Eczema and Food Allergy

1. Eczema, also known as atopic dermatitis, is an immune system disorder caused by an abnormal skin barrier, skin dryness and inflammation. People with eczema often have other allergic conditions, including food allergy, but food allergy does not cause eczema.

2. Eczema affects the skin, causing redness, itching and sometimes infections. When eczema worsens it is called an eczema flare. Common triggers of eczema flares include dry climate, overheating, exposure to irritants (such as sand or dirt), scratching, allergens (such as dust mite) and bacterial skin infections.

3. Eczema can be well managed by maintaining, protecting and treating skin by:
   - Applying moisturiser at least twice a day (avoiding those that contain food products).
   - Using a non-soap based wash or oil in the bath or shower.
   - Avoiding soap and washes that produce bubbles or foam, which damage and dry out the skin.
   - Avoiding known triggers (including foods if confirmed) and irritants.
   - Using anti-inflammatory creams and ointments, such as topical steroids.
   - Treating bacterial skin infections with antibiotics, or using bleach baths if infections are frequent.
   - Using immune modulating treatments, if prescribed for severe eczema.

4. Food allergy is more common in infants with eczema and a family history of allergy. Around 30% of infants in these groups develop food allergy compared to only 10% in the general population. There is some evidence that managing eczema well during infancy may reduce the chance of an infant developing food allergy.

5. When a child has eczema and food allergy, food allergy may trigger eczema, but is not the cause of their eczema. Most food allergy causes hives, vomiting and irritability within 30 minutes of eating. Food allergy only occasionally results in delayed eczema flare ups.

6. Results of skin tests or blood tests for food allergy do not predict food/s that are making the eczema worse. Allergy testing should only be undertaken if recommended and interpreted by a clinical immunology/allergy specialist.

7. Food exclusion diets should only be tried in children with eczema that does not improve with treatments listed in point 3 above. Confirming that food allergy is causing delayed eczema only requires short term food exclusion. Food exclusion diets should always be supervised by a clinical immunology/allergy specialist. If the specialist recommends continuing food exclusion longer term, children should also see a paediatric dietitian with specialised knowledge of food allergies.

8. Taking foods out of a child’s diet without using the right substitutes can cause malnutrition and poor growth. If a child has been regularly eating a food without signs of allergy, taking that food out of their diet can result in them developing a new allergy to that food.

www.preventallergies.org.au/eczema

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