

Our lower legs can sometimes get inflamed or itchy. This is known as dermatitis.



Dermatitis on the lower legs can often be caused by eczema. Eczema is a common skin condition that comes in many forms and affects people of all ages. It's not contagious, so you can't catch it from someone else.

Contact eczema/dermatitis

Contact eczema/dermatitis accounts for 70-90% of all occupational skin disease. It is an iflammatory skin condition caused by external irritants such as body lotions and creams, or by clothing that contains wool.

Atopic eczema/dermatitis

Atopic eczema is more common in children but you can also develop it for the first time as an adult. It is not clear what causes atopic eczema but it often occurs in people who have allergies.

Varicose eczema/dematitis

Varicose eczema happens when high pressure in the veins in the legs pushes our blood into the skin tissue. This causes irritation. Varicose eczema is usually red and very itchy with scaly patches. Sometimes you may have patches that are also weeping or notice reddish brown staining above your ankle. Varicose eczema can be itchy and you are advised not to scratch and this can exacerbate the itchiness and damage or break the skin.





Get the lowdown on leg and foot conditions at

legsmatter.org

GETTING DIAGNOSED

If you have dry, itchy or scaly skin on your legs, make an appointment at your GP practice. You may be given an appointment to see the nurse rather than the doctor as nurses are often responsible for caring for patients with leg problems.

Alternatively, there might be a Leg Club or specialist leg clinic in your area. You don't need to be referred by your GP to attend one of these.

When you see the nurse or doctor, they should:

- Ask about your symptoms and how long you have had problems
- Examine your lower legs

If it looks like you have varicose eczema, you may be offered a simple test called a Doppler Ultrasound. This test compares blood flow in your ankle with that in your arm to find out if there are blood flow problems in your lower leg. You might have to come back to have your Doppler test on another day or at another clinic but you should have this test within a few weeks of your first appointment.

You may also wish to visit your local pharmacy in the first instance and speak to a pharmacist who may be able to assist.

TREATMENT

If you have any form of eczema, the most important thing is to keep your skin clean and well moisturised. Avoid soap as this can be very drying. Instead, use a moisturising soap substitute when washing, bathing and showering.

After washing gently dry the skin avoiding excessive rubbing to reduce friction and irritation. Ensure the skin is fully dry before applying a moisturiser paying particular attention to in between the toes. Applying the moisturiser in a downward motion, not against the hair growth, can help prevent irritation of the hair follicle from the moisturiser. Allow the emollient to soak in for a time before applying clothes or undergarments as this will help optimise absorption.

Always moisturise your skin after washing, bathing and showering preferably using a unperfumed emollient. You might want to use a bath emollient or oil in addition to your moisturising lotion, cream or ointment, as these clean and hydrate the whole body. If you're using bath oils, remember to also use a rubber mat or grip rail as the bathtub can become very slippery.

Sometimes, your skin may need more than just a moisturiser. Your doctor or nurse may recommend a mild steroid ointment or cream to be applied to the areas of eczema.

If you have varicose eczema, compression therapy can also help improve your blood flow and ease varicose eczema.

OTHER SUPPORT

The Lindsay Leg Club Foundation

Promoting and supporting community based treatment, health promotion, education and ongoing care for people who are experiencing legrelated problems - including leg ulcers and other wound care issues.

T: 01473 749 565 | W: legclub.org E: lynn.bullock@legclubfoundation.com

The National Eczema Society

Formed in 1975, The National Eczema Society has two principal aims: first, to provide people with independent and practical advice about treating and managing eczema; secondly, to raise awareness of the needs of those with eczema with healthcare professionals, teachers and the government.

T: 0800 089 1122 | E: helpline@eczema.org W: eczema.org

The Primary Care Dermatology Society

A useful website with lots of information including Dermatology Dictionary

W: pcds.org.uk/clinical-guidance/atopic-eczema

Find out more about the campaign and how you can get involved **legsmatter.org**







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