SKIN SCHOOL

by Dr Lizmaré Brönn

Evidence-based skincare, explained simply.

ATOPIC DERMATITIS

CHEAT SHEET OVERVIEW

ATOPIC DERMATITIS IN 60 SECONDS

SKIN BARRIER DEFECT
The skin barrier is weak.

→

MOISTURE LOSS & IRRITANTS
Water escapes out, irritants get in.

→

IMMUNE RESPONSE TRIGGERED
The immune system overreacts.

→

INFLAMMATION & ITCH
Redness, dryness, itch and irritation.

→

FLARE CYCLE
Scratching makes it worse and the cycle continues.

WHAT IS ATOPIC DERMATITIS (ECZEMA)?

Atopic dermatitis is a chronic, relapsing inflammatory skin condition that causes dry, itchy, inflamed skin. It is not contagious. It is common in children but can affect people of all ages and often runs in families (atopy).

TYPES (BY SEVERITY)

MILD

Dry, slightly red skin. Itching is present but sleep is usually not affected.



MODERATE

More redness, dryness and thickening. Itching interferes with sleep and daily life.



SEVERE

Widespread redness, thickened, cracked skin. Intense itching with sleep disruption and risk of infection.



WHAT CAUSES IT?

- Genetics / family history
- Skin barrier dysfunction
- Immune system overactivity

ECZEMA CAN SOMETIMES BE ASSOCIATED WITH:

- Allergic rhinitis
- Asthma
- Food allergies

COMMON TRIGGERS

- Soaps, detergents, bubble baths
- Wool and rough fabrics
- Fragrances, perfumes
- Heat, sweating
- Dust mites, pollen, pets
- Stress and lifestyle factors
- Cold, dry air
- Dry weather & low humidity

HOW IS IT TREATED?

- Emollients – the foundation (moisturise, moisturise, moisturise)
- Gentle, fragrance-free cleansers and soaps
- Topical anti-inflammatory steroids or calcineurin inhibitors
- Antihistamines (for itch and sleep support)
- Wet wrap therapy (in flares)
- Systemic treatments (for moderate to severe cases)
- Education and consistency are key!

WHEN TO SEE A DERMATOLOGIST

- If eczema is severe or not improving
- If skin is infected (oozing, crusting, pain)
- If itch affects sleep or quality of life
- If you need long-term management or advanced treatments
- If widespread redness (erythroderma)

PATIENTS ASK ME EVERY DAY

- Will I outgrow eczema?
- How do I apply my steroids?
- How do I do wet wraps?

Find these answers under Frequently Asked Questions

WHAT'S NEXT?

- Build a daily skincare routine
- Identify & avoid your triggers
- Use treatments as prescribed
- Keep your skin barrier strong
- Book regular follow-ups

KEY TAKE-HOME MESSAGES

- Moisturise liberally and regularly.
- Consistency is the key to calm, healthy skin.
- Avoid triggers and protect your skin.
- Short, lukewarm Baths. Gentle cleansers only.
- You're not alone – we're here to help you manage it.

WHAT ATOPIC DERMATITIS CAN LOOK LIKE

It can affect different areas and look different in every person and at every age.

INFANT (0–2 YEARS)



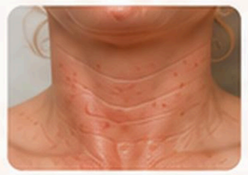
CHILD (2–12 YEARS)



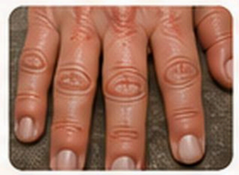
TEEN / ADULT (FACE)



TEEN / ADULT (NECK)



TEEN / ADULT (NANDS)



TEEN / ADULT (FLEXURES)



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