

Dermatology Associates of Plymouth Meeting

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What is Eczema?

Dermatitis, atopic dermatitis, and eczema are terms that are often used interchangeably. These conditions can be classified as acute or chronic. Dermatitis is often acute and refers to an area of irritation usually because of contact with some type of allergen. With Acute Dermatitis the skin is often darker, thicker and itchier than surrounding unaffected skin.

Chronic Dermatitis is also known as Atopic Eczema. This is often characterized by red swollen, scaly, blistering areas. This condition is particularly prevalent in children and usually there is some type of family history of the disease. Psychological stress can provoke or aggravate this condition, because it interferes with suppressing normal immune responses.

Seborrheic dermatitis (dandruff) is related to a yeast called *Pityrosporum ovale* (also known as *Malassezia furfur*). People with this form of dermatitis seem to have a reduced resistance to this yeast. For some unknown reason, people with certain neurological disorders including Parkinson's disease and stroke are particularly prone to this form of dermatitis. Seborrheic dermatitis appears after puberty. It varies in severity and can persist for years.

Dermatitis is not contagious.

Causes of Dermatitis

Allergic Contact Dermatitis is caused by skin contact with substances such as latex, perfume, metals, hair dye and other chemicals. Very few people have a reaction to these and other substances but when sensitive, they can be very problematic.

Handling irritants such as detergents and other cleaning solvents, harsh chemicals and friction causes other forms of Dermatitis.

Seborrheic Dermatitis is caused by a reduced resistance to the yeast known as *Pityrosporum ovale*. It can be aggravated by other illnesses, stress and fatigue.

Diagnosis

Dermatologists can usually identify the type of dermatitis by sight and when necessary patch testing, to rule out allergic contact dermatitis, is performed to determine the source of the allergen.

Treatment

The most important aspect of treatment is to identify and address the source of the condition. Once the source has been identified, your physician can help to correct and control it.

These treatments include:

- Antibiotics
- Antihistamines
- Topical Steroid Cream/ointments
- Anti yeast Creams
- Medicated shampoos
- Systemic steroids
- Tar creams

Self care and long-term control

Allergens: protect the skin and avoid known skin allergens

Bathing: use lukewarm water. Showers are better. Do not use standard bar soap. Use a mild substitute cleansing bar or liquid that your dermatologist recommends. No scrubbing with any abrasive item.

Clothing: wear soft cotton clothes that are comfortable and not tight.
Avoid wool if possible.

Irritants: protect the skin and avoid known irritants

Moisturizers: apply non-perfumed moisturizers liberally and as often as necessary, particularly after bathing. Dermatologists can recommend appropriate products.