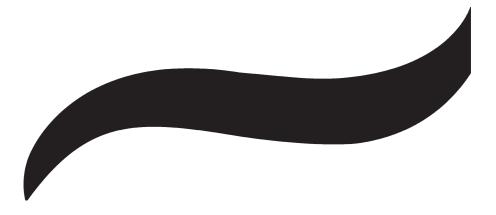




Eczema and Allergies

Information for patients



WHAT IS THE CONNECTION BETWEEN ECZEMA AND ALLERGIES?

To start with, eczema is not "caused" by food allergies. Eczema is a disorder of the skin barrier, it is common in children (roughly 1 in 5 get it at some point).

If you have eczema, however, you are more likely than people without eczema to have allergies. So it is important to consider.

Let's look at some different potential allergies:

- House dust mite
- Cat, dog and other pets
- Cow's Milk allergy
- Other food allergies
- Additives, perfumes, chemicals

House Dust Mite

These are invisible mites that live in our homes, particularly in carpets, bedding and other soft furnishings. It is not dust itself that is the problem, so you can have a spotless home and still have a problem with house dust mites.

House dust mite allergy is common in people with eczema. There are blood and skin tests for house dust mite allergy if there is any doubt. You can get advice on reducing the level of house dust mites in your home from **www.AllergyUK.org** e.g.:

- washing bedding at 60 degrees or hotter
- removing unnecessary soft toys, cushions, blankets
- using a vacuum cleaner with a HEPA filter or equivalent
 e.g. a Dyson look for Allergy UK seal of approval
- replacing/washing your vacuum cleaner filters regularly.

Cat, dog and other pets

Animal allergies are common in people with eczema. You usually see that your child gets more itchy, perhaps even hives, when in a house where there are animals or when they have been in direct contact with an animal.

There are blood and skin tests for animal allergies, if there is any doubt. They are not however very reliable, and should not be used to justify removal of a pet from a home, or as reassurance that a new pet won't cause problems. The problem is that you can be more allergic to some individual animals than others, and some breeds more than others. Even so-called "hypoallergenic" or nonshedding breeds can still cause problems for allergic people. How often an animal is washed and groomed may be just as important!

Living in the same house as a pet can lead to improvement in symptoms but this is unpredictable, and may only be true for that individual pet.

Babies and Cow's Milk Allergy

There are some babies that react almost immediately to cow's milk (eg baby formula) with itching, rash, swelling of the lips or eyes. This is **type 1 (immediate) allergy**, you should see your GP, who can:

- prescribe an antihistamine eg chlorphenamine or cetirizine, to be carried at all times in case there are any more reactions.
- refer you to Paediatric allergy service for allergy testing (even if your child is under a year old). You should not try a cow's milk formula again until after the test - there is a risk of severe, life threatening reactions ("anaphylaxis").
- prescribe a special ("extensively hydrolysed") formula instead.

There are other babies however who have a different kind of allergy (non type 1) to milk, where you may not see any immediate reaction, but over the course of days or weeks the child will develop eczema (or worse eczema), tummy pain, vomiting, and/or diarrhoea. There is no test for this kind of milk allergy, other than removing milk from the diet for at least 2 weeks (milk exclusion) – your health visitor can offer advice and your GP can prescribe a special ("extensively hydrolysed") formula instead. Things should then improve significantly, if the problem is genuinely a milk allergy.

Cow's milk allergy can even affect breast fed babies! Milk proteins come through breast milk, so the test would be for mum to exclude milk and all other dairy products from her diet. Your health visitor can offer advice on this.

Other Food Allergies

The majority of children with eczema are not allergic to any foods, whatever other people may tell you!

If you see that your child reacts within minutes with itching, rash, swelling every time they eat a specific food eg egg, peanut, lentil, pea, fish, then they are likely to have a type 1 (immediate) allergy to that food. You should see your GP, who can prescribe an antihistamine eg chlorphenamine or cetirizine, to be carried at all times in case there are any more reactions. They should refer you to Paediatric allergy service for allergy testing for allergy testing (even if your child is under a year old), and you should not try that food again until advised to do so.

Information about specific food allergies is available at **www.cyans.scot.nhs.uk**

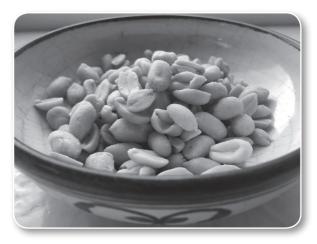
If you think that your child's eczema seems to get worse in the hours or days after they have eaten something they don't usually eat, or if they have been eating a lot more of one particular kind of food than usual, then it is possible they have a different kind of allergy (non type 1) to that food. There is no test for this kind of food allergy, other than strictly avoiding that food for at least 2 weeks to see if the eczema improves. This kind of allergy is sometimes seen with cow's milk (and other dairy products eg yogurt, cheese) and wheat. It can be really hard to find alternatives to these foods, your GP can refer you to a dietician for support if necessary. A dietician is essential if you have made major changes to your child's diet and you wish to continue with it because you feel it is making a big difference.

Sometimes it can be hard to work out what exactly is going on, and your GP can refer you to a paediatrician and/or a dietician if necessary. This is particularly important if there are several different foods you are worried about, and if there are concerns about growth or possible nutritional deficiencies.

No Known Trigger

Try not to avoid foods "just in case". Especially in the case of young children, recent evidence is that if avoid foods eg egg, peanut, you are more likely to become allergic in the future! When it comes to weaning you should offer a wide variety of different foods (avoiding anything that poses a choking risk) including even things that other people in the family are allergic to.

If you choose to avoid something because you think it might be making their eczema worse, then give it a week or two then try it again (unless there was an immediate reaction, as above, in which case you should see your GP first).



References

NICE clinical guideline 57 – atopic eczema in under 12s (Published 2007)

CYANS food allergy recommendations www.cyans.scot.nhs.uk

EAT study Michael Perkins, N Engl J Med 2016; 374:1733-1743 [DOI: 10.1056/NEJMoa1514210]

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Pub. date:	February 2023
Review date:	February 2025
Issue No:	04
Department:	Dermatology and
	Paediatric Allergy
Clinical Load	

Clinical Lead



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