

Eczema or eczematous inflammation of the skin refers to a descriptive category of dermatologic diseases and not to a specific etiology. Atopic dermatitis (AD) is a type of pruritic eczema that usually begins during infancy and is associated with an allergic contact dermatitis with a hereditary tendency (**atopy**) ([Jacob, Yang, Herro, et al, 2010](#)). AD manifests in three forms based on the child's age and the distribution of lesions:

Infantile (infantile eczema): Usually begins at 2 to 6 months of age; generally undergoes spontaneous remission by 3 years of age

Childhood: May follow the infantile form; occurs at 2 to 3 years of age; 90% of children have manifestations by 5 years of age

Preadolescent and adolescent: Begins at about 12 years of age; may continue into the early adult years or indefinitely

The diagnosis of AD is based on a combination of history, clinical manifestations, and in some cases, morphologic findings ([Box 10-4](#)). Children with AD have a lower threshold compared with children who do not have AD for cutaneous itching, and many authorities believe the dermatologic manifestations appear subsequent to scratching from the intense pruritus ([Alanne, Nermes, Soderlund, et al, 2011](#)). For example, infants rub their faces against bed linen, and their crawling (a form of scratching) results in irritation of knees and elbows. Lesions disappear if the scratching is stopped.

Box 10-4

Clinical Manifestations of Atopic Dermatitis

Distribution of Lesions

Infantile form: Generalized, especially cheeks, scalp, trunk, and extensor surfaces of extremities

Childhood form: Flexural areas (antecubital and popliteal fossae, neck), wrists, ankles, and feet

Preadolescent and adolescent form: Face, sides of neck, hands, feet, face, and antecubital and popliteal fossae (to a lesser extent)