



# **SNS COLLEGE OF NURSING**

**SARAVANAMPATTI, COIMBATORE-35**

**DEPARTMENT OF NURSING**

**COURSE NAME : BSC (N) II YEAR**

**SUBJECT : MEDICAL SURGICAL NURSING**

**UNIT IX: INTEGUMENTARY DISORDERS**

**TOPIC : DERMATITIS**

DERMATITIS/MSN/MRS.R.UMAMAHESWAR



# INTRODUCTION

- It is condition- **inflammation of the skin, typically characterized by itchiness, redness and a rash.** In cases of short duration, there may be small blisters, while in long-term cases the skin may become thickened. The area of skin involved can vary from small to covering the entire body.

# DEFINITION

The inflammation of skin characterized by erythema and pain or pruritis is called as dermatitis



# TYPES

- It is mainly divided into 4 types
- Contact dermatitis
- Atopic dermatitis
- Seborrheic dermatitis
- Exfoliative dermatitis





# CONTACT DERMATITIS



- It is the inflammatory reaction of the skin because of exposure to physical, chemical or biological agents.
- The main causes of contact dermatitis includes acids, alkalies, soap, detergents, cosmetics, iodine, petroleum products, nail polish, lubricating oils, etc.

# CONTACT DERMATITIS

- Frequent contact with water and extreme of heat and cold can also predisposed to contact dermatitis
- Clinical features:
  - Acute phase
  - Subacute phase
  - Chronic phase



# ACUTE PHASE

- Erythema
- Itching
- Burning sensation over the affected area
- Edema
- Formation of vesicles
- Oozing from the wound



# SUBACUTE & CHRONIC PHASE



## **Subacute :**

- Crusting
- Drying
- Fissuring
- skin peeling

## **Chronic :**

- Hyper/hypopigmentation
- Skin become thick
- Secondary infection will occur





# TREATMENT

- Local irritation should be avoided
- Avoid applying soap over the affected area
- Non medicated skin lotion should use over the affected area
- Cool, wet dressing should be applied
- Corticosteroids and anti pruritic ointments should be used.

# ATOPIC DERMATITIS

- Atopic dermatitis is a chronic relapsing pruritic type of inflammatory skin disorder.
- More common among children.





# CAUSES



The exact cause is unknown

Risk factors are:

- Elevated level of Ig E
- Increase sensitivity towards histamine
- Family history of dry skin, eczema, asthma and allergic rhinitis

# CLINICAL FEATURES

- Red , oozing, crusting rashes.
- As child grows chronic form of dermatitis will develop which include thickened dry skin, brownish gray colour scales and localized rash will develop.
- Rashes mainly over elbow, back of knee, neck, eye lids and back of hands and feet.



# MANAGEMENT



- Apply lubricants over the skin to avoid excessive drying and cracking
- Provide IV fluids
- Allergens should be removed
- Wet dressing should be applied
- Promote oral intake of fluids
- Antibiotics
- Corticosteroids

# SEBORRHEIC DERMATITIS

- It is a chronic inflammatory disorder of the skin which involves scalp, eye brows, eye lids, ear canals, axilla and trunk.





# CAUSES AND RISK FACTORS

- The exact cause is unknown
- Patients who are taking methyldopa in case of Parkinson's disease
- Hypertension
- Aids

# CLINICAL FEATURES

- Formation of yellow or white plaque with scales and crust
- Mild pruritis
- Dandruff and erythema of scalp





# MANAGEMENT

Proper hydration of the patient  
Lubricants should be applied  
Maintain personal hygiene  
Start antibiotics and corticosteroids.



# EXFOLLIATIVE DERMATITIS



- It is the skin disorder which is characterized by excessive peeling and shedding of the skin
- Causes and Risk factors:
  - Pediculosis
  - psoriasis
  - use of sulfonamides
  - lymphoma



# CLINICAL FEATURES

- Weakness
- Fever
- Malaise
- Chills
- Weight loss

## Other symptoms

- Scaling/peeling of the skin
- Erythema
- Pruritis
- Hairloss
- Nail loss
- Dehydration

Etiology /Riskfactors

Inflammatory Reaction in skin

Eruption of Skin

Erythema, Vesicles, Pruritis will occur

Continuous irritation and scratching over the skin

Long term irritation

Thickening of the skin



# DIGNOSIS EVALUATION



- History collection
- Allergen exposure
- Family history
- Scratch test and Intradermal test are used to find out the allergens.



# NURSING MANAGEMENT



- Instruct the patient to avoid exposure to allergens.
- Change the diet which causes food allergies.
- Lubricate the skin to prevent dryness and pruritis.
- Apply steroid ointments after bathing to prevent the infection.
- Avoid driving if antihistamines are used as it causes drowsiness.



# CONCLUSION

**Dermatitis is a general term for conditions that cause inflammation of the skin.**

Examples include atopic dermatitis (eczema), contact dermatitis and seborrheic dermatitis (dandruff). These conditions cause red rashes, dry skin and itchiness among other symptoms.



# ASSESSMENT



1. Define Dermatitis
2. Enlist the types of dermatitis
3. Enumerate the clinical features
4. Name the diagnostic test
5. What are the nursing management for dermatitis





# REFERENCES

- BRUNNER & SUDDARTH, MEDICAL SURGICAL NURSING, 1<sup>ST</sup> EDITION
- LEWIS'S, MEDICAL SURGICAL NURSING, 9<sup>TH</sup> EDITION
- DAVIDSON'S, PRINCIPLES AND PRACTICE OF NURSING, 24<sup>TH</sup> EDITION

**THANK YOU**