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Nottingham University Hospitals MHS



Atopic Eczema and Steroid Creams/Ointments

Steroid (corticosteroid) creams and ointments are an effective and safe way of treating inflamed skin in atopic eczema.

Are all steroid creams the same?

No. They vary in strength (potency) from mild, moderate, potent (strong) and very potent. Strength depends on the steroid structure, not just the % concentration. For example. Hydrocortisone is a very mild steroid, whether it is 0.5% or 1%. Generally speaking, sensitive areas such as the face and nappy area mainly need milder steroid creams, whereas thick skin areas such as the palms, soles and scalp areas need moderate to strong preparations to have any impact.

Aren't steroids bad for the skin?

If used properly, no. Unfortunately, many of the stronger steroid creams were used wrongly in the 1960s and 1970s. This resulted in side effects such as thinning of the skin and prominent stretch marks developing. This previous misuse has given steroid creams a bad name, especially when people mix up the word "steroid" with steroid tablets and anabolic steroids taken by athletes - which are very different from steroid creams. Serious side effects from steroid creams are extremely rare. Untreated eczema, on the other hand damages the skin and can make your child's life very miserable.

What are the benefits of using steroid creams?

Skin inflammation is the hallmark of eczema, which means that the skin becomes red and itchy. Sometimes, the skin becomes oozy due to too much fluid in the skin as a result of inflammation. Steroid creams control the inflammation quickly, reducing the itching and helping the skin to look and feel normal again. For milder eczema, steroid creams are typically used once a day in bursts for around 5 days when the skin is inflamed (reactive approach), using emollients (moisturisers) for the periods in between. For eczema that is more severe and out of control, it is important to regain control first with a longer blast of steroid cream so that the eczema under the skin is treated as well as the redness on the surface. The length of this initial blast can vary from 1 week to 6 weeks and will depend on how thick the eczema is and where it is. Once clear, this is then followed by a plan to keep the eczema under control by using them two days each week on previously active body sites - a technique known as "weekend therapy". Like the reactive approach, emollients are also used on dry skin throughout, but at a separate time of day to the steroid creams. Whether your child will need a "reactive" approach (that is using steroid creams only when the skin flares) or a "proactive" approach (using the steroid creams weekly to prevent flares) will depend on how often your child's eczema flares. Both approaches are very safe.

written by Professor Hywel Williams, Dr Jane Ravenscroft, Nurse Consultant Sandra Lawton and parents on behalf of the Nottingham Support Group for Carers of Children with Eczema

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What side effects can steroid creams have?

If strong steroid creams are used continuously for a long period like 1 year, then the skin will begin to thin. Restoring very thick leathery eczema skin back to normal thickness by using steroid creams is a good thing, but thinning normal skin away from the eczema is not a good thing as it can lead to a more fragile skin. Any skin thinning will usually go back to normal if the creams are stopped but some areas are particularly vulnerable to thinning effects such as face, armpits and nappy area. A tiny quantity of the steroid creams are absorbed into the body's circulation but it is very unlikely to cause any harm if you follow the golden rules summarised at the end of the leaflet.

Should I use steroid cream or a steroid ointment?

Generally speaking, dermatologists prefer you to use an ointment because this stays on the skin for longer and can therefore really get to work on your child's eczema. Also, dryness is a big part of eczema and the greasy ointments help to counteract dryness. Some children cannot tolerate ointments and they prefer creams. Creams are white and contain a lot of water. Creams are easier to put onto oozing or weeping eczema compared to ointments

Can I control my child's eczema with steroid creams only?

No. Steroid creams are only used to treat your child's eczema when the eczema is red and inflamed and should always be used alongside a regular moisturiser (emollient). The emollient and steroid creams should not be applied at the same time – maybe put the emollients on in the morning and teatime and the steroids at night.

Six golden rules of using steroid creams in atopic eczema:

- Always use these creams/ointments along with your regular emollient, but ideally allow a gap of 60 minutes before applying the emollient, otherwise the emollient could dilute the effect of the steroid preparations. If used sensibly, steroid creams/ointments do not cause side effects of the skin, whereas untreated eczema can have serious consequences.
- Use the weakest cream that controls your child's eczema well.
- Use ointments rather than creams if possible.
- Use the preparations to get skin inflammation under control. Then either use them for 5 day bursts if flares are few and far between, or every weekend if flares are common. Get control and keep control!
- Always remember to get more cream from your Doctor when your current tube is one quarter full.
- Take along your ointment tubes to appointments with your Doctor so that the quantities you are using can be monitored.

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