

Asheboro Dermatology & Skin Surgery Center

Hand Dermatitis

Hand Dermatitis is a descriptive term that includes any number of entities that result in a recurrent tendency for the hands to become irritated, itchy, scaly and/or generally inflamed. Sometimes the feet can be involved as well. Hand Dermatitis is a very common problem. It is quite frustrating and can be tricky to treat at times. Although a *specific* cause can sometimes be identified (such as a true allergic contact dermatitis.....e.g. allergy to glue or a specific chemical), this is *not* typically the case. Many patients continue to deal with inflammation and flare-ups despite their best efforts to control their condition. However, even if a cause is not definitively found, there are some habits and/or activities that consistently make hand dermatitis worsen. These include overwashing of the hands, use of irritating cleansers/detergents and/or excessive wet work.

In general, hand dermatitis is hard to completely “cure”. Usually, once the cycle of inflammation, cracking, dryness, blistering and irritation sets in, it comes and goes over time. Nonetheless, careful attention to your health care provider’s treatment approach can make a dramatic and lasting improvement in your hand dermatitis.

TREATMENT

Although it seems just the opposite, overwashing of the hands must be avoided. You should only wash your hands when they really need it, and when you do, use only a mild soap such as Cetaphil, Aveeno, Dove, Neutrogena, CeraVe or something similar. There is seldom a need to wash your hands more than a few times a day unless your job requires a more rigorous regimen.

Protect your hands. When doing wetwork (e.g. washing dishes), use rubber gloves with a cotton lining. When doing drywork (e.g. dusting, gardening), use cotton gloves.

In most cases, your doctor/provider will prescribe a topical steroid medication (e.g. Topicort, Ultravate, Lidex, Triamcinalone, Halog, Cormax, Elocon, Clobetasol or _____). This medicine is to be used as prescribed but generally is applied 2-3 times daily to the areas of hand dermatitis on an “as needed” basis. In other words, when the areas of dermatitis are under good control, you should taper back or stop the medication entirely. If the rash/inflammation returns (which it often does), go back to the medication in the previous manner and repeat the above. Overuse of the topical steroid can sometimes result in side effects to the skin or a phenomenon known as “tolerance” where the skin stops responding as well to the topical steroid.

If your case is particularly stubborn or itchy, your provider might also recommend a Kenalog shot or oral Prednisone. These medications are slightly

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stronger and can be quite beneficial to “jump start” your treatment. Side effects, though possible with any medication, are generally uncommon with these interventions. However, they are not used as a long term solution for hand dermatitis. They are mainly employed for significant “flares ups”.

There are a few non-steroidal products that have been used with some success in hand dermatitis. Some of these products include Neosalus, Hyalatomic, Eucrisa and _____.

One of the most important aspects of treating hand dermatitis is to moisturize the hands consistently. This should be done **REGULARLY** even when your hands are in good control. When you have hand dermatitis, it is literally impossible to “over-moisturize”, so use a good moisturizer frequently. It is also OK to apply your medicated product (e.g. topical steroid) first to the skin and to then apply moisturizer right over the top of it. There are a number of very good skin moisturizers available. Some are by prescription only such as _____. Most, however, are over the counter (OTC). These include Cetaphil, Eucerin, CeraVe, Moisturel, Aveeno, Neutrogena, Aquaphor Healing Ointment, Gold Bond or _____. Cetaphil Cream and Cerave Cream come in a convenient 1 pound jar size, and this is usually more economical. You should generally try to avoid moisturizers with fragrances b/c fragrances are often irritating to skin. Actually, Plain Vaseline Petroleum Jelly works about as well as anything on the market, but it is very greasy which limits its use to some extent. For mild dermatitis and/or dry skin, a lotion based product might be sufficient, but cream based products tend to work better for more difficult cases of dermatitis.

Your doctor/provider will prescribe a regimen suited to your particular situation. If you do not respond well or if you have questions, please let us know as we want you to have the best outcome possible!