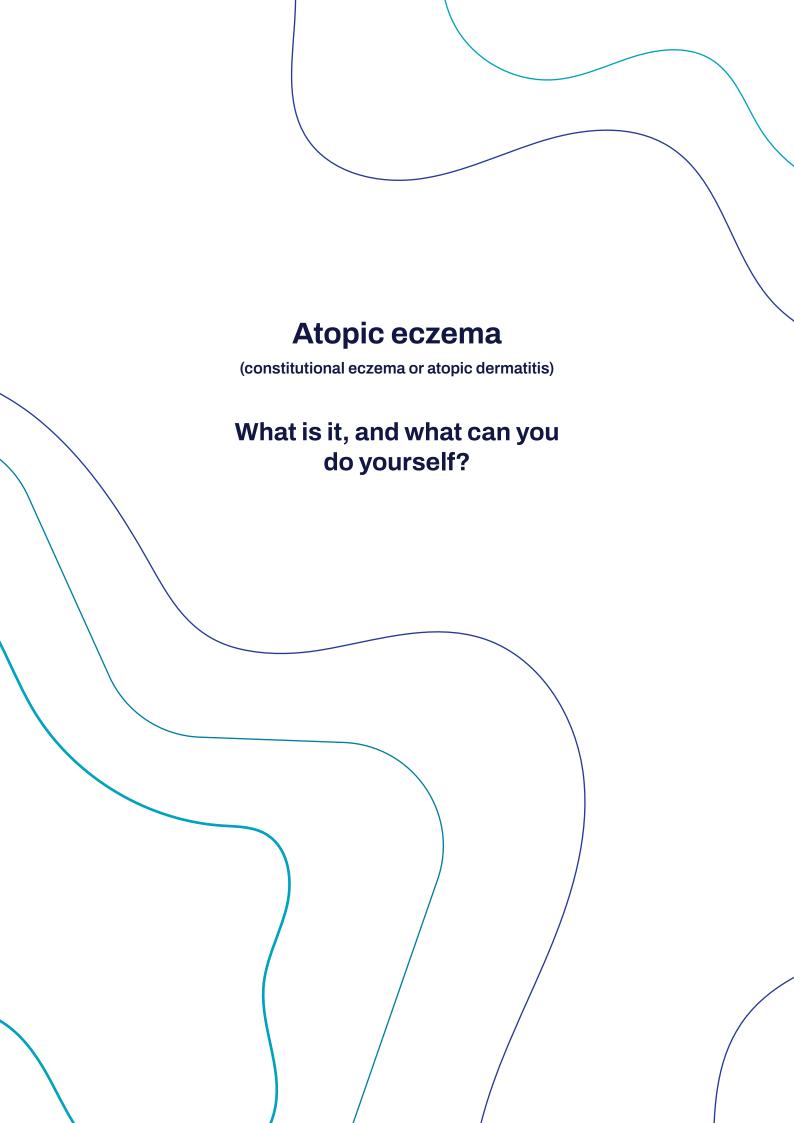
Atopic eczema

(constitutional eczema or atopic dermatitis)

What is it, and what can you do yourself?





What will you read about in this brochure?

01. What is atopic eczema?	4
02. The causes of atopic eczema	6
03. The treatment	8
04. Things you can do yourself	15
05. Other conditions that are more common in people with atopic eczema	18

01. What is atopic eczema?

There are different types of eczema.

This brochure is about atopic eczema.

Other names for this condition include:

- constitutional eczema
- atopic dermatitis

When you have eczema, you get itchy patches on your skin.

These patches are red and flaky, bumpy, chapped, blistery or scabby.

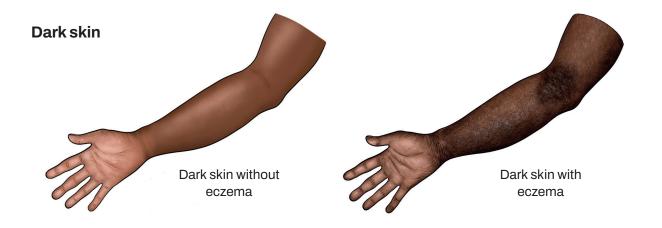
Often, your skin will also feel dry.

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

No extra testing is needed for a diagnosis.

You can tell by looking at someone's skin that they have eczema.





Atopic eczema is a common condition, especially in young children. Usually, eczema will start before a baby reaches six months, but you can develop eczema at any age.

In most people the symptoms will clear up after a few years, but this is not the case for everyone. In children with eczema, the symptoms will usually clear up before their fifth birthday.

A person's genetic predisposition to eczema will remain, so their symptoms may return later on in life.

Important:

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

Eczema can cause lots of problems, and can have an impact on how you feel. Ask for help if you've not felt well for a while.

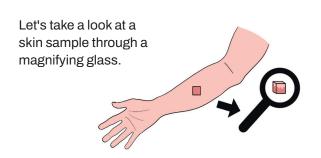


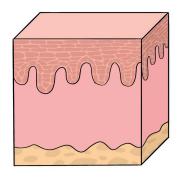
02. The causes of atopic eczema

Your genetic makeup has a major influence on whether you develop this type of eczema. Because of this genetic predisposition, the skin of someone with eczema is different.

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)





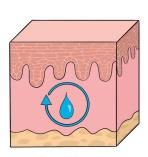
Outer layer of the skin

Middle layer of the skin

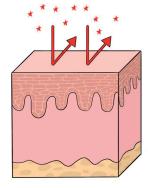
Inner layer of the skin

Skin without eczema

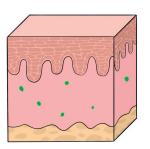
The skin of someone **without eczema** is able to retain moisture properly and offers good protection against irritants and triggers coming from outside.



The skin is able to retain moisture properly



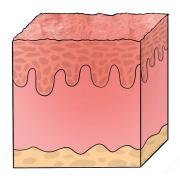
The skin provides proper protection against irritants and triggers



The immune system is healthy

Skin with eczema

The skin of someone with atopic eczema is different:



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

1. In the outer layer of the skin, the cells are more loosely arranged.

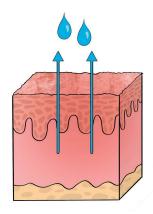
The protective layer between the cells is also not as effective.

This has two consequences:

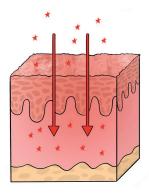
- Moisture can easily escape through the skin.
 This will leave your skin feeling dry and more itchy.
- Irritants and triggers can penetrate the skin more easily.

2. The immune system is overactive in the skin.

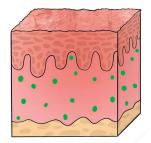
This causes inflammation of the skin, which in turn leads to eczema.



Moisture can easily escape through the skin



Irritants and triggers can more easily penetrate the skin



The immune system is overactive in the skin

There is no cure for a genetic predisposition to eczema. Fortunately, we are able to treat the symptoms of eczema fairly easily.

03. The treatment

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

You can treat your eczema by applying an emollient and a medicated cream.

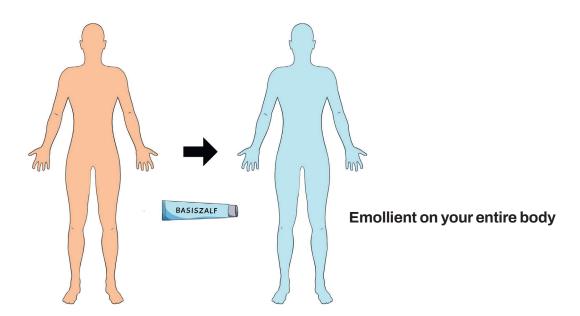
The type of cream and the amount of cream differs from person to person.

Emollient

An emollient is a non-medicated ointment or cream.

An ointment is greasier than a cream. For that reason, you should apply ointment to **very** dry skin, and a cream to dry skin.

Apply an emollient to your entire body every day. Ideally, you should do so several times a day.



Keep applying your emollient even when you no longer have any eczema patches. Doing so will help you keep your eczema symptoms under control for longer.

Why is an emollient important?

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

Tips for applying emollient

You could apply an emollient at the following times, for example:

- After getting up in the morning
- Before going to bed
- After every time you shower or bathe

Medicated cream with corticosteroid

In consultation with your practitioner, you should apply medicated cream **to your eczema patches**. The medicine in this cream is a corticosteroid.

Medicated cream does not cure your genetic predisposition toward developing eczema. Even so, it does offer a very effective treatment for your eczema symptoms.

Medicated cream with corticosteroid:

- Eases your eczema
- Reduces any itchiness
- Reduces any redness

Research has shown that medicated cream is safe in children and adults when used in the right way.

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.

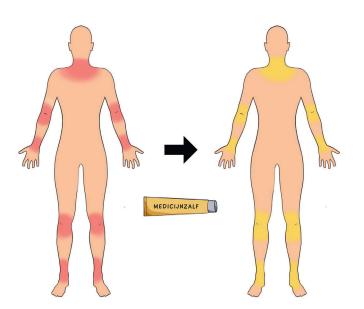
In other words: make sure you always have some medicated cream at home.

Where should you apply medicated cream?

You should apply medicated cream to eczema patches only.

Apply it to places where you can see eczema, but also where you can feel eczema.

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



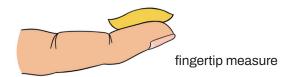
Medicated cream on eczema patches only

How much medicated cream should you apply?

Make sure you apply plenty of medicated cream. Otherwise, the cream won't have the desired effect. So how can you make sure you apply enough?

Simply use the fingertip measure:

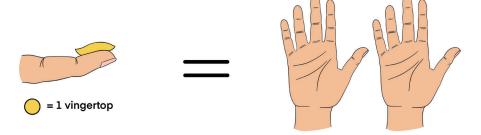
Squeeze a strip of cream across the entire tip of your adult index finder.



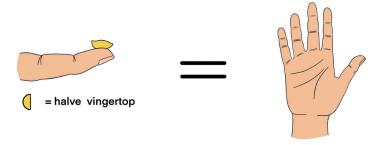
This table shows you how many fingertips to use on each body part, if that entire body part were to be covered in eczema.

Body part	Number of fingertips of medicated cream								
	Baby aged 3-12 months	Child aged 1-2 years	Child aged 3-5 years	Child aged 6-10 years	Child aged 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			

Alternatively, use the hand measure:



You'll need to apply one fingertip of cream to an eczema patch as large as two adult hands side by side.



You'll need half a fingertip for an eczema patch as large as one adult hand.

How often should you apply medicated cream?

You should apply your medicated cream once a day.

How long should you apply medicated cream for?

Once you start applying cream, your eczema will often start to ease.

Make sure you don't stop applying cream straight away if that's the case.

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

That means your eczema might soon return once you stop applying cream.

Instead, you need to slowly come off your medicated cream.

Start coming off your cream once your itchiness starts to ease, and your eczema patches get better.

If your eczema patches haven't gone down at all after **four weeks of applying cream every day**, talk to your practitioner about what to do next.

That's because applying medicated cream to the same place for a long time is not good for your skin.

Use a schedule to apply and come off your cream

An application schedule shows 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 you best.

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

Two examples of an application schedule

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

My medicated creams are called:

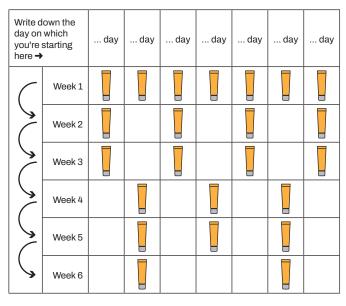


These are the body parts to which I need to apply cream:

My medicated creams are called:



Write down the day on which you're starting here →		day						
	Week 1							
>	Week 2							
>	Week 3							
>	Week 4							
>	Week 5							
<i>(</i> *)	Week 6							



Has your itchiness/eczema eased?

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

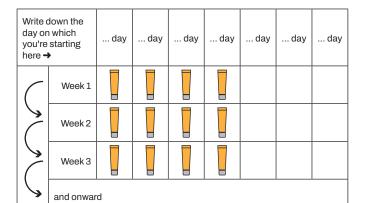
Unable to fully come off your medicated cream?

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

The risk of side effects is small in this case, because you're also not applying cream for several days a week.

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

My medicated creams are called:



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

Classes of medicated cream

There are four classes of medicated cream with corticosteroid, ranging from mild to strong. Class 1 is mild, and class 4 is strong.

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 legs, arms, hands and back.

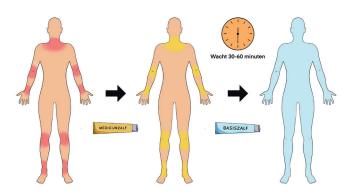
In which order should you apply emollient and medicated cream?

Do not mix your medicated cream and your emollient, as doing so will reduce the effect of your medicated cream.

There are three options when it comes to the order in which to apply each cream:

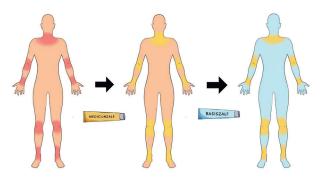
Option 1:

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



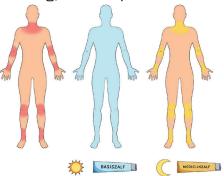
OR Option 2: If you prefer not to wait 30 to 60 minutes, apply medicated cream to your eczema patches first.

Then, apply an emollient to the rest of your body, but do NOT apply it to any eczema patches with medicated cream.



OR Option 3:

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



Other types of medicated cream

Other types of cream containing medicine are also available.

They do not contain corticosteroid, but another medicine instead.

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.

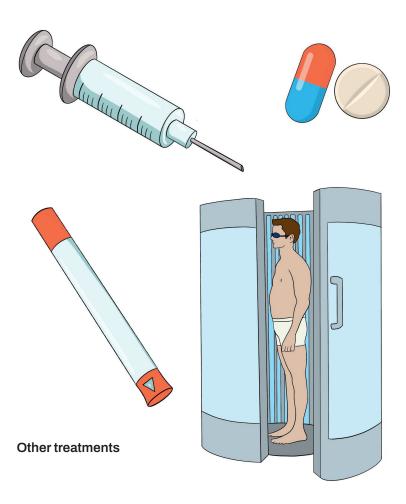
Examples include:

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

Alternative treatments to cream

If an emollient and medicated cream do not provide enough relief, other treatments are available. Examples include:

- Light therapy
- Medication in pill or injection form



Usually, you will still need to apply an emollient and medicated cream as part of these other treatments.

04. Things you can do yourself

Irritants and triggers in your environment can make your eczema symptoms worse.

Eczema is not an allergic reaction to these irritants and triggers.

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

You can try to avoid these irritants and triggers.

Tips for dealing with irritants and triggers

Examples of irritants and triggers and tips on how to deal with them:

Scratching makes eczema worse

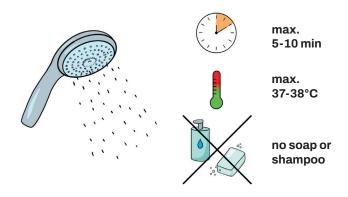
- Apply your creams properly.
- Keep your nails short.
- · Lightly tap or blow on the itchy spot instead of scratching.
- Place something cool on the itchy spot.



Too much water and soap dry out your skin and make your eczema worse

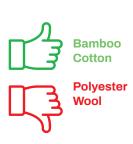
- Keep showers quick: no longer than five to ten minutes.
- Shower using water that's no hotter than 37-38°C.
- Shower no more than once a day.
- Use as little shower gel/soap/shampoo as possible.
- Pat your skin dry using a towel (do not rub).
- Apply an emollient to your entire body after showering.

These tips also apply to bathing.



Clothes made of wool or synthetic materials may irritate your skin

- Wear clothes made of cotton, silk or bamboo.
- Wear baggy clothes with a roomy fit.
- Cut the labels out of your clothing, as they may cause itchiness.







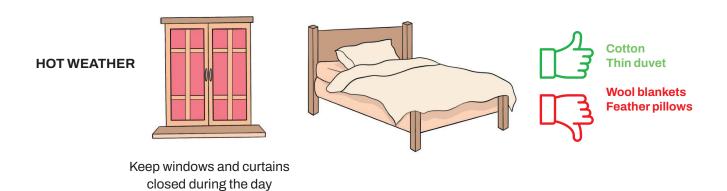
Summer and sweating

Heat can make your eczema worse, and sweating can irritate your eczema.

- If you're sweating a lot, rinse off your sweat in the shower and apply emollient to your entire body directly afterwards.
- Keep your home cool and fresh. Close the curtains during the day.
- If you've been sweating in bed, use fewer blankets or a thinner duvet.

Use a cotton duvet.

Do not use wool blankets of feather pillows.



Winter and dry air

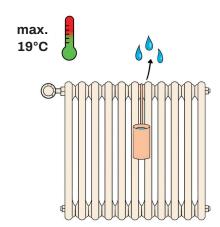
In winter, there is less humidity in the air.

This results in drier air, which in turn leaves your skin feeling drier.

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



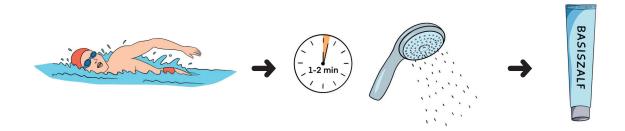
Apply emollient more frequently



Swimming

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

- Have a quick shower using lukewarm water straight after swimming.
- · Always reapply your emollient after showering.



The following things may also make eczema worse:

- · Feeling tired
- Viral or bacterial illness
- When you have hay fever or asthma symptoms at the same time
- Stress/tension

Try to live healthily: get enough sleep, eat healthily and try to relax.

Your eczema may still flare up even when you avoid certain irritants and triggers as much as possible. This is because of your genetic predisposition.

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

05. 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

These other conditions result in symptoms that are **different** to those of eczema. On top of that, these other conditions are not the **cause** of your eczema. Your genetic predisposition leaves you more sensitive to normal irritants and triggers. It also leaves you with a greater chance of having these other conditions.

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.

You can find more information about eczema on

www.thuisarts.nl www.apotheek.nl www.nvdv.nl www.vmce.nl www.huidhuis.nl www.eczeemwijzer.nl









Google Play



Scan the QR code for the cream game.



Apple App Store



Google Play











