

What is eczema?

Eczema is a chronic, itchy skin condition that comes and goes. It affects all ages but is more common in children affecting about 5-10% of them. Eczema can be mild or it may be more severe and disrupt the lives of those affected and their families. The itching can disturb sleep and make it difficult to concentrate during the day. Eczema is not contagious however the appearance of the skin can make those who have the condition feel embarrassed and isolated.

There are different types of eczema: The commonest is 'atopic' eczema. Many patients with atopic eczema may also suffer from asthma and hay fever or have close family members who do. Atopics react in an unusual, exaggerated way to certain things in their surroundings e.g. pollen, feathers and house-dust mites. Although we still do not know exactly why eczema develops in some people, several factors, including genetics and the environment, are involved. The skin of eczema sufferers is more easily damaged by the environment than that of normal people. Stress, intense emotions and contact with irritating substances can make eczema flare up. It is usually possible to avoid some of the things that worsen eczema but this is not always enough. Usually eczema has to be treated with creams and ointments to keep it under control.

There is no permanent cure for eczema but, with correct treatment, the impact on your life can be kept to the absolute minimum. There is no need to put up with constant itching! Consult your doctor or dermatologist about your diagnosis and what treatments might be best for you.

What does eczema look like?

Eczema causes a red, scaly rash that can be localised or widespread. The skin is usually dry and may be cracked and flaky. Blisters may occur, especially on the hands or sides of the fingers. In severe cases the skin may weep and crust. The main symptom is itching which can be severe. Unfortunately scratching breaks and damages the skin and leaves it open to infection. More than half of those who develop eczema show signs (usually on the face) in their first 12 months; most of the rest will develop it before 5 years of age. Older children get eczema in front of the elbows and behind the knees. Many children with eczema eventually grow out of it.

Clues to diagnosing eczema:

- Itchy rash that comes and goes: dry, red, scaly areas on the skin.
- Personal or family history of asthma, hay fever or eczema.
- Eczema usually starts in infancy or early childhood but sometimes starts later.
- In infants and toddlers, eczema usually appears on the face, elbows or knees, but may spread to other areas.
- In older children and adults, eczema appears less often on the face and more commonly on the hands, neck, in front of the elbows, behind the knees and around the ankles.
- Signs of scratching (excoriations) are usual in eczema and are nothing to be ashamed of.
- Lichenification: the skin becomes rough and thickened as a result of chronic scratching.
- Weeping eczema: in severe cases the skin becomes moist, exuding fluid and covered in crusts.

Eczema and infections. Can you catch eczema from someone else?

NO! Eczema does not spread from person to person. However it may become infected in which case antibiotic treatment may be necessary. Some viral infections may also cause eczema to flare.

How is eczema treated?

Although eczema still cannot be cured permanently, modern treatment should provide good control. Most patients use medical treatments as well as self-help measures to keep it under control.

Apart from moisturisers, you will probably also be prescribed steroid creams and ointments. Steroids are effective and, if used properly, are very helpful however, if overused, they can cause skin thinning and other problems. If you are prescribed steroids ask your doctor or dermatologist how to apply them. You will probably be prescribed weaker preparations to use on more delicate areas e.g. the face. In recent years new non-steroid medications that avoid many steroid side-effects have become available. They are particularly suited for treating delicate areas like the face and for young children.

Antihistamines (tablets or syrup) may help reduce the itching of eczema. Eczema may become infected with germs and when this happens it tends to worsen. In such cases antibiotics are required and these may need to be repeated periodically, particularly in children. If infection happens frequently, it may help to use creams or ointments containing a combination of antibiotic and steroid.

Malta Eczema Society (MES)

The MES was set up in 2001 to help those with eczema and their families. It aims to provide support, information and practical advice via public talks and other activities and to increase awareness about eczema and the problems it may cause. The society has organised regular public talks about eczema by prominent local dermatologists and other speakers. Other highlights have included:

2003 - Survey of teachers in Maltese schools to assess eczema awareness. The survey confirmed widespread misconceptions e.g. more than 10% of teachers wrongly thought that eczema is contagious and many did not know about its career implications. Subsequently an informative article about eczema was published in 'The Teacher' magazine and lectures were given to Guidance and Health & Safety teachers.

2006 - Publication of 40-page eczema information booklet about eczema for patients in English & Maltese. The booklet is available free for download from the MES website www.maltaeczemasociety.com/

2007 - Web site set up.

2008 - MES joined the Malta Health Network (network of NGOs & Patient support groups).

The MES has campaigned so that free medication is provided in Malta to those with chronic eczema, as with other chronic diseases. In 2007 the MES organised a petition, eventually signed by 7437 persons and presented to the Prime Minister and Shadow Health Minister requesting the inclusion of chronic eczema in the Schedule V list of diseases. The MES will continue working so that eczema sufferers are given the assistance they deserve.

We are pleased to note that in 2022 the Schedule V list was amended to include patients with severe chronic forms of eczema. This is a big step in the right direction. It is now hoped that new effective medications for severe eczema such as dupilumab and JAK inhibitors which have been available in other countries for several years and are still not available in Malta will now also become available here too.

The Malta Eczema Society will continue to insist that available funds should be utilised according to patients' needs and that patients should not be discriminated according to which chronic disease they are unlucky enough to develop. Eczema sufferers pay taxes like everyone else and should be given the assistance they deserve like other patients.

Members of the Committee of the Malta Eczema Society :

Dr M.J. Boffa (President)
Mrs M. Zarb (Secretary)
Mrs J. Vella (Treasurer)
Mrs M. Bongalais
Mrs J. Borg
Mr Wayne Zammit

Dos and Don'ts

There are many simple things that you can do to help your skin and things to avoid to prevent your eczema from flaring up. These include:

Moisturisers:

Eczema skin tends to be dry and this makes it itchy and more likely to crack and become infected, so it is important to moisturise the skin every day. There are many moisturising creams, ointments, lotions, bath oils and non-irritating skin cleansers available. Some may be better than others for you so experiment with different products to find which are best for you. Some patients find that if moisturisers are kept cool in a fridge they are more soothing when applied to the skin.

Bathing:

It is important to keep the skin clean but excessive washing may irritate it.

- Avoid very hot water for washing.
- Use mild soap or non-soap cleansers; use soap sparingly and rinse well after washing. Avoid ordinary 'bubble-baths' and perfumed products. Bath oil added to the water helps to moisturise the skin but take care because oils tend to make the bath slippery - put a mat in the bath!
- Dry your skin by gently patting with a soft towel - do not rub.
- Immediately after drying the skin apply moisturising lotion, cream or ointment, as prescribed.

Clothing:

What things to wear and how to wash them:

- For clothes, loose-fitting 100% cotton is best; choose soft fabrics.
- Avoid clothing made of wool, synthetic materials or rough fibres and tight clothing.
- Choose clothes that can be washed frequently and easily otherwise staining by ointments and creams or as a result of scratching may be a problem.
- Wash new clothes to make them softer before wearing them, and remove clothing tags as they may irritate the skin.
- Rinse clothes well when washing because soap residue may irritate the skin. For very sensitive skin use 'non-biological' detergents and avoid fabric softeners, particularly perfumed ones, as these too might irritate.

Pets:

Avoid contact with cats, dogs, small furry animals e.g. rabbits and birds as this may aggravate eczema (and asthma and hay fever). Those with eczema should not keep such pets at home.

Bedtime:

- Make sure the bedroom is not too warm.
- Avoid electric blankets.
- Avoid wool and other coarse or rough textured material in blankets.

House-dust mites:

These are tiny creatures that live on human skin scales found in dust e.g. in bedding, carpets and upholstery and can aggravate eczema (and asthma).

- At home keep dust to a minimum.
- Air the house frequently; use a damp cloth instead of a dry one to clean dusty surfaces.
- Vacuum carpets often reduce house-dust mite droppings.
- Use protective coverings for pillows and mattresses and wash bedclothes frequently in hot water.
- To reduce house-dust mites in soft toys, place the soft toy in a plastic bag in a freezer for 24 hours once a week and then wash thoroughly in hot water.
- Some patients find it helps to remove carpets from their home.

Smoking:

This should be banned! In an enclosed room, tobacco smoke may irritate the skin and also aggravate asthma.

Keep your fingernails short, to prevent scratching from breaking the skin. Try to gently pat, press, pinch or rub itchy spots rather than scratching vigorously.

When possible, avoid rapid changes of temperature and activities that make you sweat.

Hand Eczema is often caused by contact with irritating substances in people who have sensitive skin. Wear cotton-lined gloves where possible and avoid direct skin contact with detergents, cleansers, solvents and other irritants.

Living with Eczema



If you would like to become a member of the MES please go to our website <https://maltaeczemasociety.com/become-a-member/>

The society has no financial resources other than donations so if you wish to make a small donation this would be appreciated. If you wish to make a donation by bank transfer our bank details are as follows:

APS BANK MT85APSB7701300000045514810013
BIC CODE APSBMTMT

We thank you for your support.