

Wet soaks and compresses are applied and medications for pruritus or infection are administered as directed. The family is given explicit instructions on the preparation and use of soaks, special baths, and topical medications, including the order of application if more than one is prescribed. It is important to emphasize that one thick application of topical medication is *not* equivalent to several thin applications and that excessive use of an agent (particularly steroids) can be hazardous. If children have difficulty remaining still for a 10- or 15-minute soak, bath, or dressing application, these can be carried out at naptime or when the child is engrossed in watching television, listening to a story, or playing with tub toys.

Diet modification is another source of frustration to parents. When a hypoallergenic diet is prescribed, parents need help to understand the reason for the diet and the guidelines for avoiding hyperallergenic foods. Because hypoallergenic diets take time before visible effects are apparent, parents need reassurance that results may not be seen immediately. If airborne allergens make eczema worse, the family is counseled about “allergy proofing” the home (see Asthma, [Chapter 21](#)).

Parents are assured that the lesions will not produce scarring (unless secondarily infected) and that the disease is not contagious. However, the child may have repeated exacerbations and remissions. Spontaneous and permanent remission takes place at approximately 2 to 3 years old in most children with the infantile disorder.

During acute phases, emotional stress can become intense for the family. They need time to discuss negative feelings and to be reassured that these feelings are normal. Stress tends to aggravate the severity of the condition. Therefore, efforts to relieve as much anxiety as possible in both the parents and the child have a beneficial emotional and physical effect.

Seborrheic Dermatitis

Seborrheic dermatitis is a chronic, recurrent, inflammatory reaction of the skin that occurs most commonly on the scalp (cradle cap) but may involve the eyelids (blepharitis), external ear canal (otitis externa), nasolabial folds, and inguinal region. The cause is