

Eczema

What is eczema?

Eczema, also called atopic dermatitis, is a very common skin condition that usually starts in the first few months of life. It cannot be cured but can be very well managed.

What is the cause?

The cause of eczema is not well understood, but it is an interaction between genetics, our immune system and the environment. The skin barrier becomes very poor, allowing irritants, allergens (e.g. pollen, dust mite, animal dander and certain foods), bacteria and viruses to more easily enter the body causing inflammation and worsening eczema symptoms. Eczema tends to run in families and can occur along with other atopic diseases such as asthma, hay fever and allergies although certainly not all children develop these other problems.

How can eczema be treated?

Avoid aggravating factors as much as possible

Some aggravating factors are unavoidable, such as weather changes, vaccinations and getting sick with colds.

Dryness

Avoid soap, shower gel and bubble bath. Use bath oil or soap-free wash instead. Keep the skin well moisturised. Moisturiser is best absorbed when applied straight after bathing or showering. Thicker moisturisers are more effective than lotions and cause less stinging. Some examples of suitable moisturisers for sensitive skin include sorbolene cream with 10% glycerin, QV cream/intensive cream/ointment, CeraVe cream, Epaderm cream/ointment and Dermeze cream/ointment.

Exposure to irritants

This includes exposure to things such as:

- prickly materials like wool
- grass and sand
- dribble/saliva
- foods such as tomato sauce or citrus fruits (Vaseline can be applied around the mouth before eating).

Overheating

Children with eczema get hot very quickly and heat will aggravate their skin. Do not overdress and avoid heavy doonas on the bed. Do not use a heater in the bedroom in winter.

Infection

Eczema easily becomes infected with bacteria (particularly *Staphylococcal aureus*) and viruses (herpes cold sore virus, warts and molluscum). It is very important to keep children with eczema away from anyone with a cold sore or with school sores.

Treat active eczema and itchiness with steroid ointments

Cortisone (topical steroid) ointments are needed for areas which are inflamed and itchy. It is very important to start treating these areas as soon as they flare (i.e. rough or itchy skin), applying the steroid once daily until the itch has gone and the skin feels smooth. All areas of inflammation must be treated, not just the worst. A very common reason eczema does not get better is underuse of topical steroid.

Are cortisone creams safe?

Topical cortisones are extremely safe when used correctly. Patients are often told these creams will thin the skin, but this is very rare as eczema tends to thicken the skin. There is very little absorption into the body so natural cortisone production is not affected.

There has been a lot of recent information on social media about 'topical corticosteroid withdrawal syndrome', which has caused concern for many families. Eczema is a condition which initially tends to flare and recur, due to memory cells in the skin immune system. It takes time for the skin to be "re-trained", so it is very important that these flares are quickly treated with the topical cortisone. If it constantly flares when the creams are ceased, as can occur in very severe cases, it means other treatments (involving oral medications or injections) are required. The flares are not the fault of the cortisone creams, it just means they are not enough to control the inflammation in these severe cases.

Eczema is not a trivial condition and has much potential to harm the child. By treating it well with good skin care and topical cortisones:

- We help prevent food allergies. 90% of food allergies occur through the skin, so improving skin barrier function is extremely important, particularly in infancy.
- We help to reduce skin infections.
- By reducing itching, sleep improves (often for the whole family!) and daytime behaviour, concentration and learning ability improve.
- We improve growth, which is held back by chronically inflamed skin.
- The skin looks better, which makes the child feel better about themselves in school and social settings.

Should antihistamines be used?

Sedating antihistamines can be given during flares to help nighttime sleep. However, it is generally better to reduce itching with topical cortisone than just to sedate the child.

Should allergy testing be done?

It is often thought eczema is caused by an allergy and will disappear once that substance is avoided. Unfortunately, eczema is not this simple.

Most children with eczema do not have any adverse reactions to food. When allergies are present, they are a problem in themselves but rarely are they the central driving force for the eczema. Most food allergies are obvious to parents, developing within 30 minutes to 2 hours of eating the food. They can present with vomiting or welts/ hives on the skin, often with some skin swelling. Allergy testing is helpful if there are clinical signs or symptoms of allergic reaction, (and is also very useful in monitoring allergies), but it will not pinpoint the cause of the eczema.

In older children, allergy testing can be helpful in identifying environmental allergies, such as dust, grasses and animal fur.

Should dairy and wheat be excluded from the diet?

The diet should only be changed if there is clear evidence of an allergy. This should always be done under medical supervision. If you have concerns regarding food allergies these should be discussed with your doctor. Unless there is a known or suspected allergy, all infants should be given a wide range of foods including smooth peanut paste, cooked egg, dairy and wheat products in their first year of life.

Should we try “natural” treatments?

Unfortunately, the words “natural” and “organic” have become quite twisted and misused. Beware creams and medicines where the ingredients are not known and where there is no quality control. Remember not everything that is “natural” is safe and not everything that is unnatural is unsafe!

What about supplements such as evening primrose oil and probiotics?

We still don't have enough evidence to routinely recommend probiotics. Evening primrose oil and fish oils have been well studied and do not help clear eczema.

Can my child go swimming?

Yes. Swimming in outdoor pools and at the beach is usually helpful although it is best to rinse the skin with fresh water and moisturise well afterwards.

Can my child be vaccinated normally?

Yes. All children with eczema should have their immunisations.

Can my child use sunscreen?

Yes, although most sunscreens will irritate very inflamed skin. In this situation, physical protection with clothing is better. Gentle sunshine exposure (definitely not sunburn) is helpful to most eczema.

Will my child grow out of the eczema?

Many children do improve over time, but they improve much faster if it is well managed. Our goal is clear skin and a happy child!



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