

Seborrheic dermatitis

Seborrheic dermatitis (SD) is a skin condition that affects oily areas of the body. It is not contagious and concerns people with some predisposition. SD usually lasts for years and follows a waxing and waning course (seasonal outbreaks).

What areas are affected?

SD presents with scaly, flaky, itchy, red patches in certain areas of the body.

Most affected areas are:

In children:

- Scalp skin (cradle cap in breastfed babies).
- Ears.
- Skin folds: neck, armpits, belly button and, particularly, the diaper area.

In adults:

- Scalp skin.
- Face: both sides of the nose, nasolabial folds, eyebrows and eyelids (red rim with flakes in between the lashes).
- Central area of the chest and the back.
- Body folds: armpits, under the breasts or on the groin.

What's good for seborrheic dermatitis?

- The sun.
- Water and soap —in mild cases.
- Detergent-free skin cleansers with a neutral or acid pH.

What's bad for seborrheic dermatitis?

Emotional stress and tension, worry.

Face and scalp lesions get worse in the autumn and winter.

Fold lesions get worse in the summer.

Alcoholic, very greasy cosmetics.

Alcoholic beverages.

Spicy foods.

How is it treated?

While there is no cure for seborrheic dermatitis, its lesions can be controlled. Your doctor will indicate the best treatment for you according to the location of your lesions and your age.

Children:

- Scalp skin: use liquid paraffin or olive oil, then thoroughly comb over the scab.
- Other locations: use very mild topical corticosteroid creams or topical antifungals.

Adults:

- Scalp skin: use antifungal shampoos 2-3 times a week or shampoos which contain coal tar (it is dirty and smelly), zinc pyrithione, ictyol or selenium sulfide.
- Face and other body parts: antifungal and/or keratolytic agents. In case of severe outbreak, use a mild corticosteroid ointment for just a few days.

In order to prevent new outbreaks, avoid triggers and take good care of your healthy skin every day by using ointments containing cyclopyroxolamine, pyroctolamine, ictyol, juniper or keluamide.

