Patient Information for Dyshidrotic dermatitis

Overview

Dyshidrotic eczema (dyshidrotic dermatitis) is generally defined as an itchy rash limited to the hands (usually the palms and sides of the fingers) and/or the feet. Dyshidrotic eczema manifests as small, itchy, fluid-filled blisters. Its cause is unknown. Dyshidrotic eczema often comes and goes, with episodes more common in warm weather.

Who's At Risk

Dyshidrotic eczema may occur in people of all ages but usually occurs after age 10.

Signs & Symptoms

The most common location of dyshidrotic eczema is on the hands and, less commonly, the feet.

- Small, tense, clear fluid-filled blisters are seen on the surfaces of the palms and soles and the sides of the fingers and toes.
- These blisters can appear "deep-seated" (tapioca-like) due to the thickness of the skin on the palms. In severe cases, lesions can merge together and present as large blisters (bullae).
- Redness (erythema) is typically mild or absent.

Self-Care Guidelines

Avoidance of irritants may be helpful. Handwashing with mild soaps and cleansers and frequent application of thick emollient creams and petroleum jelly may be beneficial.

When to Seek Medical Care

Seek medical evaluation for a rash on the hands and/or feet that is unresponsive to self-care measures.

Treatments Your Physician May Prescribe

To manage dyshidrotic eczema, your physician may recommend soaks with drying agents if many blisters are present, as well as the removal of any potential irritating agents.

- Medium- and high-potency topical steroids may be prescribed to be used twice daily. Use of a high-potency topical steroid initially that is tapered to an as-needed basis may be most beneficial.
- An oral steroid (prednisone) can very effective and fast in controlling symptoms, but treatment with oral steroids is often less desirable, as tapering off the medication can result in severe flares of the disease.

• Chronic, severe disease can be treated with a form of ultraviolet light therapy called PUVA (psoralen and ultraviolet A) or narrow-band UVB (ultraviolet B) phototherapy administered by a dermatologist.