### Dermatology Department

# Treating your skin condition (children)

A step-by-step guide on using moisturisers and steroid/other creams and ointment.

INFORMATION FOR PATIENTS



The moisturisers (emollient) corrects skin dryness. This is important as it reduces the amount of topical steroid needed. Moisturisers are used all the time

### How should I apply moisturisers?

Use your moisturisers all the time. Apply thickly all over the body at least twice a day.

After a shower or bath reapply the moisturiser

## Avoid using soaps

Soaps, including shower gels, dry the skin out. This can make your skin condition worse. We recommend using a moisturiser as a soap substitute instead. Soap substitutes are often, but not always, the same as your moisturiser. It should be used in the shower, bath and to wash your hands. Be aware they can make the shower and bath slippery.

# How do typical steroids work?

Topical steroids are used to settle inflammation in the skin. Inflammation is what makes the skin red, sore and itchy.

Topical steroids come in different strengths. A mild or moderate steroid is usually given for the face, while a stronger steroid may be given for the body. Topical steroids are mainly put on the red and sore areas of the skin for a certain number of days or weeks and then stopped.

#### How should I apply topical steroids?

Always wash and dry your hands thoroughly. Apply moisturiser 5 minutes before steroid. Use the fingertip unit (FTU) as a standard measure. One fingertip unit is the amount topical treatment squeezed from a standard tube from the tip of the finger to the first finger crease. One FTU is enough to treat an area of skin twice the size of the flat of an adult's hand with the fingers together.





### What should I do if my skin flares?

If the skin becomes red and sore again, the treatment is repeated. This is sometimes called 'reactive treatment'.

If the skin becomes red and sore after stopping treatment, your doctor may recommend using it as a maintenance treatment. This is sometimes called 'proactive treatment'. This involves using the topical steroid twice weekly, to the areas that normally become sore, and continuing to do this long term. This should reduce the frequency of flares but also reduces the risk of the skin thinning.

# Will steroids thin my skin?

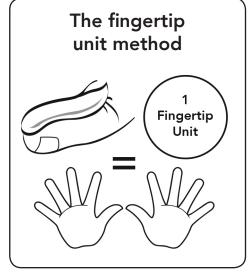
Many people worry that topical steroids can cause skin thinning. If you use topical steroids in the way described on this sheet, you should not have problems with skin thinning.

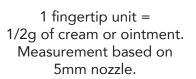
Please see detailed advice on above products on reverse.

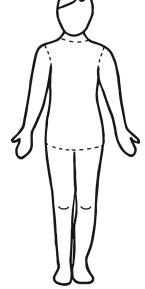
More information can be found on the following website:

http://www.bad.org.uk/for-the-public/patient-information-videos

# CHILDREN







	Face & Neck	Arm & Hand	Leg & Foot	Trunk (Front)	Trunk (Back Inc. Buttocks)
Age	Number of FTU's				
3-6m	1	1	11/2	1	11/2
1-2y	11/2	11/2	2	2	3
3-5y	11/2	2	2	2	31/2
6-10v	2	21/2	41/2	31/2	5

STEROID/OTHER	Moisturiser	
Face		
Apply once/twice daily for days/weeks/months		
	Apply all over twice daily	
runk and limbs/Hands and Feet/Genitalia		
	Soap substitute	
Apply once/twice daily for days/weeks/months		
	Pub. date: April 2023	
Repeat when flares: ☐ Yes ☐ No	Review date: April 2025	
Maintenance apply twice weekly: ☐ Yes ☐ No	Issue No: 01  Department: Dermatology  Clinical Lead:	