

Eczema

What is Eczema?

The word **Eczema**, also known as **Dermatitis**, comes from the Greek word 'Ekzein' which means 'to boil' or 'bubble'. **Eczema is not contagious** so **you cannot catch it** by touching someone who has it. A common dry skin condition that is characterised by **red, inflamed** and **itchy skin**, which can occur all over the body, eczema varies in severity and can be classed as **clear, mild, moderate or severe**. A person affected by the condition will go through periods when it worsens (known as **flare-ups**) and times when it gets better (**remissions**), unfortunately, it is not curable, however, in the majority of cases it can be controlled. There are many different types of eczema and these include:

- Atopic Eczema
- Allergic Contact Eczema
- Irritant Contact Eczema
- Seborrhoeic Eczema
- Nummular or Discoid Eczema
- Dyshidrotic, Vesicular or Pompholyx Eczema
- Lichen Simplex or Neurodermatitis
- Stasis, Varicose or Gravitational Eczema
- Asteatotic Eczema or Eczema Craquelé

Who gets Eczema?

There are many different types of eczema and of all of them the most common form is **Atopic Eczema**, which can occur at any age, however, it is especially **common in children**. It affects **1 in 5** children in the UK with about **half** of these cases improving by the time **they reach 11** and **two-thirds** by the **age of 16**, unfortunately, even though it improves, there may be flare-ups (times when it gets worse) later in life. Atopic Eczema tends to run in families so a child is more likely to develop eczema if one or both parents have it (37.9% and 50% respectively) compared to children whose parents don't have it (27.1%). Although there is a family history the link doesn't always have to be between parent and child as it can skip a generation.

Depending on its severity it can cause intense itching which can lead to sleep disturbances affecting the quality of life of the child, parent and/or carer. Eczema can also occur in **adults** and in fact affects **1 in 12** in the UK.

Causes

Atopic Eczema is likely to be caused by a combination of **genetic** and **environmental** factors. The genetic part causes a defective skin barrier which makes the skin more susceptible to triggers such as irritants, pathogens and allergens.

To understand what happens in eczema we need to first look at the skin barrier and its function. The best way to think of this barrier is as a brick wall which, in healthy skin, keeps **pathogens, irritants** and **allergens** out whilst **preventing** the **loss of water** and other substances. Within the barrier the individual bricks are the skin cells, these are swollen with water and so sit tightly against each other. They are surrounded by extracellular lipids (the mortar) giving you a **smooth** and **strong semi-permeable** barrier, through which there is some water loss, this is known as **Transepidermal Water Loss** or **TWL** and is normal.

In eczema the skin barrier is no longer effective as a result of the **breakdown** of the extracellular **lipids** and a **reduction** in the amount of water in the skin cells. These skin cells start to **shrink** and gaps form between them and, as a result of the breakdown of the extracellular lipids, cracks start to appear in the skin (the mortar is crumbling). We now have a barrier with **cracks and gaps** which allows **irritants, allergens** and **pathogens** in and more water, than the normal transepidermal water loss, to be **lost**. This causes **dryness, inflammation, itching** and **eczema flare-ups**.

You can find out more about the skin barrier at www.aproderm.com/the-skin-barrier/

Itching and inflammation can lead to scratching which can lead to further irritation exacerbating the itch-scratch cycle and making the eczema worse. Scratching can also break the skin causing it to bleed, leaving it open to infections and can result in thickening of the skin.

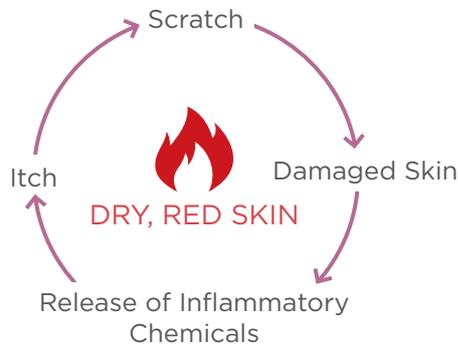


Fig 1 The Itch - Scratch Cycle

Common Triggers

People with eczema have a heightened reaction to sensitisers, irritants, allergens and pathogens so they suffer more inflammation when exposed to them compared to someone who doesn't have eczema. Certain factors (known as triggers) can cause eczema to flare-up or get worse and, not only do triggers vary from person to person, but so does a person's actual response to them. Common triggers include:

- ❁ Sensitisers & irritants in skincare products including emollients – SLS, parabens, halogens, fragrances and colours
- ❁ Irritants – soaps, detergents, bubble baths, washing detergents and disinfectants like chlorine
- ❁ Allergens – pet dander, mould spores and house dust mites
- ❁ Certain fabrics such as wools or dyes and finishes in new clothes
- ❁ Microbes – bacteria, fungi and viruses
- ❁ Stress
- ❁ Temperature – extreme hot or cold weather, extremes in humidity – high and low
- ❁ Foods – examples include nuts and dairy products – identifying food triggers should be done only with the help of a dietician or doctor
- ❁ Pregnancy and hormonal changes before a period
- ❁ Sweating during exercise
- ❁ Swimming

If a person can identify what triggers their symptoms, they can then avoid them and so reduce the risk of flare-ups. However, sometimes it can be difficult to identify triggers and certain triggers, such as pregnancy and hormonal changes before a period, cannot be avoided. Food triggers should only be avoided after consultation with a healthcare professional such as your doctor or dietician. For more on triggers and other useful information visit our [tips and advice section at www.aproderm.com/tips-and-advice](http://www.aproderm.com/tips-and-advice)

Symptoms

Symptoms of eczema vary depending on the severity of the condition.

In mild cases the skin is:

- ❁ Dry
- ❁ Red
- ❁ Itchy
- ❁ Scaly

Whilst in severe cases it can be:

- ❁ Intensely and constantly itchy
- ❁ Inflamed
- ❁ Weeping
- ❁ Crusted
- ❁ Bleeding
- ❁ Possibly infected
- ❁ There may be darkened or lightened skin patches

Treating Eczema

Currently there is no cure for eczema, however in the majority of cases the condition can be managed. When treating eczema, you should bear in mind that even though you may have it on various parts of your body, the severity of each area may vary and so the different areas should be treated individually. The first step to managing your eczema would be to avoid any known triggers, however this can be difficult in some cases and even impossible in others, for example if one of your triggers is hormonal changes before a period there is not a lot that you can do to avoid it. Severity of the condition can be classed as:

- ✿ Clear – skin looks normal and clear.
- ✿ Mild – in these cases there are some areas of dry skin present, occasional itching and possibly some small parts that are red.
- ✿ Moderate – areas of dry skin are present, itching occurs often, there are red areas, skin may be damaged, scratched or thickened.
- ✿ Severe – there are lots of areas of dry skin, itching is continuous, as well as red areas there may be damaged or scratched skin, lots of thickened areas, bleeding, oozing, cracking and changes in skin colour.

Treatments will vary depending on the severity of the eczema and will be stepped down or up as the condition gets better or worse, however emollients such as AproDerm® form the basis for all treatments and should always be used even when your eczema has cleared as this reduces the risk of flare-ups.

Emollients are moisturising treatments which are used to break the itch-scratch cycle and to maintain the smoothness of the skin. They work by:

- ✿ Soothing the skin
- ✿ Reducing scaling
- ✿ Helping skin retain water
- ✿ Softening cracks
- ✿ Moisturising the skin
- ✿ Protecting the skin
- ✿ Easing itching

Emollients are therefore leading symptomatic treatments for eczema, where a person's skin has become reddened, dry, itchy and cracked, however many emollients contain SLS, parabens, halogens, fragrances and colours, these substances can irritate and sensitise the skin with eczema sufferers being particularly sensitive to their effects.

The AproDerm® Range of emollients are suitable from birth and are:

- ✓ Parabens free
- ✓ SLS free
- ✓ Halogen free
- ✓ Colour free
- ✓ Fragrance free

- ✿ They work by forming a protective layer over the skin surface, trapping in water which then goes into the skin cells, rehydrating them and causing them to swell again. AproDerm® also penetrates through the upper layers of the stratum corneum filling the gaps between the skin cells so that they are once again surrounded, thus restoring the skin barrier so that irritants, pathogens and allergens are kept out whilst keeping in water and other substances. Rehydration of the skin helps relieve the itching, irritation and discomfort associated with eczema.
- ✿ AproDerm® Colloidal Oat Cream has a number of additional benefits and mechanisms of action. Specially developed with active colloidal oatmeal, which is proven to protect and restore the skin's surface. Oatmeal has been used for centuries to soothe and relieve the itch and irritation associated with dry skin conditions like eczema. It has also been clinically proven to improve dryness, scaling and roughness and with its direct anti-inflammatory and anti-oxidant properties, colloidal oat restores the skin barrier damaged by eczema. AproDerm® Colloidal Oat Cream also has humectant, buffering and cleansing effects.