Introduction

According to the Merriam-Webster online dictionary, eczema is defined as 'an inflammatory condition of the skin characterized by redness, itching and oozing vesicular lesions which become scaly, crusted or hardened'.

This basic dictionary definition immediately gives you some idea that eczema is not a pleasant condition to suffer from.

As you will discover as we go through this book, eczema has been around for thousands of years, but sadly, modern medical science is no nearer to curing eczema than were our forefathers.

Like many skin complaints, eczema is one of those things that most people end up treating on a superficial or skin level, primarily because medical science tends to adopt the same attitude.

However, because we are looking for a way of dealing with eczema totally naturally, many of the solutions you will read of in this book adopt a far more holistic approach to getting rid of or at least minimizing the worst effects of eczema.

While there are lots of things that you can do on a topical level (on the surface) that will reduce the severity of eczema using only natural substances, I'm also going to dig down into some other ways that you can deal with your eczema from the inside, rather than doing so only on an external level.

Before moving on to start looking at various treatments that you can use to deal with your eczema problem, let us look in a little more detail at what the condition is, and who gets it.

What is eczema?

Like many other skin conditions such as psoriasis and dandruff, there is a great deal about eczema that is still a mystery to us.

For example, because eczema refers to a set of clinical characteristics rather than one particular condition, the definition of the underlying causes of eczema has often been unsystematic and haphazard (at best). Indeed, over the years, there have been many different terms and names that have been used for the condition, as dozens of so-called experts have come up with their own definitions of what eczema is and what it is not.

Partially as a result of this confusion, eczema is a condition that is often mixed up with psoriasis. However, the two conditions are not identical, the main difference between the two being that adult eczema is often found on the flexor aspect of body joints (those body parts on the inside of a joint that can decrease in size or surface area because of flexing) while psoriasis is generally not found in these particular areas.

What is generally agreed is that eczema is a form of dermatitis. Dermatitis in turn is used as a 'catch-all' term for any inflammation of the epidermis, which is the outermost layer of the human skin.

Consequently, for many non-medical professionals, the two words eczema and dermatitis are almost interchangeable, and (just to confuse things a little further) you will also hear eczema referred to as eczematous dermatitis or dermatitis eczema.

If you are anything like me, all of this extra 'helpful' information will probably do far more to confuse you than provide any clearer picture of what eczema is and what it isn't. This is primarily because all we really know about eczema is that it is an inflammation of the skin, which doesn't really tell you great deal more than you already knew when you started.

Types of Eczema

Atopic eczema: Atopic eczema is the most common form of eczema, which is believed to be a hereditary condition. The condition is sometimes known as infantile eczema, because by the very nature of being hereditary, it is the form of eczema that is most commonly seen in children.

If one parent is an eczema sufferer, or if they suffer from hay fever (the strongest indicator) or asthma, the child has a significantly higher chance of having eczema. In fact, if both parents are eczema sufferers, the chances of their child suffering from the condition are as high as 80%.

It is suggested that if your child suffers from atopic eczema, their immune system is overreacting to some kind of external stimulus such as pollen, dust mites, animal hair or skin flakes, leading to irritated, inflamed and (above all else) itchy skin.

If a child is suffering from atopic eczema, they will exhibit most of the classical eczema conditions mentioned earlier, such as itchy red lesions on the head, neck, scalp and face and the flexor areas of the body.

If these skin lesions are scratched with sufficient severity, it is likely that the skin will bleed, raising the possibility of suffering infections.

Another possible problem is that many eczema sufferers scratch their skin to the extent that their skin can become tough, leathery and hard. Sometimes, these lesions will dry out, causing the dry, flaky skin that is so familiar to people who regularly suffer eczema flare-ups.

Fortunately, none of these particular aspects of suffering atopic eczema represent any kind of serious medical problem, although if the skin is broken and infections enter the body, the story might be very different.

However, as any eczema sufferer will tell you, the itching that is perhaps the best-known 'symptom' of the condition can drive you crazy. Although of course adult eczema sufferers know better than to keep scratching the patches of eczema, this does not mean that they can resist the urge when the itching becomes extreme.

The problem is far worse for children. It is considerably harder to convince a child to stop scratching, particularly as recent research suggests that there is a scientific basis for believing that scratching an itch does genuinely provide relief.

One other 'symptom' of atopic eczema that is occasionally seen in certain patients is a tendency for children's ears to discharge a mixture of mucus and ear wax or even blood. This will most commonly happen when a child has dry eczema on the surface of or just inside their ears.

This is nothing to be particularly concerned about, nor is it unusual, but if blood is present in the discharge, it may be prudent to seek medical advice so that you can at least establish the cause of the problem.

Finally, as previously suggested, there is strong evidence that atopic eczema is a condition that is exacerbated by a weak immune system. It therefore makes sense to do everything you can to build up the strength of your immune system to help fight against the condition.

Contact dermatitis: This is a form of eczema that is caused by contact with irritants that can trigger an eczema flare-up.

The reactions that you might suffer as a contact dermatitis sufferer can be categorized in one of two ways.

In the first example, irritant contact dermatitis is a condition that comes on extremely quickly after you have been exposed to a chemical substance that immediately irritates the skin.

Approximately 75% of all contact dermatitis cases are irritant contact dermatitis. This is associated with the fact that the condition is one of the most common industrial diseases suffered by employees in many industrialized Western countries. It should be no surprise that those who work in heavy industry such as chemical production, iron smelting and the like often suffer contact dermatitis, even if the individual employee has no past track record or family history of similar problems.

The second type of contact dermatitis is known as allergen contact dermatitis, meaning that the individual concerned suffers a delayed reaction to previous contact with an allergen like poison ivy, pollen etc

These two variations of contact dermatitis are not mutually exclusive. Depending on the strength of an individual's immune system, it is quite possible to contract both forms of contact dermatitis at the same time, and possibly atopic eczema might also be seen.

Xerotic eczema: This is a rare form of eczema that is caused by dry skin (often seasonal) that has become so dry and cracked that the tell-tale lesions of eczema begin to develop. This particular condition tends to develop in older people, with the main areas that are likely to be affected being the limbs and torso.

Less common forms of eczema: In addition to the three most common types of eczema listed above, there are many other less widely known and less common variations of the condition.

These are as follows:

Dyshidrosis: This is a condition that only occurs on the palms, the soles of your feet and the side of your fingers. This particular variation of eczema is characterized by tiny bumps known as vesicules and skin cracks that become more itchy during the night than during the daylight hours.

Although it is not common in comparison to atopic or contact eczema, Dyshidrosis is probably the most common hand eczema, one which worsens when the weather gets warmer.

Discoid eczema: In contrast to Dyshidrosis, Discoid eczema is a condition that gets worse in the winter, identified by round red lesions, usually on the lower leg, which can either be excessively dry or oozing.

Neurodermatitis: This is a condition characterized by itchy lesions of pigmented, thickened eczema which are most commonly caused by continual rubbing and scratching. The cure for this particular form of eczema is straightforward – stop scratching and the condition generally goes away of its own volition!

Venous eczema: Venous eczema usually occurs in people who have impaired circulation. It is a condition often seen in people who are over 50 years old, often appearing as a dark, scaly patch of intensely itchy skin in the ankle area.

While this particular form of eczema is not of itself especially dangerous, the condition can sometimes develop into painful and extremely unpleasant leg ulcers, so if you are in the right age group and find dark, itchy patches of skin around your ankles, you should seek medical attention.

Medical treatments for eczema

Clinical diagnosis of eczema is most commonly based on the appearance of a patient's skin and on their family and personal history. However, because there are many similar conditions to eczema (e.g. psoriasis), your medical practitioner will have to examine your skin lesions in order to rule out alternatives problems.

They may even need to carry out a skin lesion biopsy to establish exactly what you are suffering from, although in most cases this is unlikely to be necessary.

Once your medical practitioner has established that you are indeed suffering from eczema, it is likely that they will recommend various courses of action depending upon the severity of your eczema problem.

Nevertheless, irrespective of what kind of treatment they prescribe for you, the ultimate objectives of the treatment will always be the same:

- To control and reduce itching;
- To reduce skin inflammation;
- To loosen and then remove scaly skin lesions;
- To reduce the outbreak of new lesions; and
- To clear any infection that has already set in.

There are many strategies that your medical practitioner may recommend you should adopt as a way of reducing the severity of your problem, ranging from moisturizing your skin (more of which later), applying topical pharmaceuticals, or in more serious cases, they may even recommend oral medications.

Most commonly, the medications that will be prescribed for treating your eczema are likely to be based on corticosteroids, a type of steroid hormone that is naturally produced in the adrenal cortex.

As a first option, most medical practitioners will recommend a topical cream or ointment that is based on corticosteroids as a first-line treatment for eczema. Many such corticosteroid creams can be bought across the counter without a prescription in Western countries, which suggests (quite correctly) that the creams that you buy are not especially strong.

They are unlikely to have any particularly adverse side-effects either, but their effectiveness may be fairly limited.

If your condition continues to deteriorate or does not improve, your doctor may prescribe you a corticosteroid cream or lotion, meaning that this particular topical treatment is likely to be considerably stronger than those that you buy across the counter.

It is widely accepted within the medical community that long-term usage of corticosteroids can **have adverse side-effects**, such as irreversible skin thinning. Consequently, if your doctor prescribes topical corticosteroid based lotions or creams, it is likely that they will recommend that you only use them for a short period of time.

The third corticosteroid-based option is for your medical practitioner to recommend oral corticosteroid drugs such as prednisone or prednisolone. While the potential adverse side effects of taking these drugs will depend upon the strength of the drug you are taking and the period of time you have to take it for, there are widely recognized adverse side-effects of long-term use of drugs like these.

Other pharmaceuticals that might be prescribed by your doctor would be antibiotics in a situation where by scratching the eczema affected areas of your skin you have caused an infection.

When you suffer severe itching as a result of your eczema, you might want to use antihistamines to reduce the severity, with antihistamine-based products being available both across the counter and by prescription.

However, if you are going to use antihistamines, be aware that one of the effects of taking this particular class of drug is that they cause drowsiness. Hence, it is best to take them at night before retiring to ensure that you get a good night's sleep. Never be tempted to take them if you are driving, or operating machinery as part of your job.

Finally, a few years ago, the FDA approved two new drugs that belong to the class known as calcineurin inhibitors, drugs that suppress the activity of your immune system as a way of reducing the worst effects of conditions like eczema. While your medical practitioner might be able to recommend many chemical-based pharmaceutical treatments for eczema, you would not necessarily want to use any of these particular methods of treatment given the potential adverse side-effects that are inherent in using chemical-based pharmaceuticals.

Because the majority of eczema sufferers have an intermittent problem that is not especially serious apart from the highly irritating itching, even medical practitioners are often happy to recommend natural solutions that you can try to get rid of the problem before turning to pharmaceuticals.

Let us consider some of these natural options next.

Natural ways of dealing with eczema

Moisture is the key

If you are an eczema sufferer who does not have a particularly serious condition, it is possible that you can minimize the effects of eczema to an acceptable level with some practical home-based 'treatments'.

As an example, once you have established what it is that causes you to suffer flare-ups (e.g. exposure to pollen or food allergies), the answer is to avoid putting yourself in a position of risk. Once you know that it is eggs or milk or nuts that cause your problem, all you have to do is to avoid eating them or try staying inside at the height of spring and summer when the pollen count is at its highest.

Given that eczema is a condition that is characterized by dry skin, it is logical that anything that reduces your dry skin is an effective way of dealing with your problem.

For this reason, you should always bathe for as short a time as possible, while also reducing the amount of soap that you use during the bathing process. It will probably be more effective to use a natural moisturizing oil like tea tree oil in your bath because this will help to keep your skin moist and supple.

Once you get out of the bath, it is essential that you try to retain as much moisture in your skin as possible, applying natural moisturizers such as olive or tea tree oil to all the dry areas of your skin. Try to do this within three minutes of getting out of your bath, because by doing so, you ensure that you are applying moisturizer to skin that is still moist and therefore flexible.

You can further increase the benefits of this particular strategy by wrapping any dry skin areas to which you have applied moisturizer with plastic bags that will prevent your skin drying out for the maximum

length of time.

The primary advantages of using either olive or tea tree oil as a moisturizer is that both of these substances are easy to get hold of.

As with all aspects of dealing with eczema, while these particular moisturizers are highly effective for most people, they may not work for you. Consequently, you might like to consider some alternative moisturizers made from completely natural substances:

Vitamin E oil: Vitamin E oil is famous for its ability to hydrate the skin while promoting healing at the same time. This particular moisturizing oil helps to protect cell membranes while also promoting the body's ability to use vitamin K and selenium. Also, because of its antioxidant qualities, it provides another level of protection for your skin.

Conclusion

There are many methods of treating eczema naturally. The two listed above are two of the better known. Although they can be effective for certain people, they **will not** cure eczema.

There is only one Cure!

Regardless of what the doctors tell you. Regardless if you try something and your eczema goes away for a short time. There is only one cure.

The BeatEczema system is the only cure for eczema that you will find because it is the only system that addresses the root cause and not treat the symptoms.

To get the only eczema cure, visit http://www.beateczema.com now.

Just click the link or enter it into your browsers address bar.

Best of luck. I truly hope you give the beat eczema system a try today.