

# My child has eczema?

## Information for parents and teachers

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### Understanding eczema



- √ The scientific name is Atopic Dermatitis
  - Dermatitis = an inflammatory disease of the skin
  - Atopic = in 80% of cases, the child has a predisposition to allergies (i.e. there are allergies within the family) and the child can develop another allergy-related pathology (e.g. asthma)

## ✓ Everything begins in infancy, with dry skin that becomes porous and cracks

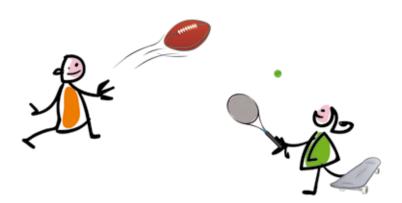






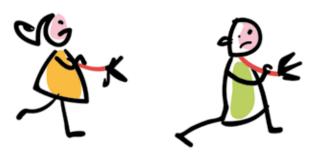
Dry skin

Scratch marks



## Impact on daily life

- ✓ Dry, inflamed patches caused by eczema are extremely itchy: the pruritus is considered unbearable
- ✓ This widespread pruritus causes sleep disorders, irritable behavior and, at times, difficulties at school
- ✓ Heat, sweat and stress aggravate the lesions and pruritus



## How does it progress?

- $\checkmark$  15% to 20% of infants have eczema, but in 80% of cases, it disappears within three to six yearss
- ✓ However, in light of the family's medical background, the child may develop allergies:
  - To food, in particular among infants
  - Respiratory, in kindergarten: the child is out of breath, often coughs or cries after physical exertion, which can be the first signs of asthma



### What are the treatment principles?



#### ✓ The skin is dry:

• It has to be hydrated using moisturizing creams and emollients that protect the skin like a film; these local topical solutions, purchased without a prescription, are to be used when needed (a number of times every day)

#### ✓ The skin is inflamed:



- Parents must apply local anti-inflammatories to the lesions
  - either an ointment with a corticosteroid (dermocorticosteroid)
- or, after the age of two, an ointment with an immunomodulator
- These highly effective treatments require a doctor's opinion and explanations

## Are corticosteroids dangerous?

- ✓ Dermocorticosteroids do not have the same side effects as cortisone taken orally
- ✓ They are applied once per day only on the lesions and until full healing or after a relapse
- ✓ They are very effective for inflammations, itching, insomnia, etc, so optimize
  the young child's lifestyle and accelerate healing
- ✓ The main enemy of an eczematous child is suffering and a fear of dermocorticosteroids!



### Hygiene rules for school

#### ✓ A child with eczema fears heat:

- Avoid wool sweaters in the classroom
- Ban turtlenecks
- Do not seat the child close to a radiator

#### ✓ A child with eczema has sensitive skin:

- Some soaps are caustic for the child (parents can provide a detergent-free gel for hand washing)
- Some activities can be irritating (latex gloves, some house plants, small animals and even Play-Doh®)
- Chlorine in pools irritates the skin (shower after swimming, dry by patting and apply an emollient)

## Is an individual plan ("PAI") required?

#### ✓ Not for isolated eczema

#### ✓ A plan is required if a respiratory and/or food allergy is present

- Who asks for it? The parents
- Of who? The school principal
- Who prepares the plan? The school doctor
- Based on what? Instructions from the child's doctor or allergist
- What does the plan lead to? Often, dietary measures (elimination of certain foods) and emergency measures to be adopted should symptoms occur

# What is the relationship between eczema and a respiratory allergy?

- ✓ The risk of minor eczema evolving and becoming an illness such as asthma
  or hay fever, thereby creating an intolerance (allergy) to mites, animal hair,
  pollen...
- ✓ Asthma may be present:
  - If the child coughs a lot, especially at night or when physically active or if the child has a cold (virus)
  - If the child loses his breath when playing sports
  - If breathing is difficult or has a whistling sound

## Are the sun and eczema compatible?

- ✓ In general, moderate exposure to the sun improves eczema.
  For adults suffering from eczema, phototherapy treatment is recommended, but not for children
- ✓ Like **any child,** remain cautious: no direct exposure between noon and 4:00 pm, plus a hat, sunglasses, loose clothing and sun protection cream

# What is the relationship between eczema and a food allergy?

- ✓ An infant with eczema may develop a food allergy, expressed through clinical symptoms (acute urticaria, chronic digestive problems, unusual crying with delayed growth...) and confirmed via tests (skin, biological and stimulation tests)
- ✓ Certain food allergies are easily cured (cow's milk, for example); others are tenacious or definitive (peanuts, for example)
- ✓ Most minor eczemas, however, do not cause food allergies



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