

# Itching and scratching

How to control  
eczema-related itching



## Contents

## Page

About this booklet	1
Why does eczema itch?	1
What does scratching do to the skin?	2
What makes itching worse?	3
Coping with the itch	4
Sleep disturbance	9
Further information and support from the National Eczema Society	12

# Itching and scratching

## How to control eczema-related itching

### About this booklet

For most people, itching is the worst and most uncomfortable symptom of eczema and can often be the most difficult to treat. Itching may also lead to sleep problems for both the person with eczema and their family.

This booklet explains why eczema makes you itch, how itching and scratching affect your skin, and what you can do to be more comfortable during the day and get a better night's sleep.

### Why does eczema itch?

Unfortunately, we do not know the whole answer to this question. What we do know is that skin affected by eczema releases certain chemical mediators – messengers that stimulate the nerves. (There are many chemical

mediators that are released into the skin and can make us itch. Interestingly, histamine, which makes insect bites so itchy, is not related to the itch in atopic eczema. Therefore, antihistamines do not help reduce the itch in such cases although sedating antihistamines are sometimes prescribed to help the person sleep.) Additionally, the nerve fibres in people who have atopic eczema appear to be altered, with an increase in sensory fibres. This can cause even the lightest touch to produce a sensation of itch. These nerves then pass on the sensation of itch to the brain, and before you know it, you are scratching. This is called a neurogenic itch, due to nerve pathways being activated.

However, itch is not completely straightforward as there is another type of itch, called a psychogenic itch. This means that the itch is also stimulated by psychological factors; these may be conscious or unconscious urges to scratch, brought about via habit or in response to stress.

Scratching is one of the main causes of skin redness and irritation in a person with eczema. It is scratching that damages the skin, not the itch. When the skin itches, the response is to scratch and this can become an unconscious, conditioned response. In other words, this is a learnt human

*Once I started scratching, I found that it was impossible to stop. The advice and help from the National Eczema Society have helped me to cope with these distressing bouts.*

RUTH, AGED 24

behaviour and quickly becomes an automatic reaction, even in very small babies.

Once you have started to scratch, you will probably find that you continue to do so and this leads to what is called the itch-scratch-damage cycle (see below).



Intense scratching often relieves the itch – some people even find it pleasurable (this can be another reason why trying to stop scratching is so hard) – until damage occurs when the skin is broken, and itch is replaced by pain, causing a person to stop. In the meantime their eczema has been made a whole lot worse.

## What does scratching do to the skin?

At first, scratching the skin produces redness, and then a rash and irritation may follow. If scratching continues, the skin can become broken and bleed.

Once the skin has been broken, there is a risk of infection. Broken skin also allows irritants (e.g. fragrance, soaps and detergents) and allergens (e.g. pollens and animal dander) to enter the skin easily and cause a reaction, which in turn will make the itching worse and may cause the eczema to flare up.

If someone has been scratching the same area for a long time, the skin will start to thicken – this is called lichenification. The skin looks like leather and can take weeks or months to return to its normal thickness. Lichenification can also cause changes in the colour of the skin, making it darker or lighter. These darker or lighter patches will eventually fade, but it may take weeks or months.

Some patients with eczema may have very itchy lumps which can also become dark and thickened if the skin is scratched or picked. This is known as nodular prurigo. If nodular prurigo occurs in people with darker skin, there is an increased risk of lighter or darker areas becoming permanently 'stained'. It is therefore important to ensure that all treatments are used effectively to reduce the risk of this occurring.

Fortunately, skin that has been scratched will heal well and scarring is unusual unless the skin has been constantly picked and scratching has been intense. This means the deeper layers of the skin (dermis) will be damaged and dermal damage will scar. The best way to avoid scarring is to control itch.

# What makes itching worse?

Almost all forms of eczema produce an itch. The following are some of the main triggers:

- *Dry skin* will always be itchy skin, and reducing dry skin is therefore a first-line approach to reducing itch. Dry skin, due to a defective skin barrier in atopic eczema, leads to trans-epidermal water loss (TEWL), i.e. loss of water through the skin. We know that TEWL increases at night, so this is one of the reasons why itching is worse then.
- *Temperature*: Changes in temperature can often cause the skin to itch (e.g. it is quite common for the temperature of the skin to change when you are getting dressed or undressed, and when you are in bed at night). Moving from hot to cold environments and vice versa can also cause itch (e.g. on a cold day going into a centrally heated house). Hot, dry heat on a summer's day can also cause itching, coupled with perspiration.
- *Overheating*: Night-time overheating in children is a feature of atopic eczema and can lead to loss of sleep for all the family. Applying emollients, especially ointments, too thickly can also cause overheating by blocking skin pores.
- *Central heating*: Bedrooms and bathrooms that are too warm (above 18°C) may lead to overheating.
- *Sweat* is a known irritant for people with eczema, who often find that they itch more after sporting activities. Perspiration can be a problem for children who are simply running around during play.
- *Clothing*: Some clothing material can be very irritating to the skin. For example, wool has quite coarse, stiff fibres and these can irritate the skin, causing it to itch. Rough seams, labels and loose threads can have the same effect. Clothes made from synthetic material can make the skin hot, leading to itch. It is important to remember this when buying your child's school uniform as many are made from synthetic materials to increase durability. Wherever possible, choose 100% cotton and dress in thin layers to avoid overheating.
- *Irritants*: Many substances irritate the skin and cause it to itch. Fragrance, soap and detergents are common causes of irritation, leading to itching. Household products and chemicals can also be problematic, causing more itching due to flaring eczema.
- *Allergens*: Many people with eczema come to know which substances can affect their skin – usually through trial and error.

Allergens such as house-dust-mite droppings, pet dander and pollen can make itching much worse. But it is important to remember that not everyone with eczema will react to the same things, and some people will find that they are unaffected by certain allergens. Certain chemicals can also be a problem for some people. If an allergic trigger is suspected – this may be a contact allergy (caused by something that touches the skin) or an ingested allergy (e.g. food allergy, which is rare over the age of 2 years) – a referral to a specialist may be made. Allergy tests in a hospital setting may include patch testing, skin prick testing or specific IgE testing (previously known as RAST). Allergy testing should be performed by specialists and not by 'high street' practitioners.

- *Psychological factors:* Stressful situations can have an effect on itching. People may itch in response to certain feelings and, for children in particular, tiredness can make eczema more irritated.

## Coping with the itch

### Treatments for itching

As well as the **practical tips** on pages 6–7, there are treatments available



from your healthcare professional that may help to reduce or control itching. Using emollients (medical moisturisers) and any other prescribed treatments helps greatly.

### Emollients

Emollients help to keep the skin well moisturised, reducing dryness and forming a thin layer on the skin that helps to prevent water loss through the skin barrier. Emollients are completely safe to use and can be applied as often as is necessary. You should apply them at least twice a day – more often if the skin is very dry. *Remember, dry skin will always be itchy skin!* There is a wide range of emollients on the market, many of which are available on prescription. It may be a case of trial and error to find the emollient that suits you or your child best. Some emollients contain anti-itching ingredients, called lauromacrogols, which are local anaesthetics. Remember, an emollient that suits you and that you use daily is the best way to relieve itching skin.

It is important to use emollients as soap substitutes for washing and in the bath or shower. Washing water should be tepid, as hot water can cause itching.

Bath emollients are available to buy but do not add any extra benefit to using emollients as soap substitutes. Oats are a traditional remedy for itching, and a muslin sack of oats can be attached to a running tap, for a soothing bath.

### Topical steroids

If the eczema and itching fail to respond to emollients alone, an additional treatment – usually a topical steroid – may need to be prescribed as a short-term treatment to help reduce the irritation and control the flare. (If skin is itchier than usual and becoming red, this is an eczema flare.) Topical steroids reduce the eczema flare and itching, and therefore prevent damage from scratching. Sometimes people with very itchy skin are worried topical steroids may damage their skin and therefore avoid using them. This may actually prolong the eczema flare, cause more itching and scratching, and lead to long-term skin damage due to the eczema itself. Before deciding which topical steroid to prescribe, the healthcare professional will take into account the age of the patient, the area of the body affected by the eczema, the severity of the eczema and other medications being taken. Usually they will start with the lowest potency (strength) topical steroid required to bring the eczema flare back under

control. Depending on the response, the steroids may be stepped down or up in potency. Used properly, topical steroids are safe to use. Always follow the instructions of your healthcare professional.

### Paste bandages and wet wraps

Paste bandages and wet wrapping can both be helpful in reducing the itch–scratch–damage cycle (especially at night, when scratching is often an unconscious action in sleep).

Paste bandages and wet wrapping – especially wet wrapping – are intense treatments used for five to seven days and should only be used if recommended by health professionals trained in the management of eczema. It is essential that you are given a demonstration of how to apply paste bandages and wet wraps. Wrapping and bandaging can be very time-consuming and should not be used to treat mild eczema. Wraps and bandages should not be used if the skin is infected. Covering up the skin with bandages and wraps makes topical steroids more potent, so only use topical steroids under bandages and wraps if advised by your healthcare professional. Topical calcineurin inhibitors, tacrolimus (Protopic) and pimecrolimus (Elidel), should not be used under paste bandages and wet wraps.

For more information about paste bandages and wet wrapping, please see the National Eczema Society booklet *Paste Bandages and Wet Wraps*.

## Practical tips to reduce the itch

- Use emollients frequently enough to prevent dry skin. Sometimes, thick applications of ointments can block skin pores and actually cause more itching, so apply often but lightly (but enough to make the skin glisten). Emollients will help to keep the skin intact and well moisturised, reducing irritation from allergens and irritants. Reapply before the skin becomes dry again.
- Always apply emollients in smooth, downward strokes. Do not rub them into the skin as this can make itching worse. For children, try to make putting on emollients a positive experience, encouraging them to stroke and soothe on their own emollients – use reward charts, sticking on stars for moisturising and not scratching. Children can decorate their emollient pots and dispensers to make them more fun to use.
- Keep nails short, and make sure there are no jagged edges.
- Avoid plain water for washing and bathing. Always use a soap substitute or your usual leave-on emollient to wash with and then rinse off.
- A daily tepid emollient bath using your emollient as a soap substitute is very helpful. Water alone can cause itching, so your emollient should always be used whenever you wash your skin. Some people find that the area they live in affects their skin because of the hard water. (However, a recent study looking at the use of water softeners in areas with hard water showed no benefit [www.swet-trial.co.uk](http://www.swet-trial.co.uk))
- After washing and bathing, pat the skin dry with a soft towel rather than rubbing.
- Use cotton sheets and blankets on beds, or low-tog (4.5) duvets filled with manmade fibre, not feathers, to prevent overheating in bed.
- Try cotton gloves or mittens, and for babies/children, use all-in-one sleep-suits with built-in mittens to reduce the damage from scratching the skin, especially at night. Sleeves with silk or cotton mitts can also be useful.
- The Centre of Evidence Based Dermatology at the University of Nottingham has created stories to help children break the itch-scratch cycle. You can access these at: [www.nottingham.ac.uk/research/groups/cebd/resources/psychology-and-eczema.aspx](http://www.nottingham.ac.uk/research/groups/cebd/resources/psychology-and-eczema.aspx)
- Aim to distract yourself or your child from the itch. Watch a DVD, read a book, go out or give children toys to play with or an activity to do.

- Try not to say 'Don't scratch' to children or adults who are scratching. A lot of scratching is done without the person even realising that they are doing it. Shouting at or nagging someone who is scratching could create resentment and distress and increase feelings of stress. Instead, offer to help moisturise and turn it into a soothing action.

Try to substitute some other action for scratching. You may find it helpful to press a nail onto the skin or pinch the skin gently instead of scratching. Clenching fists and counting to 10 also works well, especially for children. Parents and partners sometimes find that if they moisturise and massage the skin gently for their child or partner, it helps to cut down on potential skin damage.

- For very itchy patches of skin, some people find a bag of frozen peas or something similar wrapped in a towel and placed on the skin will help. Avoid putting ice directly onto the skin. Children might enjoy painting a picture on a flat stone and giving it a name. This can then be placed on itchy areas to cool the skin.



- Applying cool emollient creams or lotions (not ointments) that have been kept in the fridge may help, although some people find that warm emollients are the most soothing (but don't warm in the microwave, on the hob or in the oven, or allow to get too hot!).
- Keep cool. Use several light cotton layers, rather than having one heavy and warm layer of clothing or bedding – that way, you can adjust the temperature to suit you. Keep bedrooms cool and ventilate rooms on a regular basis.
- Talk regularly to your dermatologist, GP or nurse about your treatments to make sure that you are using what is best for you at that time and that you are adequately treating your eczema flares.

### Topical immunomodulators

Other non-steroid treatments, known as topical immunomodulators or topical calcineurin inhibitors (TCIs), are second-line treatments for eczema flares and are also used for maintenance. These are Elidel (pimecrolimus) cream and Protopic (tacrolimus) ointment. Topical immunomodulators act on the cells in the body and the skin to dampen down the immune system, which helps to reduce inflammation and makes the skin less itchy and red. They are applied to the skin for six weeks to treat flares, and then can be used twice a week for maintenance, to try to prevent further flares (this is known as weekend therapy). They are licensed for use in treating atopic eczema in adults and children of 2 years of age and over.

### Habit reversal

Habit reversal (also called 'the combined approach') is a behavioural technique that is taught to patients by either a psychologist or dermatology specialist (doctor or nurse). The programme works well in older children and adults and is mainly for people with long-term atopic eczema.



The treatment helps people to realise when and why they are scratching and then to find an alternative to scratching. They are encouraged to look again at the treatments that they are using and to identify triggers in order to reduce the amount that they scratch. In the long term this means less damage to the skin and a reduced need for topical steroids and other treatments. Ask your GP if local dermatology or psychology departments offer habit reversal and if you can be referred. Sadly, there are only a few dermatology centres around the UK offering habit reversal.

For more information about habit reversal, please see: [www.atopicskindisease.com](http://www.atopicskindisease.com). There is also a self-help book available: *The Eczema Solution*, written by Sue Armstrong-Jones and published by Vermilion.

### Hypnotherapy

Hypnotherapy is not the same as the stage hypnosis that you might have seen on television. Hypnotherapy or clinical hypnosis is a procedure whereby a health professional or researcher suggests that a person experiences changes in sensations, perceptions, thoughts or behaviour. There are many different ways to do this, including suggestions for relaxation, calmness and well-being. Children can also benefit from hypnotherapy.

There have been some studies investigating the use of hypnotherapy to reduce itching in people who have eczema. There does seem to be some

benefit in that it helps people to 'see' their itch and to learn to control it.

It is important to find a properly qualified hypnotherapist who is registered by the British Society of Clinical and Academic Hypnosis. You can find this information at [www.bsch.org.uk](http://www.bsch.org.uk) and [www.general-hypnotherapy-register.com](http://www.general-hypnotherapy-register.com)

## Sleep disturbance

If you or your child has eczema, it is likely that you or they will at some point have disturbed sleep. Waking in the night can lead to a relentless succession of broken nights over weeks or months, leaving you and your child utterly exhausted and irritable. The waking in the night disturbs not just the person with eczema but affects other family members as well. In one study that looked at families with a child with eczema, the child, the parents and the siblings were all affected by sleep disturbance. In severe cases the night-time itching and scratching may lead not only to tiredness and irritability but to lack of concentration at – or absences from – work and school. Tension and stress can also arise within a family or between partners. People with eczema and their parents or partners can be deprived of proper sleep for long periods of time. Inevitably, this will affect every aspect of life.

## Why does eczema affect sleep?

Many people scratch in their sleep and will sometimes wake up because of this. One piece of research showed that children with atopic eczema spent 13–136 minutes each night scratching, and scratched 20–97 times. This is much more than happens with people who do not have eczema.

During the day, it is often possible to distract yourself or your child when feeling the need to scratch, but even so it can be hard to resist the temptation. At night, distraction is much more difficult.

Once in bed, people with eczema can get very hot and this can cause them to itch. People with atopic eczema may be affected by the droppings of house-dust mites, which live unseen in mattresses and bedding. Again, this can mean increased itchiness at night, so do use protective covers (ones that go all the way round, rather than just covering the top and sides of the mattress) and try to avoid sleeping on old mattresses.

Waking at night can become a habit. Children will sometimes disturb their parents at night in order to receive comfort and attention, and this can make life difficult. Try to avoid letting your child climb into bed with you. When you have more than one person in the bed, the environment will become very hot and this will make the child itch more. It is better to go to the child's room to give comfort and then be firm and let the child fall asleep in their own room. For advice



on establishing good bedtime and sleep routines, visit the Sleep Council's website: [www.sleepcouncil.org.uk](http://www.sleepcouncil.org.uk)

If you are disturbing your partner at night by scratching or being restless, it may be worth having an alternative place to sleep for a few nights when your eczema is very bad.

## Treatments for sleep disturbance

### Antihistamines

Sedating antihistamines that cause drowsiness can be useful at night. Ideally, they should only be used for a few days at a time when the eczema is very severe and you or your child is having a lot of trouble sleeping. They can be used safely in the long term.

There are a few to choose from: some can be bought over the counter from your pharmacist and others are available only on prescription. Non-sedating antihistamines are used to treat allergy and urticaria

(hives) to block histamine pathways. Unfortunately they do not work well on eczema itch, which does not have the same direct histamine link.

You need to take an antihistamine about one hour before going to bed as this will give it time to work and make it less likely that you will have a hangover effect in the morning.

Some antihistamines are only suitable for children over 2 years, and *for all children antihistamines must be prescribed by your healthcare professional.* (Please note that in some cases these can make children more active instead of drowsy.)

You should talk to your healthcare professional before giving your child antihistamines, or before taking them yourself.

If you are intending to start a family or are pregnant, always check with your healthcare professional regarding which antihistamines are safe for you to use.



## Practical tips for sleep

- If you or your child is itchy enough to wake at night, it may be that the eczema is not being well controlled. Ensure that you are applying plenty of moisturiser and use topical steroid as prescribed by your healthcare professional. For further advice on managing eczema flares and using topical steroids, please see the National Eczema Society factsheet 'Topical Steroids'.
- Avoid the use of soap when washing, and ensure that bedding and clothing that touch the skin are made of cotton (ideally 100%), bamboo or silk. Remember to use low-tog, fibre-filled duvets, all year round – in the summer you or your child will probably only need a sheet.
- Paste bandages and wet wraps can help to protect the skin from scratching and rubbing (see page 5).
- Keep emollients at hand at night and put them on as soon as you or your child wakes up itching.
- Keep bedrooms cool, especially at night (18°C or below).
- You or your child should wear loose-fitting pyjamas or a light cotton nightdress.
- About an hour before going to bed, take a bath or shower in tepid water, then apply plenty of moisturiser to soothe and cool the skin.
- Do not apply too thick a layer of emollient as this can block the skin pores and make you or your child hot and sweaty.
- If you or your child has atopic eczema and you know – or strongly suspect – that you are sensitive to house-dust-mite droppings, you may find it useful to try to reduce house-dust-mite levels by vacuuming frequently, dusting with a damp cloth and using house-dust-mite-proof covers for the mattress and bedding.
- If you have pets, do not allow them in the bedroom as dander can irritate eczema and set off a bout of itching. (The advice about vacuuming frequently and damp dusting applies equally to areas where pets have been, and it is important to wash hands and moisturise after handling animals.)
- Sometimes disturbed sleep can cause a lot of tension in families and between partners. Talking about the effect that eczema is having upon sleep and being honest about how you feel is vital.

## Further information and support from the National Eczema Society

More information than can be given in a booklet of this size is available from the National Eczema Society. We have other booklets including:

- **Childhood Atopic Eczema**
- **Living with Eczema**
- **A Guide for Teenagers with Eczema**
- **All about Contact Dermatitis**
- **Paste Bandages and Wet Wraps**

Booklets can be ordered from our website or from our Helpline.

Website: [www.eczema.org](http://www.eczema.org)

Helpline: Telephone\* **0800 089 1122** (Monday to Friday 8am to 8pm)

*\* Calls are free from UK landlines. Charges vary from mobiles.*

Email: [helpline@eczema.org](mailto:helpline@eczema.org)

We are proud of the wealth of information available on our website about types of eczema and treatments and recommend you visit it whenever you need information. It is updated frequently.

Our confidential telephone and email Helpline is at the heart of our work, providing information, support and reassurance to thousands of people struggling to cope with eczema. We are not medically qualified and do not diagnose, prescribe, give medical

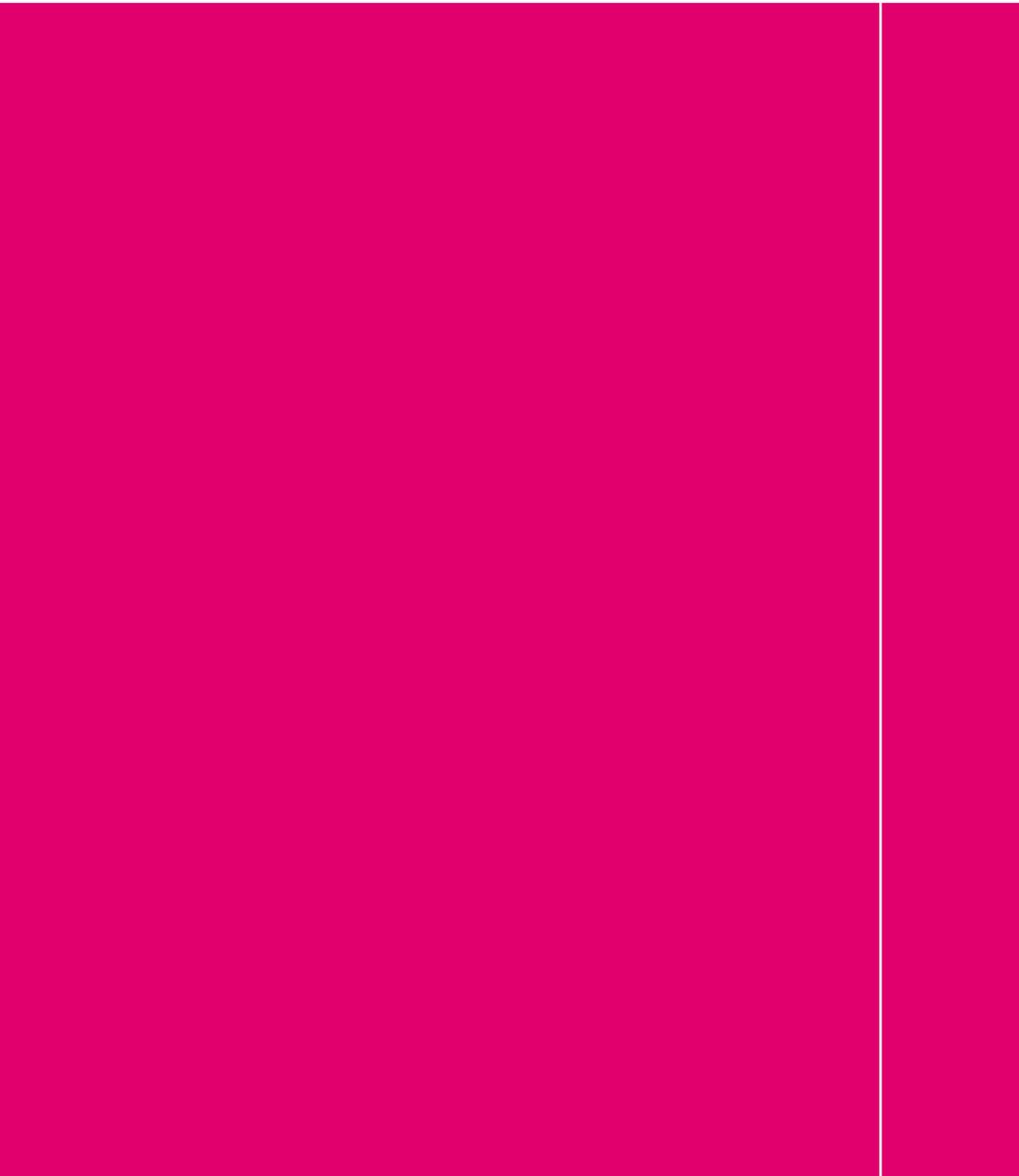
advice or opinions on treatments prescribed by your healthcare professional. We do, however, offer a wealth of practical information about the day-to-day management of eczema and the different treatment options available.

The Helpline is open to all UK residents who are affected by eczema. Please allow five working days for us to reply to you if using email. We are not able to answer queries from non-UK residents as terminology, healthcare systems and treatments may differ in your country of residence, which may cause confusion.

In addition, the National Eczema Society publishes *Exchange*, a quarterly magazine packed with:

- articles on eczema management
- features by people with eczema sharing their experiences
- treatment and research news
- experts' replies to your questions.

You can subscribe to *Exchange* for £20 p.a. at [www.eczema.org](http://www.eczema.org) or by calling our membership team on **020-7281 3553**.





**National Eczema Society**

11 Murray Street  
Camden  
London NW1 9RE

*Eczema Helpline:* 0800 089 1122

*email:* [helpline@eczema.org](mailto:helpline@eczema.org)

[www.eczema.org](http://www.eczema.org)

The National Eczema Society is registered as a charity in England and Wales (No.1009671) and in Scotland (No.SCO43669) and a company limited by guarantee (No.2685083).  
Registered Office: 11 Murray Street, London NW1 9RE.

The information in this booklet is only a general guide. Individual circumstances differ and the National Eczema Society does not prescribe, give medical advice or endorse products or treatments. We hope you will find the information useful but it does not replace and should not replace the essential guidance given by your doctor and other healthcare professionals.

Booklet written by Jill Peters RGN BSc (Hons) DipNP, Nurse Prescriber.

Revised edition reviewed and updated in May 2018 by Julie Van Onselen, Dermatology Nurse Adviser to the National Eczema Society.

Designed and produced by [www.dewinter.agency](http://www.dewinter.agency)

©The National Eczema Society 2018.

All rights reserved. You must have our written permission to electronically or mechanically reproduce or transmit this publication or any part of it.