



SKIN RASH

Most skin rashes can be effectively treated. Treatments help stop symptoms such as itch, redness or swelling. Skin rashes need to be accurately diagnosed so that the cause of the skin rash is identified and removed and the right treatment is used.

Common skin rashes	Causes	Features/symptoms	Treatment
Contact eczema	Irritant (e.g. detergents, Shampoos, chemicals, Cement dust). Allergic (e.g. preservatives, medicines, cosmetics, metals).	Redness, minor swelling, small blisters, oozing, itching. May first show where contact occurs, then spread later to other areas.	Remove the cause. Use anti-inflammatory, anti-itch treatment. Do not use soap on area that has a rash. To prevent use barrier cream.
Atopic eczema	Unknown. Tends to occur in families who have asthma / hay fever.	Can be made worse by stress. Active phase: itchy, red, inflamed with small, weeping blisters. Inactive phase: dry, scaly. Usually in creases of elbows, knees, wrists. In babies starts on arms, legs, cheeks.	Avoid soaps. Use soap substitutes, simple moisturising creams such as aqueous or sorbolene cream. Topical steroid preparations may be needed. Talk to a doctor or pharmacist.
Psoriasis	Unknown. Tends to run in families.	Dry, red patches covered with silvery scales. Often seen on scalp, elbows and knees. Made worse by stress and hormonal changes.	Coal tar/pine tar bath and skin products (except if skin is inflamed). Some medicines make psoriasis worse. Talk to a doctor or pharmacist.
Heat rash	Blockage of sweat ducts from heat, dust.	Prickling or itchy, tiny red or pink blisters.	Have a cool shower. Avoid heat. Use prickly heat powder.
Impetigo ("School sores")	Bacterial infection	Small blisters which break to leave raw weeping patches forming dry, yellow crusts. Spreads from person to person very easily.	See a doctor for treatment. Antiseptics may help stop infection spreading - ask your pharmacist.
Chicken pox	Varicella virus	Raised, red itchy spots which blister, burst, then crust over - mainly on body, scalp, sometimes in mouth, ears. Infectious from 2 days before rash until 5 days after.	Hydrogel, anti-itch treatment, oral antihistamine. Treat high fever with paracetamol. Ask your pharmacist. Drink plenty of fluids. Contact doctor if there are any problems.
Rubella (German Measles)	Rubella virus - prevent with vaccination.	Blotchy flat, pink rash on face, neck and body. Tender glands. Infectious from 7 days before rash until 7 days after.	Treat high fever with paracetamol. Drink plenty of fluids. Avoid contact with pregnant women in particular. Contact doctor.
Measles	Measles virus - prevent with vaccination.	After cold symptoms, white spots in mouth, then blotchy flat, red spots behind ears, on face, back, limbs. Infectious from first symptoms until 4 days after rash appears.	Treat high fever with paracetamol. Drink plenty of fluids. Contact doctor urgently.
Tinea (Ringworm)	Fungal infection	Itchy red ring, pale centre with raised scaly edge.	See <i>Tinea</i> Fact Card.
Candidiasis (Thrush)	Fungal infection	In mouth white patches. Other areas red, tender, itchy.	See <i>Thrush</i> Fact card.
Nappy rash	Skin irritated by urine, bowel motions and some chemicals.	Mild burn-like rash. Red, slightly rough and Scaly.	See <i>Nappy Rash</i> Fact Card.
Scabies	Tiny insect-like mites, except head.	Intense itching all over body,	See <i>Scabies</i> Fact Card.

What products to use

To stop itch	<ul style="list-style-type: none">• Coal and pine tar bath solutions, creams and ointments• Oatmeal bath additives• Crothamiton preparations• Hydrogels• Antihistamine tablets and syrups (one with a sedative action is especially useful for night-time scratching.) Ask your pharmacist.
To reduce swelling, redness and itching	<ul style="list-style-type: none">• Hydrocortisone preparations – ask your pharmacist• Ichthammol preparations
To give protection to skin	<ul style="list-style-type: none">• Dimethicone preparations• Zinc cream preparations
To stop infections	<ul style="list-style-type: none">• Antiseptics e.g. chlorhexidine, cetrimide, povidone iodine
To treat fungal infections	<ul style="list-style-type: none">• Clotrimazole, econazole, miconazole, ketoconazole, bifonazole• Nystatin, terbinafine, tolnaftate
To replace natural moisture in skin	<ul style="list-style-type: none">• Sorbolene/glycerine cream• Simple (aqueous) cream• Emulsifying ointment• Bath oils

Important

Find out the cause of your rash before using any treatment. See your doctor if:

- You do not know or are unsure of the cause of the rash
- The rash covers a large area
- You also have a fever/feel unwell
- The rash is weeping, bleeding or has pus
- You have a history of skin rash in your family
- The rash is uncomfortable or embarrassing
- The rash is not any better in three days after using self care suggestions
- You think the rash may be infectious.

Self Care

- Ask a pharmacist or doctor if any medicines you are taking can cause a rash or make skin sensitive to sunlight.
- Have your child(ren) immunised against measles and rubella (see *Childhood Immunisation* Fact Card).

Your **Self Care** Pharmacist



KEEP OUT OF REACH OF CHILDREN
DAVID S. NOLTE PHARMACY
David S. Nolte, B.Pharm., M.P.S.
701 RATHDOWNE ST., NTH CARLTON 3054
Tel. 9349 1522 - Fax 9349 1115

- Avoid things that cause your rash e.g. clothes which are not dye-fast, using cosmetics and detergents etc.
- Protect yourself from too much sun (see *Sense in the Sun* Fact Card).

For sensitive skin

- Wear cotton lined rubber or vinyl gloves when washing, doing housework etc.
- Wear cotton clothes next to skin.
- Use moisturising bath additives.
- Wash clothes with a bland soap and rinse thoroughly.
- Apply a barrier cream before working with water, solvents etc.
- Use a soap substitute or an emulsifying ointment/cream to clean and moisturise the skin instead of soap. Ask a pharmacist.
- Keep fingernails short to reduce damage from scratching.

Avoid

- Using treatments prescribed for someone else.
- Using strong cortisone creams on your face or on skin infections, unless specifically told to by your doctor.
- Scratching a rash (this can make it worse).

Other relevant fact cards:

- *Nappy Rash*
- *Tinea*
- *Sense in the Sun*
- *Childhood Immunisation*
- *Thrush*
- *Scabies*

Contact:

Your doctor – listed under 'medical practitioners' in the yellow pages of the phone book

Eczema Association of Australia – (07) 3821 3297

PO Box 1784 DC

Cleveland QLD 4163

A Self Care pharmacist. To find: (02) 6283 4777

In case of poisoning, phone the **Poisons Information Centre** on 131 126 from anywhere in Australia.

Pharmacists are medicines experts. Ask your pharmacist for advice when choosing a medicine.

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