Information about atopic eczema

(constitutional eczema or atopic dermatitis)

What is it, who can help you, and what can you do yourself?

Nationaal **Constitutioneel Eczeem** Project

Information about atopic eczema

(constitutional eczema or atopic dermatitis)

What is it, who can help you, and what can you do yourself?

This eczema guide is intended for both children and adults.

Summary

What is atopic eczema?

There are different types of eczema. This brochure is about atopic eczema. We simply call this 'eczema' in this brochure.

When you have eczema, you get itchy patches on your skin. These patches are red or dark in colour. They can also be flaky or bumpy, chapped or scabby.

Eczema often starts in childhood, but it can start at any age. Lots of children and adults have eczema

and it is not contagious. You can touch and hug other people as normal.

How do you develop atopic eczema?

Eczema is not an allergic reaction and is also not caused by an allergic reaction.

Your genetic makeup has a major influence on whether you develop eczema. Often, multiple people in the same family suffer from eczema.

Things you can do yourself

You cannot change your genetic predisposition to eczema. Even so, you can do the following:

• Avoid irritants and triggers that irritate your skin and make your eczema worse as much as possible.

Examples include:

- hand wash, shower gel
- long, hot showers
- cleaning products
- clothing made of wool
- Apply cream to your skin.

What can you expect once you've got eczema?

Your eczema symptoms will often last for a few years before clearing up. Sometimes, your symptoms won't go away.

The symptoms of eczema can be treated fairly easily using cream.

Apply cream

• Always apply an emollient

Apply an emollient **to your entire body** every day. An emollient is a nonmedicated salve.

• Medicated cream (corticosteroid)

In consultation with your practitioner, you can apply medicated cream **to your eczema patches only**. The medicine in this cream is a corticosteroid. It resembles cortisol, a natural hormone also produced in your own body.

This cream is safe for both adults and children, when used in the right way.

This booklet tells you more about how to use the medicated cream safely. **Please note:** Use the cream as instructed by your practitioner!

Proper treatment is essential, as eczema can have a major impact on how you feel.

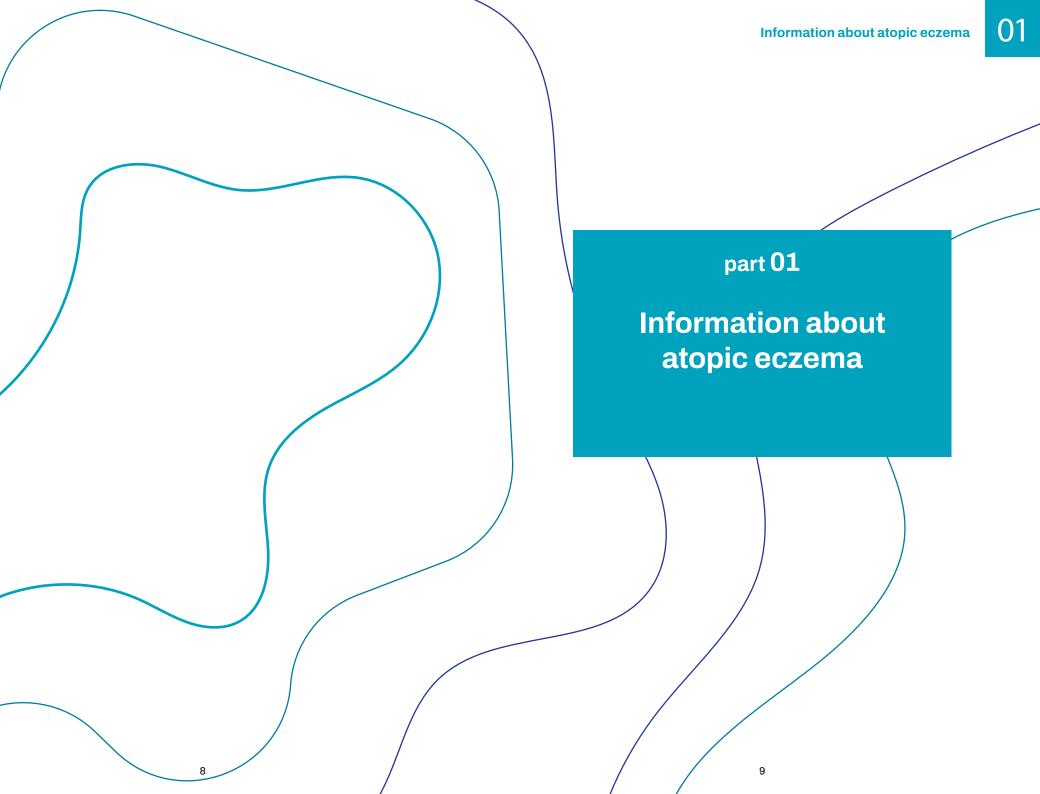
This eczema guide has three parts

Part 01	Information about atopic eczema
Part 02	Things you can do yourself
Part 03	Enclosures

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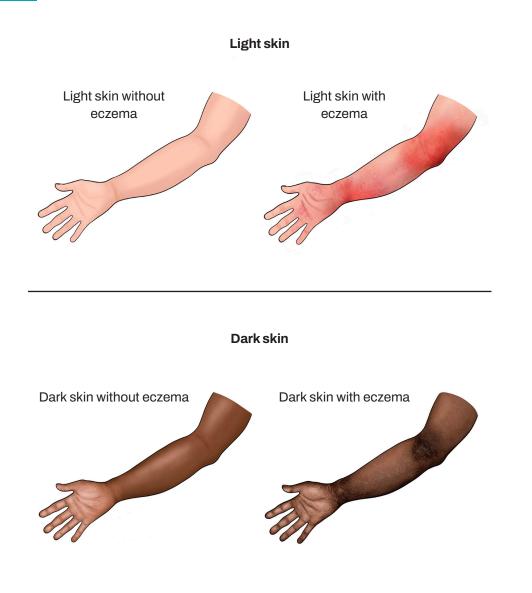
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In part 1 of this eczema guide, you'll read about the following:

- What is atopic eczema?
- What are the causes?
- What is the treatment?
- Which healthcare professionals can help you?



1. What is atopic eczema?

There are different types of eczema. This brochure is about atopic eczema. We simply call this 'eczema' in this brochure.

Other names for atopic eczema include:

- Constitutional eczema
- Atopic dermatitis
- Infantile eczema

Symptoms

When you have eczema, you get itchy patches on your skin. These patches are red or dark in colour.

The colour of the patches depends on the colour of your own skin. If you have light skin, the patches will be red, but if you have dark skin, the patches will be darker than the rest of your skin.

Your eczema patches can also be flaky or bumpy, chapped or scabby. You skin will feel dry too.

If you have eczema for a long time, your skin may get raw and thick.

Eczema often starts in childhood, but it can start at any age. Your symptoms will often last for a few years before clearing up. Even so, your genetic predisposition to eczema will remain, so your eczema may return.

Some people will always have symptoms.

Eczema is not contagious You can touch and hug other people as normal

Many children and adults have atopic eczema.

Children

15% of all children have eczema.

What this means is that out of every 100 children, 15 children have eczema, and 85 children do not have eczema.

Children under the age of 2 are especially prone to eczema.

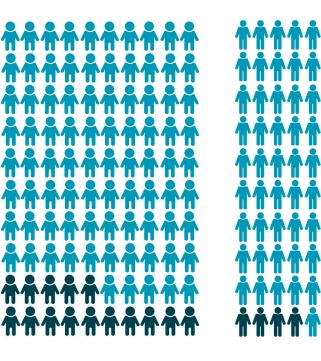
Adults

4% of all adults have eczema. Out of every 100 adults, 4 people have eczema, and 96 people do not have eczema.

Children

Adults





3. On which parts of the body does atopic eczema occur?

Eczema can occur anywhere on your body.

Even so, for each age category, there are places where eczema occurs most frequently:

In babies and children up to the age of 2

- Cheeks
- Forehead
- Outside of the elbows
- Knees
- Upper body

In children up to the age of 12

- Inside of the elbows
- Back of the knees
- Ankles and wrists
- Neck
- Around the eyes

In young people from the age of 12 and adults

- The same places as children up to the age of 12
- Hands
- Around the mouth

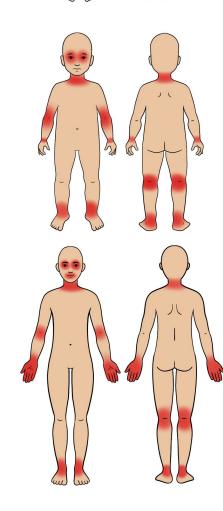
Young people from the age of 12 and adults

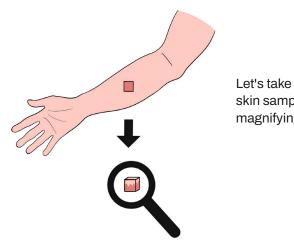
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Babies and children up to the age of 2

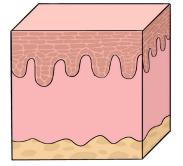
Children

up to the age of 12





Let's take a look at a skin sample through a magnifying glass.

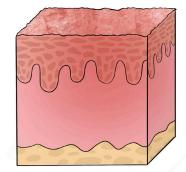


Outer layer of the skin

Middle layer of the skin

Inner layer of the skin

Skin without eczema



The cells in the outer layer of the skin are more loosely arranged

4. What are the causes of atopic eczema?

Your genetic makeup has a major influence on whether you develop this type of eczema.

Genetic predisposition

It has been proven that some people have a genetic predisposition to eczema. This means eczema may occur elsewhere in your family, though not necessarily so. You cannot change this genetic predisposition.

Your skin is made up of three layers:

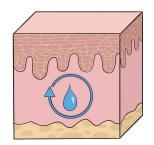
- Outer layer of the skin (epidermis)
- Middle layer of the skin (dermis)
- Inner layer of the skin (subcutaneous tissue)

In skin without eczema, the skin cells at the top of the outer layer of skin are tightly packed against one another.

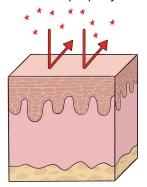
In skin with eczema, the skin cells at the top of the outer layer of skin are more loosely arranged. This is caused by your genetic predisposition.

Skin **with** eczema

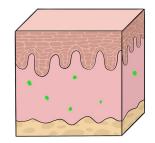
Skin without eczema



The skin is able to retain moisture properly

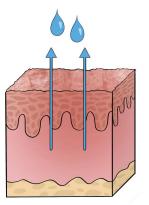


The skin provides proper protection against irritants and triggers

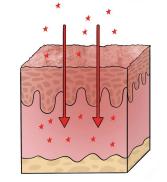


The immune system is healthy

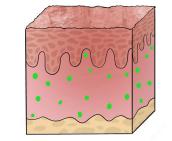
Skin with eczema



Moisture can easily escape through the skin



Irritants and triggers can more easily penetrate the skin



The immune system is overactive in the skin

The skin of someone without eczema

The skin of someone without eczema is able to retain moisture properly and offers good protection against external irritants and triggers. The skin is soft and supple.

The skin of someone with atopic eczema

The following things are different in the skin of someone with atopic eczema:

- The skin cells in the outer layer of the skin are more loosely arranged This has two consequences:
- Moisture can escape through the skin more easily.
- This causes dry skin and is likely to leave you feeling itchy.
- Irritants and triggers can penetrate the skin more easily.

• The immune system is overactive in the skin

The immune system is overactive in the skin and also reacts to normal products and triggers that come into contact with the skin. This causes inflammation of the skin, which in turn leads to eczema.





Irritants and triggers that may cause eczema

5. What makes eczema worse?

You cannot change your genetic predisposition to eczema. One thing you can do is avoid **irritants and triggers** that irritate your skin and aggravate your eczema as much as possible. Eczema is not an allergic reaction to these irritants and triggers.

Exactly which irritants and triggers irritate your skin differs from person to person.

Examples of irritants and triggers that may cause eczema include:

- Hand wash, shower gel and shampoo
- Long, hot showers or baths
- Cleaning products
- Clothing or blankets made of wool
- Fragrances
- Sweating
- · Hot weather or cold weather
- Alternating hot and cold weather
- Scratching

The following things may also make eczema worse:

- Feeling tired
- Viral or bacterial illness
- Examples include a sore throat, a cold or flu
- Hay fever or asthma symptoms
- Stress/tension

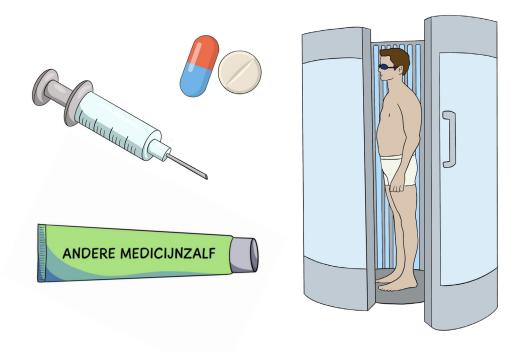
Try to live healthily: get enough sleep, eat healthily and avoid stress.

Your eczema may still flare up even when you avoid certain irritants and triggers as much as possible. After all, you cannot change your genetic predisposition to eczema.

However, you can keep your eczema symptoms under control by treating your eczema.

BASISZALF

MEDICIJNZALF



Available treatments

6. How do you treat atopic eczema?

Applying cream can ease the symptoms of eczema. The type of cream and the amount of cream differs from person to person.

Together with your practitioner, you'll decide what the best treatment is for you.

Proper treatment is essential, as eczema can have a major impact on how you feel. This applies to both children and adults.

Always apply an emollient

Apply an emollient **to your entire body** every day. Keep applying this cream even when you don't have any eczema patches.

In consultation with your practitioner: Medicated cream (corticosteroid)

In consultation with your practitioner, you can also apply medicated cream **to your eczema patches**. The medicine in this cream is a corticosteroid. It resembles cortisol, a natural hormone.

Also in consultation with your practitioner: Other treatments

If the emollient and medicated cream are not enough, other treatments are available, including:

- Other types of medicated cream.
- Light therapy.
- Medicines that suppress your immune system. These may come in the form of pills or injections.



A father applies an emollient to his child



A mother applies an emollient to her baby

6.1. Always apply an emollient

An emollient is a non-medicated cream. Examples of these creams can be found in the enclosure on page 110.

Why is an emollient important?

An emollient does the following:

- It helps dry skin retain more moisture. This will leave your skin feeling less dry and less itchy.
- It forms a greasy protective layer on the skin.
 The cream protects the skin against irritants and triggers coming from outside.
 This reduces the chance of new eczema patches forming.

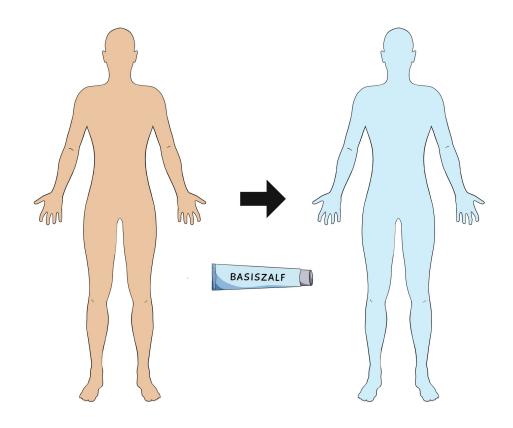
An emollient can come as an ointment, cream or lotion. What's the difference? An ointment is greasier than a cream.

In turn, a cream is greasier than a lotion.

An ointment should be applied to very dry skin. A cream should be applied to dry skin. A lotion should only be applied to places with a lot of hair.

The drier your skin, the greasier your emollient needs to be. In winter, you'll often need a greasier emollient than in summer, for example.

Try a few different types to find out which emollient works best and feels the nicest to apply.



Emollient on your entire body

How to apply emollient

Always apply an emollient to your entire body at least once every day. This includes any places without eczema. You can apply an emollient more frequently than once a day too.

Please note:

You should continue to apply an emollient even when you have few symptoms, or your eczema has completely cleared up.

Doing so will help keep your eczema at bay for longer.

You can apply an emollient any time. There is no need to stop applying it.

Tips for applying emollient:

- Pick a good time to apply your emollient, such as:
 - after getting up in the morning
 - before going to bed
 - after a shower or bath

For example:

Apply an <u>ointment</u> before going to bed. Apply a <u>cream</u> after getting up in the morning, as your skin will feel better that way once you get dressed. But above all: do what works best for you!

- Apply your emollient from the top down, following the direction of your hair:
 - from your shoulder to your hand
- from your hip to your foot
- Apply your emollient to your entire body
- Apply it as generously as you like. Feel free to put on a nice thick layer.
- · Allow the emollient to work its way into your skin before getting dressed

Make sure you have enough tubes of emollient around the house. Place your tubes in different spots around the house.



Tube with medicated cream (corticosteroid)

6.2. In consultation with your practitioner: apply a medicated cream (corticosteroid)

If necessary, you will also be given a medicated cream. The medicine in this cream is a corticosteroid. It resembles cortisol, a natural hormone.

Other names for medicated cream include:

- corticosteroid cream
- hormone cream
- topical corticosteroid
- cortisone cream
- eczema cream

We refer to all of these as medicated **cream**, but the medicine can also come as an ointment or lotion.

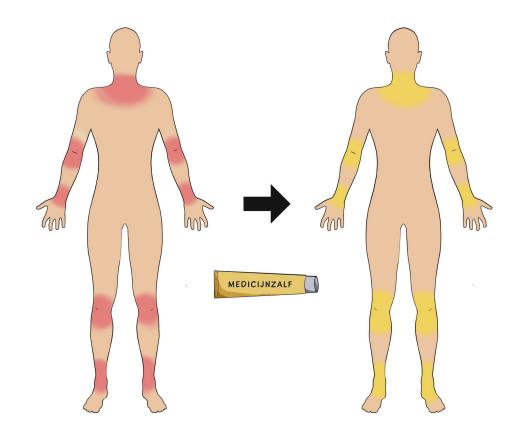
Medicated cream reduces inflammation in the skin by suppressing your immune system in the places where you apply it.

As a result, medicated cream has the following effects:

- it eases your eczema
- it reduces any itchiness

Medicated cream does not cure your genetic predisposition toward developing eczema — nothing can. But it does offer a very effective treatment for your eczema symptoms.

Your practitioner will give you a prescription.



Medicated cream on eczema patches only

Is medicated cream with corticosteroid safe?

Medicated cream is safe for use in both adults and children, as long as you use it the correct way. Instructions on how to do so can be found below.

When should you start applying medicated cream?

You should start applying medicated cream as soon as you feel or see a patch of eczema.

The sooner you start, the quicker your eczema will ease or go away. In other words: make sure you always have some medicated cream at home.

Where should you apply medicated cream?

Apply medicated cream to your **eczema patches**. You should also apply it to any places where your skin feels raw. In other words: apply it to all places where you can see or feel eczema.

Talk to your practitioner about which medicated cream to apply to which parts of your body.

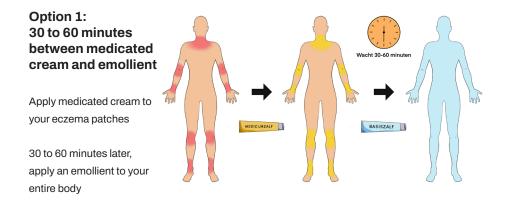
Eczema can sometimes result in broken skin. Medicated cream can also be applied to any patches of such broken skin.

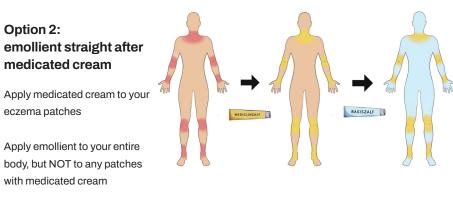
How often should you apply medicated cream?

Your practitioner will tell you how often to apply your cream. You will be given a schedule telling you when to apply cream. Examples of such schedules can be found on pages 46 to 53

Please note:

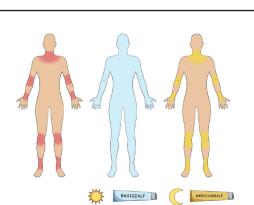
Make sure you **keep applying** emollient too. Apply your emollient to your entire body. The next page tells you more about the order in which you should apply medicated cream and emollient.





Option 3: different creams at different times of the day.

Apply your emollient and cream at different times of the day: one in the morning and one in the evening, for example



In which order should you apply medicated cream and emollient?

Do not mix your medicated cream and your emollient, as doing so will reduce the effect of your medicated cream. You have three options to avoid mixing your creams:

Option 1: 30 to 60 minutes between medicated cream and emollient.

- 1. Apply medicated cream to your eczema patches.
- 2. 30 to 60 minutes later, apply an emollient to your entire body.

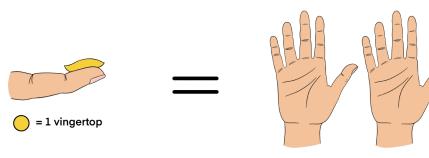
Alternatively, if you prefer not to wait 30 to 60 minutes:

Option 2: apply emollient straight after medicated cream.

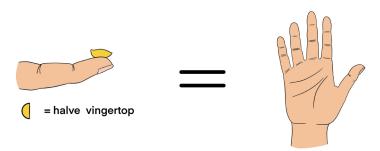
- 1. Apply medicated cream to your eczema patches.
- 2. Apply an emollient to your entire body straight after, but do NOT apply it to any patches with medicated cream!

Option 3: apply your emollient and cream at different times of the day.

If you prefer to apply the two creams and two different times of day, you could apply your medicated cream to your eczema patches in the evening, for example, and your emollient to your entire body in the morning.



Apply an entire fingertip of cream to an eczema patch as large as two hands side by side.



Apply half a fingertip to an eczema patch as large as one hand.

How much medicated cream should you apply?

Apply medicated cream to your eczema patches only. Make sure you apply plenty of medicated cream. Your eczema patches should be covered in a thick layer of cream. Otherwise, the cream won't have the desired effect.

A fingertip of cream

Doctors have come up with a handy tip for the amount of cream you should apply. Simply use your fingertip as a guide.

How to measure one fingertip of cream

Squeeze a strip of cream across your **entire** fingertip. When we say a 'fingertip', we mean the tip of the index finger of an adult. You should also use an adult fingertip measure when applying cream to a child.

To find out how many fingertips of cream to apply to your eczema patches, you can use your hand as a guide.

Your hand as a guide for the amount of cream

Use your hand to measure how much medicated cream to apply to your eczema patch. You'll need to apply one fingertip of cream to an eczema patch as large as two hands side by side.

Below are a few examples:

- Got an eczema patch about as large as one adult hand? Apply half a fingertip of cream to that eczema patch.
- Got an eczema patch about as large as two adult hands side by side? Apply one entire fingertip of cream to that eczema patch.

Your practitioner will be able to help you with this. Simply sit down together to discuss how large your eczema patches are, and how many fingertips of cream you need to apply.

Tools are available to help you figure out how many fingertips you need for the various parts of your body.

These tools are as follows:

- A table (see page 38)
- Application charts (see pages 39 to 44)

Application advice for different body parts

This table shows you how many fingertips to use on each body part, if that entire body part were to be covered in eczema.

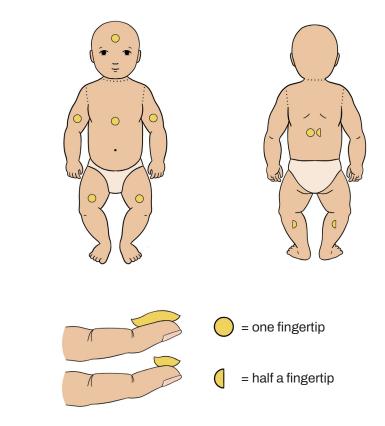
Drawings with more detail can be found on the pages that follow.

Body part	Body part Number of fingertips of medicated cream							
	Baby 3-12 months	Child 1-2 years	Child 3-5 years	Child 6-10 years	Child 11-16 years	Adult		
Head and neck	1	1.5	1.5	2	2.5	2.5		
Arm and hand	1	1.5	2	2.5	3	4		
Leg and foot	1.5	2	3	4.5	6	8		
Chest and abdomen	1	2	3	3.5	5	7		
Back and buttocks	1.5	3	3.5	5	6	7		
Entire body	8.5	13.5	18	24.5	31.5	40.5		

Application charts by age

How many fingertips of medicated cream (corticosteroid)?

3-12 months



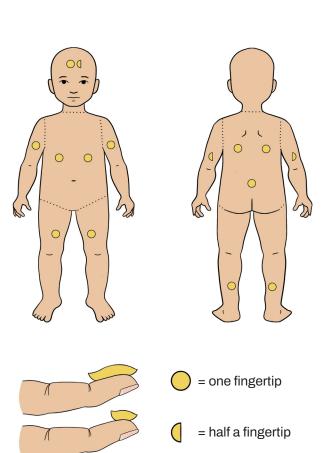
Apply medicated cream to eczema patches only.

For example:

Does your baby have eczema on their entire arm and hand, on the front and rear?

You'll need one fingertip to apply cream to their entire arm with eczema.

Information about atopic eczema 01

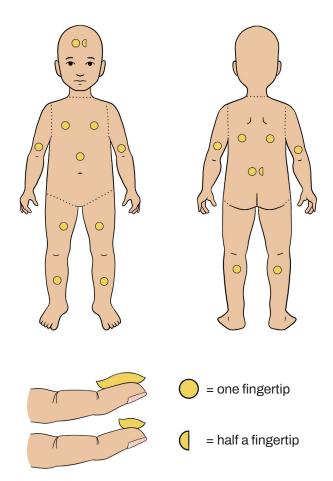


1-2 years

Apply medicated cream to eczema patches only.

For example:

Does your toddler have eczema on their entire head, on the front and rear? You'll need one-and-a-half fingertips to apply cream to their entire head. 3 - 5 years



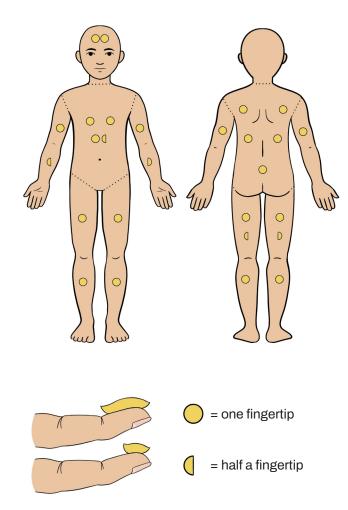
Apply medicated cream to eczema patches only.

For example:

Does your child have eczema on their entire arm and hand, on the front and rear?

You'll need two fingertips to apply cream to their entire arm with eczema.

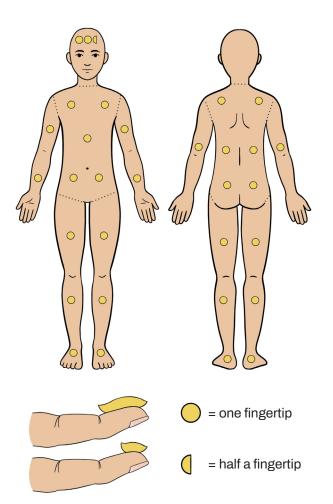
6 - 10 years



Apply medicated cream to eczema patches only.

For example:

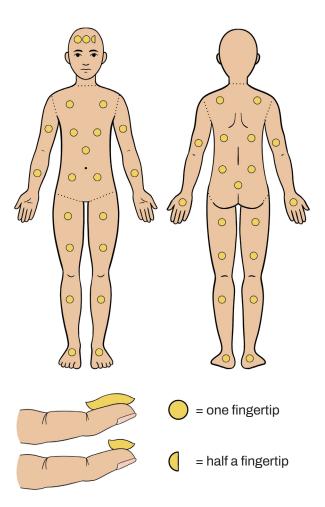
Does your child have eczema across their entire back? You'll need five fingertips. 11 - 16 years



Apply medicated cream to eczema patches only.

For example: Does your teenager have eczema on their entire arm and hand, on the front and rear? You'll need three fingertips.

Adult



Apply medicated cream to eczema patches only.

For example:

Does an adult have eczema on their entire arm and hand, on the front and rear?

You'll need four fingertips to apply cream to their entire arm with eczema.

Two examples of an application schedule

Application schedule 1

Application

schedule 2

has your itchiness/

Yes -> move on to the next week

in the same week

No -> keep applying cream

eczema eased?

has your itchiness/ eczema eased?

Yes \rightarrow move on to the next week

No -> keep applying cream in the same week

My medicated creams are called:								
Write down the day on which you're starting here →		day						
$\left[\right]$	Week 1							
	Week 2							
	Week 3							
	Week 4							
	Week 5							
	Week 6							

These are the body parts to which I need to apply cream.

Ο

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.. day

Н

These are the body parts to which I need to apply cream: My medicated creams are called: Write down the day on which . day ... day .. day .. day ... day ... day you're starting here -> Week 1 H Week 2 Week 3 Week 4 F Week 5

How long should you apply medicated cream (corticosteroid) for?

Once you start applying cream, your eczema will often start to ease. Make sure you don't stop applying cream all of a sudden if that's the case. You need to slowly come off your medicated cream, because otherwise, your eczema will soon return.

Even when you can no longer see any eczema, it can still be active deeper down in your skin.

Start coming off your cream once your eczema patches and itchiness start to ease.

If your eczema patches and itchiness haven't eased at all after a maximum of four weeks of applying cream every day, talk to your practitioner about what to do next.

Applying medicated cream to the same place for a long time is not good for your skin.

Schedules showing when to apply medicated cream and how to come off it

Schedules are available to help you use your cream.

These schedules tell you when to apply medicated cream, and how to come off it.

Different application schedules are available.

Together with your practitioner, you'll decide on the schedule that suits vou best.

Apps and animations are also available to help you with your application schedule.

Your practitioner will tell you whether you should apply medicated cream once or twice daily in the first week of your schedule.

After the first week, you should always apply medicated cream once a day only.

Application schedules can be found to the left, and in the enclosures on page 108 and 109.

Write down the day on which you start using cream in your schedule.

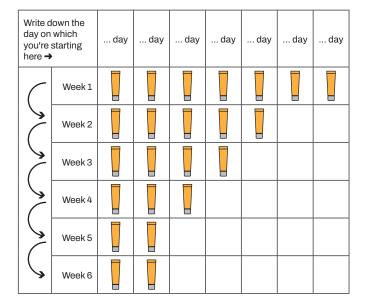
Week 6

Application schedule 1

These are the body parts to which I need to apply cream:

My medicated creams are called:





Has your itchiness/eczema eased?

Yes → Move on to the next week No → Keep applying cream in the same week

Example for schedule 1:

In week 1, you apply medicated cream once every day. In week 2, you apply medicated cream for five days, and you don't apply cream for two days. If your eczema patches and itchiness keep going down,

you apply medicated cream for four days in week 3, and you don't apply cream for three days.

Keep following the schedule this way.

Please note:

You can stay in the same week on the schedule for several weeks. Only proceed to the next week once your itchiness and eczema patches start to ease.

The only week you should not keep repeating for more than four weeks is week 1 (apply medicated cream every day).

If your eczema suddenly gets much worse, start again in week 1.

If you're unable to come off your medicated cream because your symptoms are not easing, talk to your practitioner about what to do next.

In some cases, you may be unable to fully come off your medicated cream, and you may need to keep applying medicated cream for several days a week. If this applies to you, you'll do so in consultation with your practitioner.

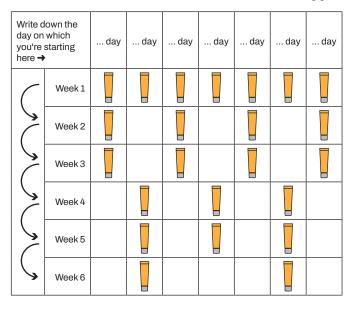
Please note:

Keep applying emollient every day, even once all symptoms have cleared up.

Application schedule 2

These are the body parts to which I need to apply cream:

My medicated creams are called:



Has your itchiness/eczema eased?

Move on to the next week
 Keep applying cream in the same week

Example for schedule 2:

In week 1, you apply medicated cream once every day. In week 2 and week 3, you apply medicated cream one day and not the next — you apply it every other day. Keep following the schedule this way.

Please note:

You can stay in the same week on the schedule for several weeks. Only proceed to the next week once your itchiness and eczema patches start to ease.

The only week you should not keep repeating for longer than four weeks is week 1 (apply medicated cream every day).

If your eczema suddenly gets much worse, start again in week 1.

If you're unable to come off your medicated cream because your symptoms are not easing, talk to your practitioner about what to do next.

In some cases, you may be unable to fully come off your medicated cream, and you may need to keep applying medicated cream for several days a week. If this applies to you, you'll do so in consultation with your practitioner.

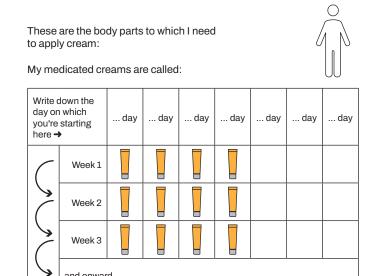
Please note:

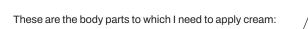
Keep applying emollient every day, even once all symptoms have cleared up.

Yes

No



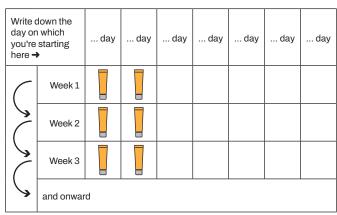




O

My medicated creams are called:

and onward



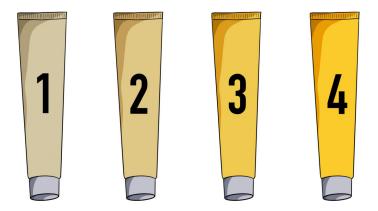
Examples where you need to keep applying medicated cream several days a week

In some cases, you will need to keep applying medicated cream several days a week

In some cases, people with eczema will need to keep applying medicated cream several days a week, even once your eczema patches have cleared up. Doing so prevents your eczema from coming back.

If this applies to you, you'll do so in consultation with your practitioner. The risk of side effects is small, because you're also not applying cream for several days a week.

MEDICIJNZALF



There are four classes of medicated cream (corticosteroid). These classes range from mild to strong. Class 1 is mild, and class 4 is strong.

Different strengths of medicated cream (corticosteroid)

There are four classes of medicated cream (corticosteroid), ranging from mild to strong.

Class 1 is mild, and class 4 is strong.

A few examples of the creams in each class can be found on page 112 and 113.

Clearly discuss with your practitioner **which class** of medicated cream to apply to **which parts** of your body.

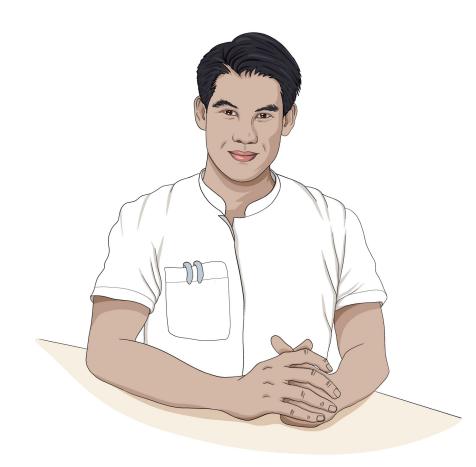
Generally speaking, the milder classes are for use on your groin, armpits and face.

Generally speaking, you'll use a stronger class on your arms, legs, abdomen and back.

Occasionally, an even stronger class can be applied to your hands.

Drawings are available to help you find out which medicated cream to apply where. See page 116 and 117 for more.





Always discuss any side effects with your practitioner

Side effects of medicated cream (corticosteroid)

Using medicated cream barely ever results in side effects. The cream may sting or burn for a while, especially when applied to wounds. This is normal and not serious. In most cases, these effects will only last a short time.

If you're using a stronger class of cream, and you apply it for a long period of time without slowly coming off it, you may suffer side effects including:

- Thin skin
- Smaller blood vessels in the places where you apply cream
- Red bumps and spots on your face
- Hairs growing more quickly
- Stretch marks (striae) on your skin

People sometimes fear other side effects, as a small amount of the medicated cream can end up in your bloodstream via the skin. These fears are unfounded, including in young children.

These lears are uniounded, including in young children.

This doesn't happen with medicated creams in the milder classes. Any such effects are rare with medicated creams in the stronger classes too, if you use the cream the right way.

Always discuss any side effects with your practitioner.

Please note:

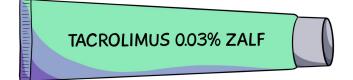
You may see some light or dark patches once your eczema gets better. This is not a side effect of the cream. Instead, it is caused by your eczema symptoms healing.

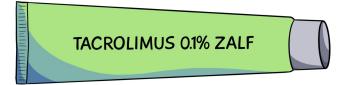
These patches will usually go away by themselves. Even so, this may take some time, especially on dark skin.



Tube with another medicated cream







Examples of other medicated creams

6.3. In consultation with your practitioner: other types of medicated cream

Other types of cream containing medicine are also available. They do not contain corticosteroid, but another medicine instead.

Examples include:

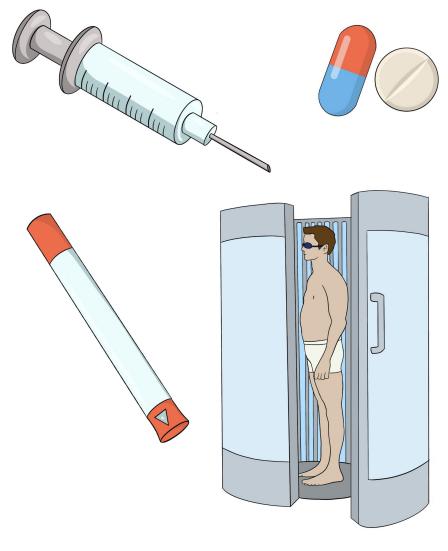
- Pimecrolimus cream
- Tacrolimus cream (0.03% and 0.1%)

These creams are especially suitable for when your eczema is relatively under control.

Their effect is about as strong as a Class 1 or 2 medicated cream with corticosteroid.

They are especially suitable for your face and neck, but you can apply them anywhere.

These creams may produce some redness and a burning feeling. This is not serious and usually goes away within two weeks.



6.4. In consultation with your practitioner: other treatments

If the emollient and medicated cream are not enough, other treatments are available. Usually, you will still need to apply cream as part of these other treatments.

Other available treatments include:

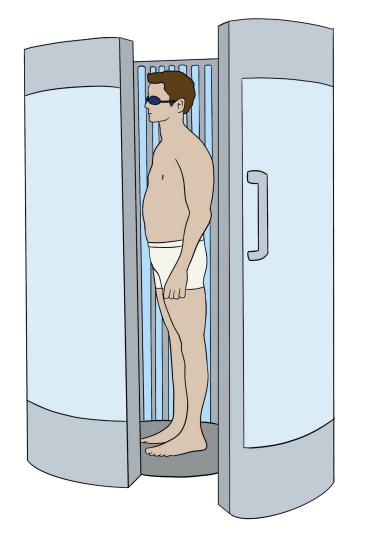
- Light therapy
- Pills or injections

You will need a referral for light therapy and for any treatment involving pills or injections.

Only experienced practitioners are allowed to prescribe these treatments.

Not everyone can access these treatments. This depends on your age and the severity of your eczema.

Other eczema treatments



Light therapy

During light therapy, a special UV light is shone onto your skin. This UV light can reduce the inflammation causing the eczema on your skin.

Light therapy can have certain side effects.

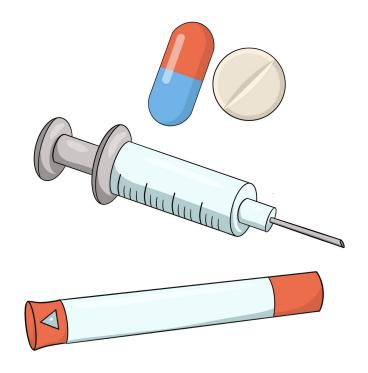
It can slightly increase your risk of skin cancer, and your skin will age more quickly.

Due to these side effects, this treatment cannot be given for too long or too often.

This type of treatment is not suitable for young children.

Your health insurance provider will not always reimburse this treatment.

Light therapy



Pills or injections

Pills or injections

If your creams are not having the desired effect, or if your eczema is very severe,

your practitioner may also give you pills or injections. Most people with eczema do not need these pills or injections.

Pills or injections suppress your overactive immune system, which in turn reduces your eczema. They can have certain side effects.

You should continue to apply emollient and medicated cream, even during these treatments!

1. Pills containing prednisone for short-term use

Generally speaking, you will take prednisone for a few weeks. This is a temporary solution for when your eczema gets too severe. Prednisone works quickly, but once you stop taking prednisone, your eczema may also return quickly.

2. Pills for a longer period

There are various pills you can take for a longer period. These pills can work quickly, but it may also take three to four months before you notice any effect.

For that reason, you'll have more frequent checkups with your practitioner. During these checkups, a blood sample may be taken, for example.

Examples of these pills include cyclosporine and methotrexate. You can take methotrexate as a pill or as an injection.

3. Biologics and JAK inhibitors

Biologics and JAK inhibitors are newer types of medicine for the treatment of eczema.

You can take these medicines as a pill or as an injection.

Your practitioner will continue to monitor you for as long as you use these pills or injections.

Sometimes, a blood sample may be taken during one of your checkups. You will have these checkups with your practitioner.



What happens next?

7. What can you expect once you've got atopic eczema?

Usually, eczema will start before a baby reaches six months, but you can develop eczema at any age.

Your eczema symptoms will often last for a few years before clearing up. However, your genetic predisposition to eczema will remain, so your symptoms may return later on in life.

In most children, eczema symptoms will clear up before they reach the age of five, and often sooner.

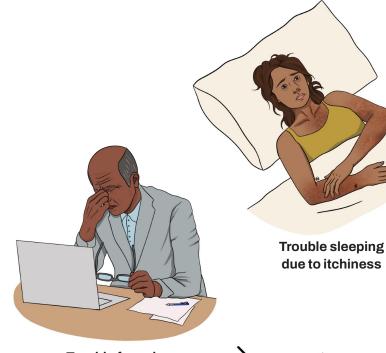
Sometimes, your eczema symptoms will not go away.

Multiple factors have an impact on your symptoms. Your eczema symptoms may come and go. Sometimes, it won't be clear what is causing this.

Even so, you can reduce your symptoms by:

- Treating them properly
- Recognising the triggers and dealing with them properly

You can read more about how to recognise triggers and deal with them in part 2



Trouble focusing due to itchiness



Not being able to go to work or school

8. Other symptoms of atopic eczema

Unfortunately, there is nothing you can change about your genetic predisposition to eczema.

Even so, you can reduce your symptoms through treatment, and by dealing with any triggers that make your eczema worse.

It is important that you do so, as eczema can cause issues beyond itchiness and skin problems.

You may also struggle with the following:

- Trouble sleeping due to itchiness
- Trouble focusing due to itchiness
- Social problems due to shame or the reaction of other people
- Anxiety
- Reduced self confidence
- Feeling low
- Extra costs
- Not being able to go to work or school

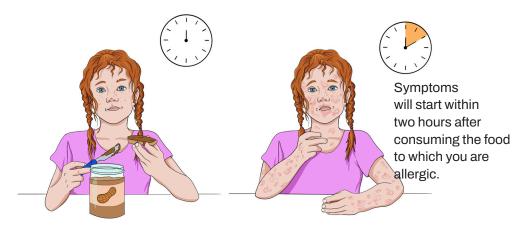
The exact symptoms will differ from person to person.

It helps to discuss any problems you are experiencing with a healthcare professional.



Hay fever

Asthma



9. Other conditions that are more common in people with atopic eczema

Someone with atopic eczema is also at greater risk of:

- Hay fever and pet allergies
- Asthma
- Food allergies

Hay fever, asthma and food allergies result in **symptoms that are different to those of eczema**.

They do **not** cause your eczema, but they can make your eczema worse at times you are struggling with them.

A genetic predisposition is one of the main causes for all of these conditions. This genetic predisposition makes you more sensitive to normal products and triggers.

Doctors also use the term 'atopic' to refer to this genetic predisposition.

A person with this genetic predisposition may have several of these conditions at the same time.

That said, they may also have eczema alone, or hay fever alone.

Food allergies



Hay fever



9.1. The symptoms of hay fever, asthma and food allergies

Hay fever, asthma and food allergies result in symptoms that are different to those of eczema.

Hay fever

Hay fever may produce the following symptoms:

- Sneezing
- A blocked nose
- Red, itchy or watery eyes

Asthma

Asthma may produce the following symptoms:

- Wheezing
- Tight chest
- Coughing



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Food allergies





When you have a food allergy, you will develop symptoms within two hours after consuming the food in question.

These symptoms will happen every time you eat this food.

You may develop one or more of the following symptoms:

- An itchy mouth
- Swelling of the lips or tongue
- Patches on your skin with bumps and severe itchiness (hives)
- Nausea or vomiting
- Tight chest

If your child has any of these symptoms,

discuss this with your practitioner or the child health clinic, as further testing may be needed.

If your child has eczema but none of these symptoms, they do not need to be tested for a food allergy.



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Treat eczema properly in a baby

9.2. Eczema and food allergies

Atopic eczema is **not** caused by a food allergy. Even so, a child with eczema does have a greater chance of developing a food allergy than a child without eczema. Eczema looks different to a food allergy.

Why are children with eczema at greater risk of food allergies?

Skin affected by eczema offers less effective protection against irritants coming from outside.

If some peanut or egg ends up on your baby's skin via their hands, for example, this can penetrate the skin more easily.

As your baby has never eaten peanut or egg before, their immune system will not recognise this as food. This in turn triggers an immune response to these alien substances.

When your child eats peanuts or egg by themselves at a later date, their immune system will continue to recognise this as alien, and an allergic reaction will follow.

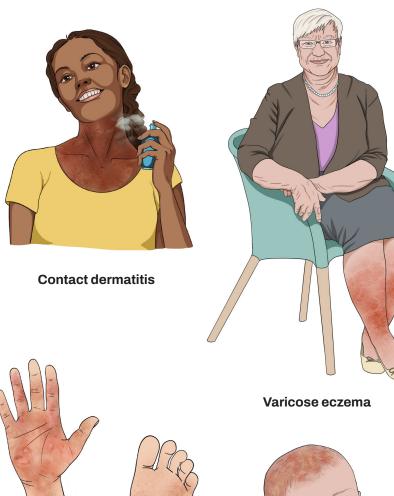
Try to prevent food allergies

If you treat your baby's eczema properly, you reduce the risk of your baby developing a food allergy. Even when you've already started weaning your baby, you'll still reduce their risk of a food allergy.

Talk to your practitioner or the child health clinic about how best to get your baby used to solid foods.

The following things are important:

- Introduce your baby to different types of food at the right time, including foods such as peanuts and chicken eggs.
- The risk of food allergies is smaller when babies are introduced to solid foods from four months onward. When you do this, their immune system will recognise the food as a food, and not as a trigger to react to.
- The risk of developing a food allergy also gets smaller if you treat your baby's eczema properly.



Dyshidrotic eczema



Scalp eczema with lots of dandruff

10. Other types of eczema

This brochure provides information about one type of eczema: atopic eczema. Even so, other types of eczema exist. It is possible for people with atopic eczema to develop another type of eczema on top.

These other types of eczema include:

Contact dermatitis

When you have contact dermatitis, you develop an itchy rash on your skin. This may be caused by contact with any of the following, for example:

- fragranced products such as shampoo or body lotion
- jewellery
- rubber
- makeup

If your practitioner thinks you may have contact dermatitis, you may be given a patch test to find out.

More information about contact dermatitis is available on Thuisarts.nl.

• Varicose eczema

This type of eczema mainly occurs in people over the age of 60. More information about varicose eczema (eczema on the lower legs) is available on Thuisarts.nl.

• Dyshidrotic eczema

When you have dyshidrotic eczema, you get itchy blisters on your skin. These blisters may appear in the following places:

- on the palm of your hand
- on the sole of your foot
- on the sides of your fingers and toes

More information about dyshidrotic eczema is available on Thuisarts.nl.

• Scalp eczema with lots of dandruff

In babies, this condition is called cradle cap. More information about scalp eczema is available on Thuisarts.nl.



You can get help from different types of healthcare professionals

11. Which healthcare professionals can help you with atopic eczema?

1. Youth paediatrician

- A youth paediatrician can do the following, for example:
- diagnose eczema in your child
- offer advice, including on how to feed a child with eczema to prevent a food allergy, for example
- refer you to a GP, dermatologist or paediatrician, for example

2. GP

Your GP is usually the first doctor you'll see with any problems. A GP is able to help most people with eczema. Generally speaking, no referral to hospital will be needed.

3. Nurse or doctor's assistant

Sometimes, you'll visit a nurse or doctor's assistant for extra information about eczema.

They can provide more detail on the following, for example:

- how to treat eczema They can help you find a good emollient, for example.
- how to deal with eczema in your daily life These professionals are not allowed to prescribe medication.

4. Pharmacist or pharmacy assistant

You can visit a pharmacy to get creams and medication. Simply tell them you have eczema and how large your patches are. The pharmacist or assistant will then be able to clearly explain how to use your creams or medication.

Sometimes, you may also be able to try out different emollients at a pharmacy.

5. Dermatologist

A dermatologist is a doctor. They specialise in skin conditions, such as eczema. Dermatologists work at a hospital or treatment centre.

6. Nurse specialist and physician assistant

Nurse specialists and physician assistants work together with dermatologists. They are allowed to offer care independently.

They can do the following, for example:

- Decide what type of treatment you need
- Prescribe medication
- Provide information about eczema
- Tell you how to live with eczema

7. Skin therapist

Some skin therapists have received extra training on eczema. They can do the following, for example:

- Provide additional information about eczema
- Support you during your treatment
- Tell you how to live with eczema

Skin therapists are not allowed to prescribe medication.

8. Paediatrician

In some cases, your GP or dermatologist may refer your child with eczema to a paediatrician.

9. Psychologist or child psychologist

A psychologist can help you deal with eczema in your daily life.

VMCE leven met eczeem

12. Patient association

A patient association exists for people with atopic eczema. This association is called the 'Association for People with Constitutional Eczema', or 'Vereniging voor Mensen met Constitutioneel Eczeem' in Dutch. It is known as VMCE for short.

VMCE (www.vmce.nl) does the following:

- It provides information about atopic eczema
- It offers support to help you deal with your eczema
- It organises contact with people in a similar situation
- This lets you talk to other people with eczema
- It stands up for people with eczema as a group, when dealing with health insurance providers, for example
- It publishes a magazine: GAAF!



02

In part 1, you can read information about what eczema is, what causes it, how to treat it, and who can help you.

In part 2, we tell you what you can do **yourself** to reduce your eczema symptoms.

The triggers for eczema differ from person to person. As such, some of these tips might not work in your situation. Simply explore what works for you and what doesn't. If you have any questions, just talk to your practitioner.

Part 2 contains the following sections:

- 1. Tips to avoid scratching
- 2. Tips for showering and bathing
- 3. Tips for hot and cold weather
- 4. Tips for sleeping
- 5. Tips for clothing
- 6. Tips for working out and swimming
- 7. Tips for cleaning
- 8. Tips for sunny weather



Squeeze or rub your skin if it feels itchy



1. Tips to avoid scratching

Try to scratch as little as possible.

It can be really hard not to scratch when you feel very itchy, but scratching damages your skin.

That damaged skin will feel even more itchy, and your eczema will get worse.

The following tips may help you avoid scratching:

- Apply your creams properly.
- Apply emollient when you feel itchy instead of scratching.
- Keep your nails short.
- Use a nail file to turn sharp nails into smooth nails.
- Lightly tap the itchy spot instead of scratching.
- Blow across the itchy spot instead of scratching.
- Lightly squeeze or rub the spot, but be careful: don't do so too hard!
- Place something cool on the itchy spot, such as a bag of ice from the freezer.

Wrap a clean tea towel around the cold item first, so that the ice doesn't come into direct contact with your skin.

• Try to do something else instead of scratching, such as making a fist, singing, or stamping on the floor.

Distract children when they start scratching by playing a game, for example.

Scratching while you sleep

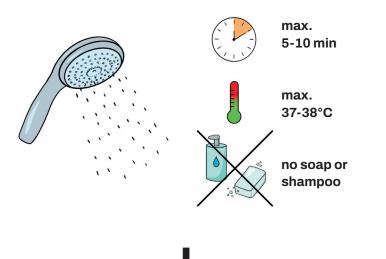
If you have very severe eczema and you scratch yourself while you sleep, your practitioner may prescribe eczema relief clothing.

Check whether your health insurance provider will reimburse you for this.

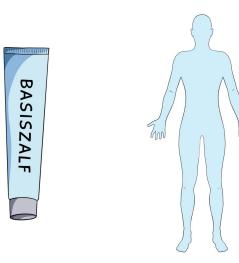
Support

If you'd like some help to stop scratching once and for all, ask your practitioner for advice.

It may help to learn to deal with stress, for example.



Apply an emollient to your entire body after showering



2. Tips for showering and bathing

Water, soap, shower gel and shampoo all dry out your skin.

The following tips may help:

- Keep showers quick: no longer than five to ten minutes.
- Shower using lukewarm water or water that's no more than 37-38°C
- Use as little soap, shower gel and shampoo as possible.

Do not shower more than once a day.
If your skin starts feeling too dry when you're showering every day, shower less frequently: every other day, for example.
There is no need to shower every day.
Young children in particular do not need to shower every day.

• If you're having a bath, keep it as short as possible and don't let it get too hot.

After a shower or bath

Pat your skin dry using a towel.

Don't rub too hard using a towel, as doing so will damage your skin. Once you're dry, apply an emollient to your entire body, as you skin will be left too dry from showering otherwise.

Tip:

Wait until your emollient starts feeling less greasy before getting dressed. Wear a cotton bathrobe for a while first, for example.



Open the window for 30 min early in the morning



Cotton Thin duvet



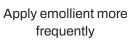


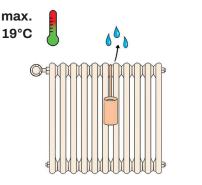
HOT WEATHER

Keep windows and curtains closed during the day

COLD WEATHER







3. Tips for hot and cold weather

Summer

Heat can make your eczema worse. When it's hot, you may also start sweating. The salt in your sweat may irritate your eczema.

The following summer tips may help:

- If you're sweating a lot after a workout, for example, rinse off your sweat in the shower.
 Shower for one or two minutes using lukewarm water.
 Apply emollient to your entire body afterwards.
- Keep your home cool and fresh. Close the curtains during the day.
- Open your bedroom window early in the morning to let some fresh air into your bedroom. Close the window after 30 minutes or so.
- If you're feeling sweaty in bed, use fewer blankets or a thinner duvet. Use a cotton duvet.
 - Do not use wool blankets or feather pillows.
- Protect yourself properly against the sun.
 More information on this point can be found later on in this brochure.

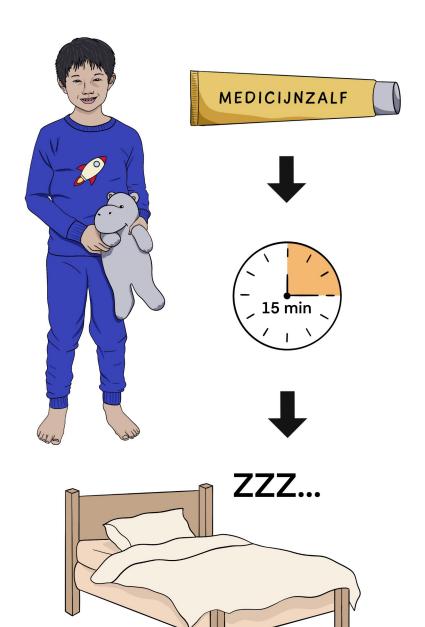
Winter

In winter, there is less humidity in the air. This results in drier air, which in turn leaves your skin feeling drier.

The following winter tips may help:

- Apply emollient more frequently or apply a greasier emollient.
- Do not set the heating any hotter than 19°C.
- Keep the air humid in your home. You can do so using a humidifier, or using trays of water on the radiators.

02



4. Tips for sleeping

Feeling hot and sweaty can often leave you feeling itchy, and that may disrupt your sleep.

The following tips may help you sleep better:

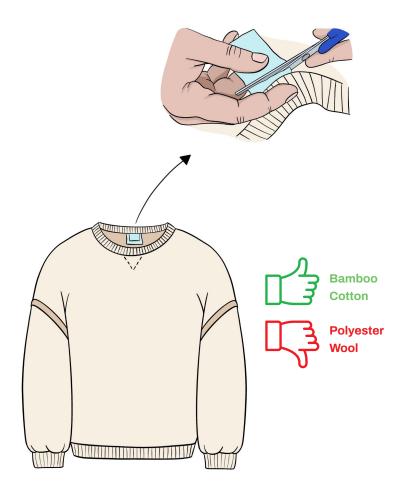
- Keep your bedroom cool and fresh.
 Close the curtains during the day, for example, and don't have the heating on in that room.
- Use a thin blanket or a thin duvet. Do not use wool blankets or feather pillows.
- Wear thin cotton pyjamas with long legs and long sleeves, including in summer.

Alternatively, wear eczema relief clothing.

- Your practitioner can prescribe this if your eczema is very severe. Bare skin is more sensitive to triggers and will start feeling itchy sooner.
- Apply your medicated cream in the evenings, as this cream really helps against itchiness.



02



Tips for clothing

5. Tips for clothing

Clothes

Clothes made of wool may irritate your skin.

Clothes made of synthetic materials can sometimes get too hot, causing you to sweat.

These materials may also irritate your skin.

Find out for yourself what you are and are not comfortable with.

The following clothing tips may help:

- Wear clothes made of cotton, silk or bamboo.
- Wear loose clothes with a roomy fit.
- Cut the labels out of your clothing, as these can make you itchy.
- Use non-fragranced laundry products.





Tips for working out and swimming

6. Tips for working out and swimming

Working out

Working out may cause you to sweat, and that in turn may irritate your skin.

The following tips may help when working out:

- Shower for one or two minutes using lukewarm water after a workout. This will reduce any irritation caused by sweating.
- Reapply your emollient after showering.
- If you know you'll be working out later in the day, do not have a shower before your workout, but wait until after. That way, you can avoid showering twice in a day.

Swimming

You can continue swimming as normal with eczema, both in a swimming pool and in the sea.

The following tips may help when you go swimming:

- Apply your emollient before swimming.
 This will prevent your skin from drying out while swimming.
 Do not apply any Lanette cream, as this will turn white in the water.
- If you go swimming with a child covered in cream, make sure you can still get a good grip on them.
 Make sure the child doesn't slip because of the cream either.
- Have a quick shower using lukewarm water straight after swimming. Do not use any shower gel or soap when doing so.
- Always apply your emollient straight after showering.



Tips for cleaning

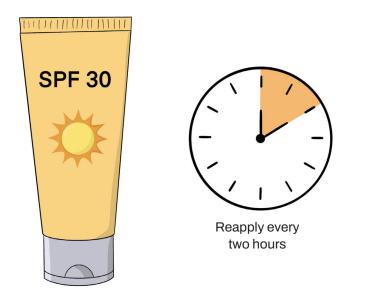
7. Tips for cleaning

People with eczema often struggle with cleaning products coming into direct contact with their skin.

The following tips may help when cleaning:

- Wear rubber gloves with a cotton lining.
- You can also put on some cotton gloves first, which are available from your pharmacy.

You can then wear rubber gloves over the top.



Tips for sunny weather

8. Tips for sunny weather

It is important to protect your skin against the sun, including when you have eczema.

The following tips may help in sunny weather:

- Use a non-fragranced sun cream.
- Use a sun cream that leaves your skin oily.
- Apply your sun cream at least half an hour before heading out into the sun.
- Reapply every two hours, especially when you go swimming too.



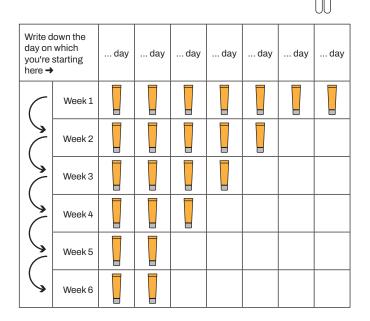
Schedules showing when to apply medicated cream and how to come off it

These schedules are intended for both children and adults.

Application schedule 1

These are the body parts to which I need to apply cream:

My medicated creams are called:

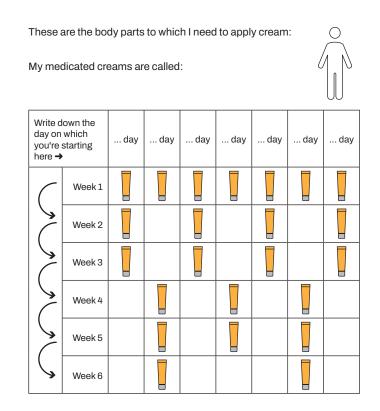


Has your itchiness/eczema eased?

Yes \rightarrow Move on to the next week No \rightarrow Keep applying cream in the same week

0

Application schedule 2



Has your itchiness/eczema eased? Yes No

Move on to the next week
 Keep applying cream in the same week

03

Types of emollient

There are lots of types of emollient. Below is a brief list of examples.

Types of cream containing oils only

- Cetomacrogol cream FNA
- Lanette cream FNA
- White vaseline
- Vaseline/paraffin

Types of cream containing mainly oils, but some water too

• Cooling cream with or without rose oil

Types of cream with lots or water and some oils. Different oil percentages are available in these creams.

- Cetomacrogol cream with 50%, 20% or 10% vaseline
- Lanette cream with 50%, 20% or 10% vaseline
- Vaseline/lanette cream FNA

'FNA' means that all manufacturers use the same recipe when making the ointment or cream.

See www.vmce.nl/basiszalven for more.

Golden rules for emollients

Why does an emollient help?

An emollient:

- Protects your skin
- Reduces any itchiness
- Keeps your eczema under control for longer

When should you apply an emollient?

People with eczema must use an emollient every day. Apply your emollient at least once a day, and more frequently when your skin feels dry.

Pick a time in the day that suits you to apply your emollient. Make sure to always apply an emollient after a shower or bath.

How to apply emollient

Apply your emollient following the direction of the hairs on your skin. It's up to you how much to apply. Feel free to put on a nice thick layer.

How long to apply emollient for

Keep applying an emollient even when your eczema has cleared up. Doing so will keep your eczema under control for longer.

Are emollients safe?

Yes, emollients are safe. Some emollients may cause a burning or stinging sensation. This usually goes away by itself, but sometimes, you'll need to find a different cream.

Types of medicated cream (corticosteroid)

There are four classes of medicated cream, ranging from mild to strong.

Class 1 is mild, and class 4 is strong.

Every medicine contains a named active substance. On top of that, every medicine also has a brand name. This brand name is the name used by the manufacturer.

'Fluticasone' is an example of an active substance, for instance. 'Cutivate cream' is the brand name of a cream containing this substance.

Examples of the different classes

Class 1	
Active substance:	Brand name:
Hydrocortisone acetate 1%	Hydrocortisone

Class 2

Active substance:	Brand name:
Triamcinolone acetonide 0.1%	Triamcinolone
Flumetasone pivalate 0.02%	Locacorten
Hydrocortisone butyrate 0.1%	Locoid

Class 3	
Active substance:	Brand name:
Fluticasone 0.05% (cream)	Cutivate cream, Cortifil
Fluticasone 0.005% (ointment)	Cutivate ointment
Betamethasone valerate 0.1%	Betnelan
Betamethasone dipropionate 0.05%	Diprosone
Mometasone furoate 0.1%	Elocon
Desoximetasone 0.25%	Ibaril cream, Topicort lotion

Class 4	
Active substance:	Brand name:
Clobetasol propionate 0.05%	Dermovate, Clarelux, Clobex, Eczoria
Betamethasone dipropionate 0.05% in propylene glycol	Diprolene

See www.vmce.nl/corticosteroidzalven for more.

Golden rules for medicated cream (corticosteroid)

Why does a medicated cream help?

Medicated cream reduces inflammation in the skin by suppressing your immune system in the places where you apply it. As a result, medicated cream has the following effects:

- It eases your eczema
- It reduces any itchiness

When should you apply medicated cream?

Use this cream as soon as you see or feel any new eczema patches. Keep using your emollient alongside as normal.

If you want to apply your emollient AFTER your medicated cream, apply your medicated cream first and wait 30 to 60 minutes before applying your emollient.

(Do not apply both creams to the same place at the same time, as that will dilute the medicated cream, meaning it won't have the same effect.

You could also apply your medicated cream in the morning and your emollient in the evening.

If you prefer to apply your emollient and medicated cream at the same time, apply your medicated cream to your eczema patches, and your emollient everywhere else.

Where should you apply medicated cream?

Apply medicated cream to your eczema patches. You should also apply it to any places where your skin feels raw. In other words: apply it to all places where you can see or feel eczema.

How often should you apply medicated cream?

Initially, you should apply your mediated cream once a day. Start coming off your cream once your eczema patches and itchiness start to improve. Use a schedule to come off your cream.

Unable to fully come off your medicated cream?

Apply medicated cream certain days of the week and do not apply it on others. Use a schedule to do so, so you can see on which days you should and should not apply your cream.

How much medicated cream should you apply?

Use the fingertip measure to apply your cream. More information about the fingertip measure can be found on page 36 to 44.

Do not apply your cream too thinly, as otherwise, it won't have the desired effect.

Apply an entire adult fingertip of cream to an eczema patch as large as two adult hands side by side.

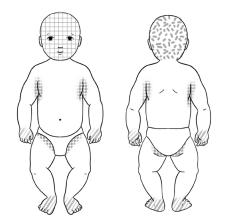
Is medicated cream safe?

Yes, research has shown that medicated cream is safe when used in the right way. Therefore, there is no need to fear any side effects. This applies to both adults and children.

03

Which medicated cream should I apply to which parts of my body?

Fill in this chart together with your practitioner.



Medicijnzalf:

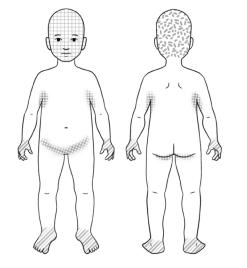
Gezicht:

Behaarde hoofd:

Plooien:

- Handen:
-)Lichaam:

Babies and children up to the age of 2



Medicijnzalf:

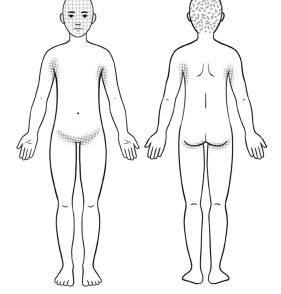
Gezicht:

Behaarde hoofd:

Plooien:

Handen:

Lichaam:



Medicijnzalf:

Gezicht: Behaarde hoofd: Plooien:

Handen:

)Lichaam:

Adults

03

Children from the age of 2

Glossary of difficult words in this brochure

Atopy

A tendency to be overly sensitive to normal irritants and triggers

Atopic eczema

Atopic dermatitis Constitutional eczema

Eczema caused by a genetic predisposition 'Constitutional' refers to this predisposition

Practitioner

A healthcare professional who is allowed to prescribe treatments for your eczema. Examples include a doctor, nurse specialist or physician assistant

Chronic illness

An illness that lasts a long time and cannot be cured in some cases

Contact dermatitis

An itchy rash on your skin.

This rash may be caused by contact with jewellery, rubber or makeup, for example.

Infantile eczema

Another name for atopic eczema (Mainly used in children)

Schedule for coming off your cream

A schedule showing when to apply medicated cream and how to come off it. We also refer to this as an application schedule.

Websites with more information

Information about eczema in adults and children:

- www.thuisarts.nl
- www.apotheek.nl
- Website of the Dutch Society of Dermatologists (Nederlandse Vereniging van Dermatologen): www.nvdv.nl
- Link to FAQ: Folder-Constitutioneel-eczeem-bijlage-93-Vragen-enantwoorden.pdf (nvdv.nl)
- www.huidhuis.nl
- www.eczeemwijzer.nl
- Website of a dermatologist: www.onlinedermatologie.nl
- www.eczemacareonline.org.uk
- www.allergiemonitor.nl

Patient association:

• Association for People with Constitutional Eczema (VCME; Vereniging voor Mensen met Constitutioneel Eczeem): www.vmce.nl

Information about eczema in children:

- www.kindenziek.nl/16-constitutioneel-eczeem/119-welke-klachten
- Reader about skin: www.huidnederland.com/project-huid-in-de-klas
- www.onlinedermatologie.nl/eczeem-2/eczeem-kinderen/smeermboekjes

Tools

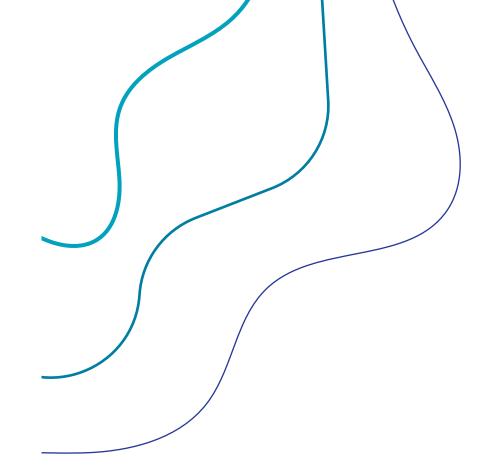






Apple App Store

e Google Play



Scan the QR code shown to the side to download the cream game.



Apple App Store



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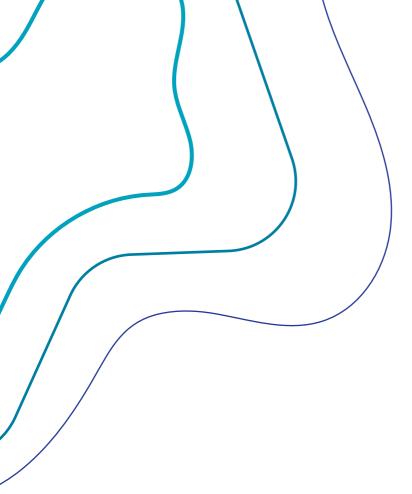
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Scan the QR code for www.eczeemwijzer.nl



Nationaal Constitutioneel Eczeem Project





