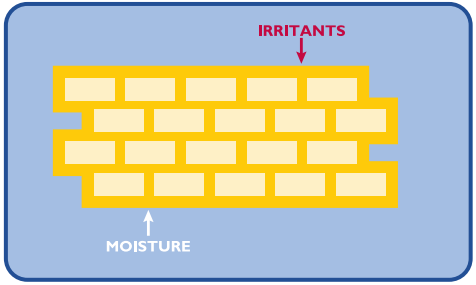
MANAGING DRY, INFLAMED SKIN CONDITIONS

A guide for patients

Healthy Skin

Healthy skin provides a barrier between the body and the external environment. In healthy skin, natural oils fill spaces between plump skin cells to form a good skin barrier – keeping moisture in and irritants out.

Skin cells and the surrounding natural oils are often shown as a brick wall. The skin cells are the 'bricks' and the natural oils are the 'mortar'.



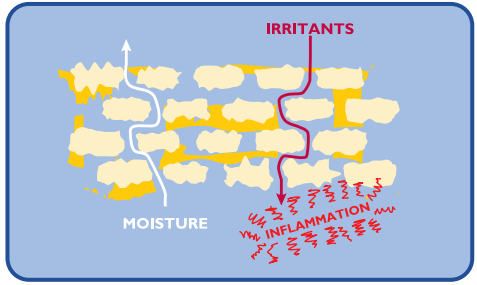
Dry skin

In dry skin conditions such as eczema, dermatitis or psoriasis, the skin barrier is weakened. The skin, which is lacking in oils, allows too much water to escape. The skin cells shrink, opening cracks which allow greater moisture loss and the entry of irritants.

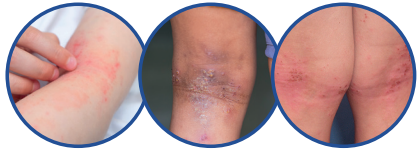
Certain factors can make dry skin conditions worse, such as air conditioning, central heating or sitting close to a fire, and bathing or showering with soaps or detergents.

Dry, Inflamed Skin – Eczema

If irritants cross the skin barrier the skin can react causing redness, itching and inflammation. This is the body's natural defence system to protect against its enemies (irritants and bacteria). In atopic eczema, the body can overreact and 'flare up' in response to irritants and bacteria which would usually be harmless. Scratching should be avoided, as it damages the skin further and initiates an itch-scratch cycle which may increase inflammation.



Regular use of emollients is recommended to rehydrate dry skin and help improve the skin barrier. When eczema 'flares', the skin becomes inflamed. The skin can become red on lighter skin, and darker brown, purple or grey on darker skin. Topical corticosteroids (applied to the skin) are often used to reduce the inflammation and to help eczema improve.



Dry, Inflamed Skin – Psoriasis

Psoriasis is an inflammatory dry skin condition that causes skin cells to grow, or mature, too quickly. In healthy skin, this process usually takes between 21 and 28 days, but only a few days for psoriatic skin. This leads to a build-up of immature skin cells, causing red, dry inflamed areas of skin that are covered in silvery (or grey in skin of colour) scales. These become uncomfortable, and can easily crack and bleed.

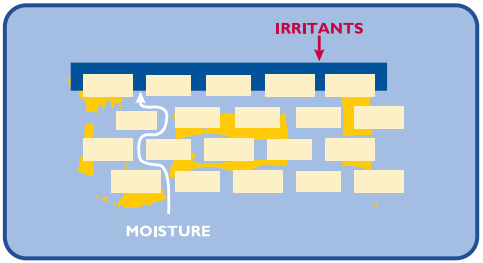
Psoriasis treatments include topical therapies, such as steroids to help reduce the inflammation and Vitamin D analogues.

Emollients are widely prescribed for patients with psoriasis and they can be used alongside other treatments. Emollients help to soften scales, keep the skin supple, reduce the dryness and improve the appearance of the skin.

Presented with compliments of Dermal.

Treatments: dry skin

Emollients (medical moisturisers) rehydrate the skin by forming a layer of oil which traps moisture in the skin allowing cells to swell and close the cracks.



Some emollients also contain ingredients with specific properties such as:

- Humectants, such as glycerol or urea, which help keep water within the skin
- Antiseptics which help reduce the number of bacteria and so help relieve itching
- An anti-inflammatory to help reduce inflammation and redness

Emollients should be applied generously and regularly to rehydrate and soften the skin, and to maintain the improvement. They should be used continuously, even when the skin looks 'normal'.

How to apply emollients

1. Smooth the emollient gently onto dry skin.
2. Use gentle strokes in the same direction as hair growth (like stroking a dog or cat). Avoid vigorously rubbing the emollient into your skin. This prevents blocking hair follicles.
3. Apply a sufficient amount so that the skin looks shiny and allow time for the emollient to soak in.
4. Remember that exposed areas such as the face, neck and hands may need more frequent treatment.

Use emollient soap substitutes

Avoid using soaps, bubble baths or foaming shower gels, which tend to dry and irritate the skin. Use an emollient soap substitute to help cleanse, moisturise and protect the skin.

Treatments: To reduce inflammation

Treatments such as steroids (also known as topical corticosteroids) and topical immunomodulators may be required in addition to emollients to reduce inflammation if the condition is not adequately controlled using emollients alone. Emollients and steroids are often prescribed to be used together to treat both dryness and inflammation. Emollients are commonly used in large quantities, whereas steroids should be used sparingly (as advised by your prescriber or pharmacist), and only on areas of active inflammation. When used together, each treatment should be applied separately and allowed to absorb into the skin before the next treatment is applied (in line with the in-pack leaflet or as advised by your prescriber or pharmacist).

Steroids are available in a variety of different potencies for different severities of condition, as well as for different parts of the body. Although effective, steroids may have side effects, especially in long term use on large areas of the skin or sensitive skin, for example the face. Special care should be taken when used on children or the elderly.

An emollient preparation containing nicotinamide is also available for dry skin prone to inflammation. Nicotinamide is a form of vitamin B_3 and has an anti-inflammatory action. This emollient with supplementary anti-inflammatory action can be used all over the body and for as long as needed to help manage dry skin prone to inflammation.

Your Healthcare Professional will be able to recommend an appropriate therapy regimen for you.

Always read the leaflet.

Please note that dried emollient residue collecting on dressings, clothing and bedlinen makes these materials burn more easily, so it's important to keep them away from lit cigarettes and other sources of ignition and wash them regularly

Your Skin Care Regime

Emollient:

Frequency of use:

Area(s) of body:

Emollient Soap Substitute:

Additional treatment:

Frequency of use:

Area(s) of body:

Duration of treatment:

Notes:

The organisations below offer further support and information for those with dry skin conditions:

National Eczema Society (NES):
www.eczema.org

Psoriasis Association:
www.psoriasis-association.org.uk

Irish Skin Foundation:
www.irishskin.ie