

## DocTalk

# Controlling eczema is like firefighting

Practise daily preventive skincare to limit flares, avoid having to treat painful itching



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Whenever a baby has eczema, many parents think of food allergies.

However, many babies with eczema, especially those with the classic dry, itchy skin for months or more, do not have food allergies.

It would be unwise to have the baby avoid “allergenic” solid foods, or have the breast-feeding mother avoid certain suspect foods, without verifying those suspicions with a paediatrician who specialises in allergy.

Nutrition is vital for the growth and development of the baby, as well as the health of the breast-feeding mother.

Avoiding important foods will be detrimental to most babies with eczema.

Furthermore, unnecessary avoidance of food can increase the risk of developing a food allergy since an early, regular ingestion of food is protective against food allergy.

Regardless of whether the child has food allergy or not, eczema needs to be controlled with skincare.

There is only one target of skincare in children with eczema – to stop them from scratching.

This means stopping the itching as much as possible.

For those with classic eczema, since the dryness causes most of the itch, moisturisers remain the mainstay of treatment.

There are many brands of moisturisers in the market and no one brand is dominant because people respond differently to different moisturisers.

For children who need frequent applications of moisturisers every day, I suggest a “trial of moisturisers”.

Get a small tube, or tub, of a few different brands. Then spend one to two days applying each brand.

By the end of this trial, the child and parents may find a “best moisturiser”, the one that the child likes most and requires the least amount of application in order to

stop the itching.

This is beneficial in the long run because the need to apply moisturisers every day for years can be tiring.

In some children, skin bacteria can worsen the itch and they will need an antiseptic wash as well.

Local application of zinc-copper-sulphate can help too.

This may work through skin absorption: Though the studies on childhood eczema are conflicting, they suggest that some children with eczema may have a mild deficiency of zinc that worsens their condition.

I liken the care of all chronic health conditions, such as eczema, to firefighting. This is the long-term view.

The episodes of eczema flares are like episodes of fires breaking out.

It is far better to prevent a fire breaking out – through preventive measures – than to fight fires because we were careless.

Because even when we can put out the fires, damage to property and lives can be permanent and expensive.

Prevention of flares requires regular, preventive skincare.

The consequences of constant scratching, which is itself uncomfortable and painful, are much more troublesome to deal with than the inconvenience of daily preventive care.

In addition, it predisposes the skin to episodes of infection, to the point where the child often needs antibiotics, steroids and a very intensive skincare regimen, while recovering from the infection.

Another consequence is lichenification: The child’s skin becomes thick and lined, similar to the bark of a tree, which can be unsightly.

Once lichenification occurs, it takes years for it to disappear, even if the child stops scratching completely from then on.

No child wants to go through all these unpleasant episodes.

Most parents do not want their children to be medicated unnecessarily.

But by not wanting to use medications and not using moisturisers regularly, children may miss out on the skincare they need.

In the long term, it costs less time and money, uses less medication and gives a better quality of life to the child to



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practise prevention, rather than react to the consequences of insufficient prevention.

This does not mean that these measures can insure 100 per cent prevention of all “fires” in future.

This is because flares can be caused by the irritation of skin, such as when children are hot and sweating for a long time; or by illnesses, such as a flu, which appear to activate the immune system and cause a flare.

When a “fire” does break out, we should reassess the measures to see if we can do better to stop it from happening again.

We have parents who devote a lot of effort to skincare to the point of exhaustion.

They should not feel guilty if their child has a flare – just deal with the flare, reassess and carry on.

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