

# Managing eczema in general practice

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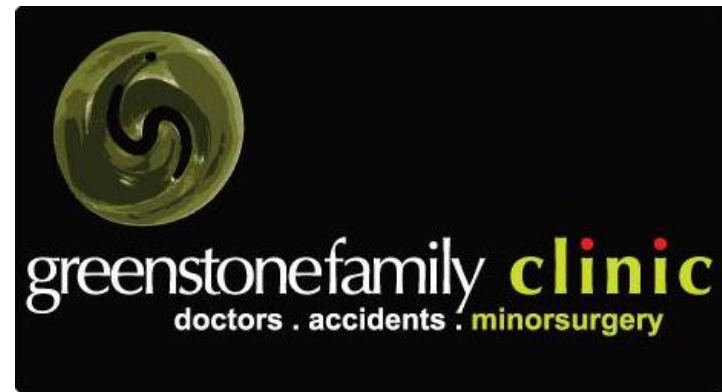
# The problem

Primary Diagnosis	Number: Total 2007 – 2011.	Number : Annual Average	Rate per 1000	% of Total
Skin infections	15,926	3,185.2	3.56	8.7
Dermatitis and eczema	3317	663.4	0.74	1.8

**Hospital Admissions for Conditions with a Social Gradient in Children Aged 0–14 Years (Excluding Neonates) by Primary Diagnosis, New Zealand 2007–2011**

# Make a plan

- No charge 0 - 18
- Medtech task
- Allocate nurse
- Nurse educated
- Use a protocol
- Stockpile creams
- Evaluate



# The protocol

- Guidelines
  - Diana's lecture notes
  - Starship Childrens' Health Clinical Guidelines
  - Arrol, Fishman and Oakley. Management of common skin problems in General Practice.
  - Northern Regional Clinical Pathways
- GP and PN developed
- Feedback from whole team
- Final protocol on shared drive
- Monthly feedback
- Nurse Champion to maintain momentum

# The protocol

- Baths
- Moisturisers
- Steroids
- Antihistamines
- Wet wrapping
- Avoidance of irritants
- Diet
- Sun protection
- Infection

# Eczema herpeticum



# One page on tips

- What aggravates eczema
- Managing eczema
  - Moisturisers
  - Avoidance of irritants
  - Diet
  - Baths
- What to do in a flare

# Starship Website

[https://www.starship.org.nz/media/269745/children\\_with\\_eczema\\_30\\_may\\_2014.pdf](https://www.starship.org.nz/media/269745/children_with_eczema_30_may_2014.pdf)

## CHILDREN WITH ECZEMA

### ECZEMA INFORMATION

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Eczema can affect any part of the body and can change a lot from day to day. The treatment your child needs for eczema will change from time to time.

Skin with dry, red, itchy, inflamed active eczema gets infected easily. Infection is the most common cause of eczema becoming worse or flaring.

Avoid contact with cold sores. The cold sore virus can cause severe painful infection. See your doctor if you think eczema is infected with the cold sore virus.

Your surroundings may irritate or trigger eczema. These include soap, detergent, dust, pet fur, house dust mites and overheating.

Children with eczema can develop food allergies. Removing foods does not usually improve eczema. See your doctor if you are still concerned about food allergy.

A few children will still have bad eczema even with good skin care and need to see a specialist.

### ECZEMA SKIN CARE

#### BATHING

Bath every day in warm water for 10 minutes or less. Bath twice a day when eczema becomes worse or flares.

After bathing pat skin dry, but do not rub. Do not share bath towels. Now apply creams.

Bath oil in the bath can help moisturize the skin.

Antiseptic baths twice a week can help prevent infection and improve eczema. See Bleach Bath Instructions.

Antiseptic bath oils can be used but are not funded on prescription. When using them follow the instructions on the container.

Shampoo hair after bathing and rinse off over a basin.

#### MOISTURISER

Apply lots of moisturiser to all the body after bathing and let it soak into the skin.

Moisturising often every day reduces topical steroid use. Use a lot more moisturiser during flares.

#### TOPICAL STEROIDS

Apply topical steroids immediately after the bath, before or after moisturising.

Don't wait for eczema to get really bad before starting to use steroid creams. When the skin is no longer red and itchy STOP topical steroids and keep moisturising.

### HANDY HINTS

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Wash your hands before and after applying creams.

Let your child help to apply their own creams.

Choose products without fragrance and perfume.

Keep your child's fingernails and toenails clean, filed and short.

Don't dress your child too warmly and keep the bedroom cool.

Avoid putting scratchy fabrics next to your child's skin.

Damp dust and vacuum the house regularly.

Chlorinated swimming pools may worsen some children's eczema. Apply moisturiser before swimming, shower after swimming and apply moisturiser again. Some children prefer saltwater pools or the sea.

The best sun protection is shade and clothing. Sun creams can be used on skin without active eczema. Choose a sun cream for sensitive skin with an SPF 30 or more.



# Starship Website

[https://www.starship.org.nz/media/269769/eczema\\_care\\_plan\\_30\\_may\\_2014.pdf](https://www.starship.org.nz/media/269769/eczema_care_plan_30_may_2014.pdf)

ECZEMA CARE PLAN		DATE
EVERYDAY SKIN CARE	<b>BATH OR SHOWER EVERY DAY</b> in warm water. Use a moisturiser or non-soap product. Do not use soap, bubble bath or shower gel as these dry the skin. <input type="text"/>	
	Antiseptic baths twice a week can reduce infection on your skin. See Bleach Bath Instructions. Apply moisturiser immediately after your shower or bath. Smooth in the same direction as hair grows. <b>MOISTURISE AS OFTEN AS YOU CAN EVERY DAY</b> <input type="text"/>	
	Moisturiser keeps the skin soft and helps to improve the natural skin barrier. Moisturise twice a day or more if possible. Use lots of moisturiser over all your body including your face. Aim to finish a big 500gm tub of moisturiser every 2-3 weeks. Use a spoon to take the moisturizer you need out of the tub onto a clean dish. Do not use your hands as they can put infection into the tub.	
FOR ACTIVE ECZEMA	<b>TOPICAL STEROIDS TO USE WHEN ECZEMA IS ACTIVE</b> Eczema needs topical steroids to improve. They are very safe and effective when used correctly. Apply topical steroids 1-2 times a day to all red and itchy active eczema areas on your skin. Spread a thin layer on the red and itchy active eczema areas so the skin looks shiny.	
	Face and neck <input type="text"/> Body <input type="text"/> When the skin is no longer red and itchy, STOP using the topical steroids. After stopping topical steroids it is important to keep moisturizing as often as you can every day. If the red, itchy active eczema areas on your skin come back, start using the topical steroids again. Other Information <input type="text"/>	
WHEN TO GET HELP	<b>WHEN TO SEE YOUR DOCTOR OR NURSE</b> If your skin is infected, bright red, painful, weeping, crusted or blistered. You may need antibiotics. If you have put on topical steroids every day for 2 weeks and the eczema doesn't get better. If you need to put on topical steroids most days of every week. Your eczema may be out of control and you need to see your doctor or nurse if: <ul style="list-style-type: none"><li>• you are having lots of skin infections</li><li>• you are waking at night because of eczema</li><li>• you are not going to school or work because of eczema</li><li>• your eczema is making you unhappy</li></ul>	

# The age sex register

Name	Age	Severity	Eczema plan	Last seen
Recall due	Recall sent	Last seen	School	Comment

# Greenstone's eczema register

- 1726 registered aged 0 – 16 years
- 96 on age sex register
- 5.5% of the eligible population
- Missing 5 – 10 %
- Reminder peer review sessions

# Recent Audit Data:

- 96 Children- 18% severe, 45 % moderate, 37% mild
- 80% of kids in active follow up reviewed in past 3 months
- 52% with active eczema care plan recorded in notes
- 2 children presented to EC a total of 5 times
- 11 referrals to secondary care
  - 9 severe, 1x unclear diagnosis

How can I teach but to a friend?



Aristotle (384BC – 322BC)

# Foster co-operation



# The future

- Increase the age sex register numbers
- Continue evaluation
- Continue reminders through peer review sessions
- Examine admission data over time
- Better recording of eczema plans
- Active follow up of all EC presentations

# Reference

- Craig et al. THE CHILDREN'S SOCIAL HEALTH MONITOR 2012 UPDATE. Paediatric Society.