


# NOTTINGHAM SUPPORT GROUP FOR CARERS OF CHILDREN WITH ECZEMA

In association with : Nottingham University Hospitals   
NHS Trust

Written by Professor Hywel Williams, Dr Ruth Murphy, Dr Jane Ravenscroft, Nurse Consultant Sandra Lawton and parents on behalf of the Nottingham Support Group for Carers of Children with Eczema.

## The “DISCOID” Pattern of Atopic Eczema - Information for Parents

### What is discoid atopic eczema?

This is a particular pattern of childhood eczema that tends to form coin shaped areas of eczema, rather than the more typical pattern of eczema, which affects the skin creases. It is quite common on the limbs and a child can have “ordinary” eczema affecting the body and skin creases as well as discoid eczema at the same time.

### Why is discoid eczema any different from ordinary atopic eczema?

Apart from looking different and occasionally confusing people about the diagnosis, discoid eczema is usually far more stubborn to treat. Atopic eczema affecting the body and skin creases usually responds to mild steroid creams, whereas discoid eczema usually requires the application of a stronger preparation for a longer period. If the skin is very thickened, this may be as long as 4 – 6 weeks.

### Does the discoid eczema mean that something in particular is causing it?


At the moment, we do not believe that the causes of the discoid pattern of atopic eczema are any different from ordinary eczema i.e. a combination of a genetic tendency and various factors in the environment such as house dust, pollen and diet. However, we do often observe that dryness of the skin is common in discoid eczema, so it is important that you keep your child’s skin well greased with a good moisturiser. Secondary infection is also common in discoid eczema. If it fails to respond to the stronger steroid creams then a 2 week course of antibiotics is sometimes helpful, especially if the areas are oozing and very red in appearance.

### Does discoid eczema have a worse outlook than ordinary eczema?

As far as we know, the outlook is just the same in the long term, i.e. we expect at least 70% of children to clear completely by the age of 11. The marks left by the discoid pattern of atopic eczema may look more striking at first but these will eventually disappear. This may take up to 18 months. Usually the skin returns to a perfectly normal appearance and scarring is extremely unusual.

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For advice on support issues please contact the NSGCCE via the website  
[www.nottinghameczema.org.uk](http://www.nottinghameczema.org.uk) and click on the contact icon  at the  
top of most pages or email us at [enquiry@nottinghameczema.org.uk](mailto:enquiry@nottinghameczema.org.uk)

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