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## **CHILDREN'S ECZEMA AND RECOMMENDATIONS FOR ITS TREATMENT**

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### **Annotation**

Eczema is a very common skin problem. The most common form of eczema is called atopic dermatitis. Atopic dermatitis often begins in infancy, affecting about 15 to 20% of children. It usually improves as the child grows older and may resolve by school age or puberty. Some children with atopic dermatitis may have more chronic disease. Complex therapy is used to treat eczema and is selected individually by the doctor for each patient.

**Key words:** atopic dermatit, allergen, inflammation, red skin, drying,

Children with eczema have a form of "sensitive skin" that may be more easily irritated by sweating, heat, rough clothing and some detergents, soaps and cleansers. Children with atopic dermatitis may have allergies to foods, pets or other animals, dust mites, tree pollens and grasses, although it is not clear that these allergies actually "cause" the eczema in most children. In most cases, identifying these allergies does not help the eczema. Rarely, some children with atopic dermatitis may develop allergies to chemicals in their moisturizers, other skincare products, clothing or topical medications.

Children with eczema develop red, dry, itchy patches on the skin that result from inflammation. Itching may be severe and constant. With frequent scratching, the skin may develop blisters, oozing, crusting, or sores from infection. Sometimes, if the child scratches for many weeks to months, the skin may start to become very rough, leathery and darker in color. In infants, eczema commonly affects the face, scalp,



arms and legs. In older children, eczema may involve only the insides of the elbows and backs of the knees. Some children with severe eczema may have involvement of their entire body. Eczema is very itchy.

There is no cure for eczema, although it can usually be controlled with good skin care. Frequent follow-up with your doctor is important so they can see whether the prescribed medicines are working. Your doctor may need to adjust treatment during different seasons of the year, during flares, or as your child gets older.

#### Topical (Skin) Medicines

Apply a small amount of medicine to affected areas up to two times a day as needed to keep the eczema under control. You may not need to use the medicine every day. Always apply the topical medication before moisturizer. Try to wait at least 30 minutes before applying moisturizer. If eczema flares, you may need to use a stronger topical steroid for a short time. Use these steroids twice a day or as instructed by your doctor on areas that have flared in place of your everyday steroids. Call your doctor if the areas are not any better after seven days. As the eczema improves, you should be able to use the topical medication less often, ideally two to three times a week or less, to keep your child's skin clear. Do not overuse or abuse the topical steroids. Doing so can harm your child's skin, such as stretch marks and spider veins.

#### Moisturizers

It is important to moisturize from the inside, so have your child drink plenty of water. Apply a thick layer of moisturizer 30 minutes after you apply any topical medicines. This allows time for the medicine to be absorbed into the skin. The moisturizer will then seal in the medicine. In general, ointments or creams are preferred over lotions. Do not use a moisturizer that comes in a pump bottle, as these are usually lotions. Some children find ointments like Vaseline and Aquaphor too greasy to use in the summertime. It makes them uncomfortable when they sweat.

#### Antihistamines

Antihistamines are a type of allergy medicine. They can also be used to decrease itching. They are most helpful when given before bedtime (antihistamines can make your child sleepy). Antihistamines include hydroxyzine (Atarax) and diphenhydramine (Benadryl). Follow the dosage instructions on the package.



Some children with environmental allergies and allergic rhinitis (itchy, watery eyes and stuffy nose) may also need to take a daily, non-sedating antihistamine such as cetirizine (Zyrtec), loratadine (Claritin) or fexofenadine (Allegra) in the morning to control their allergy symptoms.

#### Wet wraps

Wet dressings can be placed on the child after applying topical steroid medication. This makes the medication more effective by helping it penetrate deeper into the skin. Tubifast is a type of tube dressing that comes in many sizes. It can be cut to fit areas of the body such as arms, legs, and torso. You may also use ace wrap, or wet cotton pajamas. After the nighttime dose of topical steroid application is ideal, as the child can then wear them to bed for increased duration of treatment. They can also be worn after application of moisturizing cream to more effectively lock moisture into the skin.

Conclusion, eczema is a dermatological disease characterized by the appearance of papules (nodules) with serous contents, swelling and itching of the affected skin areas. It can occur in a dry and wet form, differing in the polymorphism of the manifestations of the rash. The inflammatory process in eczema is allergic in nature, but the causes of the disease can be different, for example, prolonged contact of the skin with an allergen, metabolic disorders, pathologies of the nervous and endocrine systems.

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