

How should a patient with atopic eczema be managed?

The algorithm below plots a way through this difficult subject.

Atopic eczema management

For all patients with atopic eczema¹⁵

Topical treatment

- The regular and frequent use of emollients after bathing
- Washing with a soap substitute such as aqueous cream; use of bath oils
- Teach patients when to use plain topical corticosteroids and when to use steroid/antibiotic combinations for exacerbations

General advice to lead as normal a life as possible but

- Keep the nails short
- Try to wear cotton next to the skin – avoid wool
- Consider joining National Eczema Society*

Highly polished nails which, though reasonably short, can still be used for rubbing, if not scratching



- Discuss condition and outlook fully with patients and parents soon after the diagnosis has been made
- Offer career advice for children (see page 10)

Satisfactory progress?

yes → Continue as necessary

An acute exacerbation?

yes →

- Consider superinfection with *Staphylococcus*
- Ask primary care nurse to help review patient with emphasis on compliance and advice
- Consider a herpes simplex virus (will need immediate use of a systemic antiviral agent and referral to hospital)

Eczema herpeticum; patients with atopic dermatitis are particularly susceptible to widespread herpes simplex infections. A systemic antiviral agent will be needed



General failure to respond? Other measures are needed:

Ask experienced primary care nurse to help with more elaborate dressings

Try further advice

- Don't keep pets
- Dietary advice – but avoid only foods to which genuine intolerance exists. Do not encourage cranky dieting
- Consider ways of reducing house dust contact – a Gore-Tex bedding cover may be the most effective
- Perhaps children at special risk of getting eczema should be breast fed for their first six months, although this is debatable

Consider systemic treatment

- A sedative antihistamine (e.g. trimeprazine or hydroxyzine) may help if sleep is interrupted
- A month's course of a systemic antibiotic may be helpful if topical measures are not succeeding

Contact hospital liaison nurse for further advice on dressings or refer to hospital dermatology department

A nurse who is expert in applying dressings is an asset to any practice. Here a tubular gauze is being applied over ichthammol paste for an extensive eczema



Satisfactory progress?

yes → Continue as necessary

* National Eczema Society address is: 163 Eversholt Street, London NW1 1BU