact allergens e.g. nickel, common ingredients or preservatives in creams, cosmetics or materials. A contact allergic reaction typically occurs when an allergen is in contact with the skin e.g. someone with a nickel allergy to nickel earrings will have an allergic reaction around the earlobe.



Skin prick testing and blood testing are useful where there is an immediate allergic reaction to an allergen. However, often with eczema, the reaction is delayed and will not be picked up with this form of testing. This is where keeping a symptom diary to identify patterns of exposure to allergens or trigger irritants is a very useful way of finding your triggers.

Can eczema be cured?

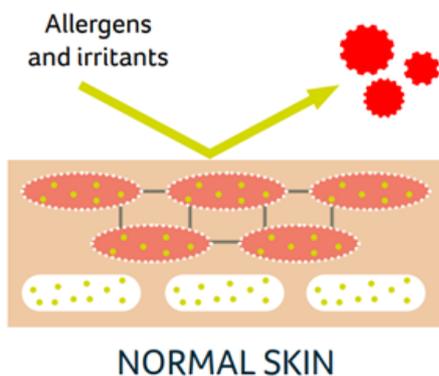
There is currently no cure for eczema. Often, with eczema, you can have ups and downs, with periods where the skin becomes irritated and inflamed (flares up), and then periods where the skin appears settled. This is a common pattern in people with atopic eczema. Maintaining a regular skin care regime, which includes a leave on emollient and soap substitutes, can help to reduce flare ups. This includes applying a daily emollient, even when the skin looks and feels clear, and where possible avoiding your trigger allergens and irritants.

Apply a daily emollient, even when the skin looks and feels clear

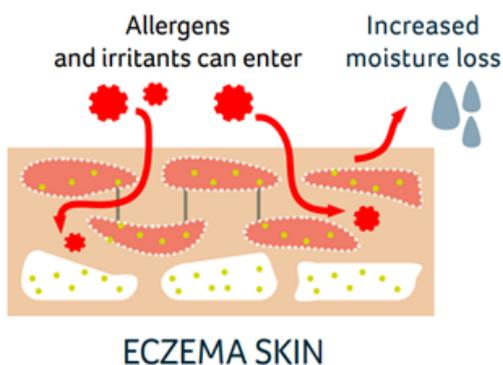
Emollient therapy

Why is emollient therapy important?

In skin where there is no eczema or dryness, the surface of the skin, the skin barrier, is intact. This means that there are no breaks in the skin's surface and this helps keep bacteria, allergens or irritants out.



In skin with eczema, the skin is dry and the skin barrier is weakened or broken. Moisture can escape and bacteria, allergens and irritants can get in. This causes inflammation and itch, and increases the risk of infection and allergic sensitisation.



Emollient therapy helps to reduce dry flaky skin and soothe itch

Regular emollient therapy is essential to try to restore the broken skin barrier. It works by providing a protective layer to the skin. When applied regularly to your skin, emollient therapy helps to reduce dry flaky skin and soothe itch.

Maintaining a regular skin care regime is essential for the management of eczema. It is important to continue to apply an emollient, **even when the skin looks good.**



Which emollient to use?

Emollients are available in lots of different preparations, including ointments, creams, gels and lotions. It can be difficult to know which one to choose. You may need to experiment with different emollients to find the one that suits you or your child.

The drier the skin is, the more often you will need to apply your emollient. If you find that you need to apply your cream or gel-based emollient several times a day, consider switching to greasier ointment-based emollient for longer lasting protection. You may wish to use a cream-based emollient during the day and a greasier ointment at night.

Ointments	Ointments leave a protective layer on the skin to seal in moisture. These are good for dry cracked skin. They are oil based and have a thick greasy texture. They do not contain perfumes or preservatives that can irritate the skin.
Creams	Good for weepy wet eczema. If you have very dry skin, cream-based emollients may need to be applied more often than ointments. They are lighter on the skin than ointments.
Gels	Not as greasy as ointments, but feel thicker and tend to last longer on the skin than creams. Like creams, they are less greasy and often used during the day.
Lotions	Useful for dry skin in areas of the body where hair grows, including the scalp, chest, arms and legs, as they are quickly absorbed by the skin. Lotions are very light emollients and very high in water content.

Caution: Most emollients are paraffin based and when they soak into fabrics, such as clothing and bandage dressings, can become flammable. After applying emollients to yourself or your child, always avoid open flames, including wood burning stoves or gas fires, cookers and matches.

Soap substitutes

Soap substitutes are designed to cleanse the skin. They do not contain perfume, fragrance or other irritants that regular shower gels and bathing products often do, which can aggravate dry eczema skin. Soap substitutes are available as wash products, such as emollient cleansers, shower gels, bath oils and shampoo.

Some 'leave on' emollients can also be used as a soap substitute, to help cleanse the skin as well as moisturise. When choosing a product to use as both a 'leave on' emollient and soap substitute, avoid products containing sodium lauryl sulphate (SLS). This is a foaming agent, which can irritate the skin if it is not washed off straight away.



Top tips for bathing eczema skin:

The water temperature should be lukewarm, not hot, as this can cause drying and skin irritation.

Keep the bath or shower short, ideally five to 10 minutes.

Avoid using soaps, shower gels, bubble bath and shampoos.

Use an emollient soap substitute, that can be applied directly to the skin or added to the bath to help lock in moisture.

When washing, gently wipe the skin. Avoid scrubbing and rubbing the skin with a wash cloth or sponge. This may cause further damage to already sensitive skin.

When bathing infants and children, the use of emollients can make your child and bath slippery. Be careful when lifting a baby or young child in and out of the bath or using the bath afterwards. Sometimes a non-slip bathmat can be used in the bath to prevent slips.

Pat dry the skin, avoid rubbing the skin vigorously when drying.

Apply emollient, and skin treatments if instructed, after bathing.

Topical treatments

Topical steroids

Topical steroids, also called topical corticosteroids, are the most common treatment for eczema alongside emollient therapy. They are effective at reducing inflammation and symptoms of itch, rash, swelling and redness in the skin, and help to speed up the healing process.

Topical steroids are applied directly to the skin and are available in different preparations, including ointments, creams and lotions. They come in different strengths from mild to strong potency.

Topical steroids, when used correctly (as prescribed by

your doctor or nurse, in the correct strength and applied as directed) are a safe and effective treatment for eczema management, alongside regular emollient therapy.

Topical calcineurin inhibitors

Topical calcineurin inhibitors are used for more difficult to treat eczema. They work by altering the immune system to block one of the chemicals that contributes to the flare of eczema. They are often used for delicate areas, where the skin is thin, such as the face and neck.

Your healthcare professional will prescribe treatment based on the following factors:

Age: Children are usually prescribed mild topical steroids, although occasionally a stronger strength may be required, depending on the severity of the eczema.

Severity of the eczema: A mild or moderately potent steroid may be replaced by a stronger potency, if the eczema flares or is severe.

Body site: You may require a stronger topical steroid on areas where the skin is very thick, such as the palms of your hands and soles of your feet. A milder topical steroid may be used for areas where the skin is very thin, such as the face, genital area and skin folds i.e. anywhere where skin touches skin.

Managing infected eczema

Bacterial, fungal and viral infections can all aggravate the skin and lead to worsening eczema. Antibiotic and antiviral therapies can be useful to help manage infected eczema, with many topical treatments available. Antiseptic or antimicrobial preparations may be recommended for bathing and showering, to reduce or prevent infection. It is recommended to only use these treatments for short periods to treat the infection and then go back to your usual emollient and soap substitute, unless advised otherwise. This is to reduce the risk of developing resistance to these medications.

If you feel your eczema is worsening or not responding to the treatment prescribed, please speak with your doctor or nurse for further advice and support.



Top tips for managing eczema to prevent infection:

Always wash your hands before applying any creams or ointments.

Dot or dab the emollient onto the skin.

Gently smooth on creams or ointments using gentle downwards stroke, in the direction of the hair growth.

Allow any excess emollient to soak in naturally, avoid rubbing the emollient in to the skin as this can irritate the skin and trigger or worsen the itch sensation.

Apply emollients liberally and frequently throughout the day, as required, and continue to use emollients, even when the skin is clear.

If the emollient is in a pot, the required amount should be removed with a clean spoon or spatula and not fingers. This is to prevent contamination with bacteria.

Wash and change towels, clothes and bathing products regularly.

Keep nails short to prevent damage to the skin through scratching.

Itching and scratching

Itch is one of the most common symptoms of eczema. An itch leads to scratching, which damages the skin and can allow bacteria and allergens and irritants to enter the skin, making the itch worse. When we scratch, chemicals are released in the brain that make us feel good

and we want to continue scratching. Scratching releases histamine in the skin that makes us itchy, so we need to continue scratching. Unfortunately scratching can quickly become a habit and so it is a good idea to try to develop a strategy to break this habit.

Tips to help relieve itch:



Applying emollient to the affected area often helps reduce the itch. Remember to apply the emollient gently to prevent further itch sensation.



Pinching, or patting but not rubbing or scratching, the skin when you feel an itch sensation can help prevent you scratching.



Try applying an ice pack or cold compress to the area to help soothe the skin.



Some people can find wearing cotton gloves can help to prevent you scratching especially if worn at night.



Putting the emollient in the fridge (cream or lotions work best) to cool before applying can be very soothing.



Keep nails short.



Practicing deep breathing or other relaxing techniques can also be useful to reduce any built-up stress and can help distract from scratching.

Eczema in children

Eczema often appears in the first year of life and for most children, their eczema often improves as they get older.

Eczema can be mild, moderate or severe, and treatment will depend on the severity. Everyday treatments for eczema are moisturisers (emollients) and when eczema becomes worse (flares) other treatments like topical steroids may be used.

Your child's eczema can range from small patches of dry skin to widespread inflamed, itchy, cracked and sore skin all over the body. Inflamed skin can look red on lighter skin, and darker brown, purple or grey on darker skin which can be more difficult to see.



Food allergy and eczema in children

Although some children with eczema also have a food allergy, fewer than two out of 10 children with eczema will develop a food allergy. Eczema that appears within the first few months of life is more commonly linked with food allergies. This may be due to the fact the immune system is still developing and may react to allergens within the environment.

Research has shown that children with more severe or poorly treated eczema, where the skin barrier is broken and inflamed, are at a higher risk for developing allergies. So it is important to treat eczema flares and maintain healthy skin with daily emollient use and treatments, as prescribed.

Fewer than two out of 10 children with eczema will develop a food allergy

Avoid applying food-based oils or moisturisers such as coconut, peanut, olive and tree nuts on the skin of atopic infants, especially those with eczema under six months, to help prevent the risk of food sensitisation through the skin.

Always wash your hands to remove, not only bacteria, but also any food deposits, before applying any emollients and topical treatments.

Some foods, such as tomatoes, citrus and other fruits, can cause reddening or a rash to appear on the skin. This commonly caused by irritation to the skin, other common cases of irritation can be saliva from dribbling in infants or lip licking in children. Where an irritant rash is suspected with no other symptoms, it may be useful to apply a barrier ointment to protect the skin before feeding.



Relaxation and sleep

Sleep disturbance is the most commonly reported symptom of eczema, after itch.

Babies and children with eczema often do not sleep well, which can affect not only the infant, but can lead to sleep deprivation for the whole household. For older children, lack of sleep may make concentrating on tasks and school-work hard.

The visible aspect of eczema may also make some children embarrassed by how their skin appears or can be subject to bullying. They may also report feelings of stress, anxiety and low mood.



The following tips can help improve some of the issues highlighted.

1

Itch is one of the most common symptoms of eczema. When you scratch an itch, it can give a sense of great relief, however scratching is very damaging to the skin. You can try an alternative behaviour to scratching, which can include patting or pinching the skin. Applying a cool pack or emollient to the skin can also help reduce the itch sensation.

2

Regularly apply emollient to protect and soothe itch. It is important to continue to apply an emollient, even when the skin looks good.

3

Creating the best possible sleep environment enables the skin time to repair: Applying emollients and/ or steroids before bed, keeping the nursery/bedroom cool, and wearing light cotton sleep wear can all help.

4

Use distraction techniques and rewards for treatment times at an age-appropriate level. Examples include singing, watching a favourite cartoon, and the use of a star chart or stickers.

5

When talking about eczema use positive language, such as 'is your eczema bothering you?' and 'How can I help?'. Avoid saying 'stop scratching' or using negative terms like 'bad skin'.

6

Older children, depending on maturity and confidence, can start to become more involved in the daily management of their eczema treatment. Consider giving them their own emollient supply to put on at school.

7

If you have a child with a sensory perception disorder or who does not tolerate having emollient applied directly to the skin, you could try a spray emollient, or experiment with ointments, creams, gels or lotions. Encourage your child to apply or assist with applying the emollient themselves. For some children, bathing in a bath of diluted emollient might be a good alternative.

Support for your eczema

Although eczema is a very visual condition, the mental health impact is often overlooked and can have a huge impact on relationships. Having eczema can affect your self-confidence and self-esteem, especially when your skin flares. It can make you feel quite down and stressed, which can lead to you feeling very alone and isolated. It is important to try to carry on with your normal everyday activities as much as possible, even when your skin is bad and your mood might be low. Sometimes trying a new hobby or activity or relaxation methods such as mindfulness, meditation or deep breathing exercises can help to boost your mental health.

During difficult, busy and stressful times it may seem difficult to maintain any routine, but it is essential that you maintain a good skin care routine. This is a very important part of managing your eczema to prevent any further worsening of your condition. This regime should include regular emollient therapy, soap substitute, topical treatments and any other medication required to help manage your eczema.



If eczema is affecting your emotional well-being, it is important to talk about your feelings. It may be helpful to speak with friends and family to help them understand how you feel. There are also lots of different types of support available online and through your pharmacist or GP practice.



When to seek help

If eczema is affecting your every day activities, you are concerned or your mood or general health is affected, it is important to speak with your healthcare professional, who will be able to offer support and advice.

It is important that eczema is diagnosed by a healthcare professional. Having an accurate

and timely diagnosis is important so the most effective eczema treatment can be started as soon as possible.

If you feel yours or your child's eczema is not improving with the current treatment, or it is affecting yours or your child's sleep or and having an effect on your family life, then it is important to seek advice from your healthcare professional.



**For more information on our services
visit www.allergyuk.org or call our
Helpline on 01322 619898**

Useful resources to help manage anxiety and stress:

Allergy UK

[Childhood Allergies - Understanding Anxiety](#)

National Eczema Society

[The mind-body connection](#)

Very Well Health

[Coping with emotions and eczema](#)

Young Minds

[How to help your child manage their anxiety](#)

Get self help

[Get self help](#)

Further sources of information and advice:

- [Eczema Care Online](#)
- [Allergy UK eczema resources](#)
- [National Eczema Society](#)
- [Eczema Outreach Support](#)
- [Itchy sneezy wheezy](#)

We're here to help

Contact our Helpline

Monday - Friday, 9am-5pm:

Call: 01322 619898

Webchat: allergyuk.org

Email: info@allergyuk.org

This eBook has been written by: Margaret Kelman, Specialist Allergy Nurse, Allergy UK.

Thank you to Ann Joy Charge Nurse, Dermatology Outpatients, Victoria Hospital NHS Fife and to Lindsay Byrne and Rachel Quin for their support in reviewing this information resource.



Skin deep is working to improve the diversity of skin images online

Photo credit: Skin Deep and Shutterstock



Published by Allergy UK 2023 - Version 1

Allergy UK is the operational name of The British Allergy Foundation, a charitable company limited by guarantee and registered in England and Wales. Company No: 4509293. Charity No: 1094231 – Registered in Scotland Charity No: SC039257



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