

Anticipatory Guidance for Your Two-Month Baby

You have survived the dry peeling skin of the newborn, and your baby's acne is finally clearing...There can't be other skin problems! Alas, there are many, though none of them are particularly dangerous or hard to treat. The following is a list of a few "skin problems" you may encounter during the next months.

<u>Cradle Cap</u>, or seborrhea, is a yellow, waxy scale that develops on baby's scalp and eyebrows. Although unsightly, it is perfectly harmless. To lessen the cradle cap, simply brush with a soft brush or fine- toothed comb to remove the scale, then shampoo. Petroleum jelly or baby oil will help soften the scale. Massage the oil into the scalp and allow it to soak into the cradle cap for about ten minutes. Then use a washcloth to rub, or a comb or brush to lift the scale. Lastly, shampoo your baby's hair. A dandruff shampoo used one to two times a week may also help, but it can be quite drying. Sweating can worsen cradle cap so avoid overheating your baby. Strong medications (such as topical steroids) are rarely used given the benign and self-limited course of cradle cap. Cradle cap can persist past the fist year of life (long after your baby is out of the cradle!), but don't fret. It will eventually disappear.

Dry Skin and Eczema: Most babies develop dry skin, especially in the winter months. Some develop eczema. Eczema most commonly involves the face and scalp in infants. It often begins on the cheeks or behind the ears, but the entire body may be affected. Eczematous skin is characterized as itchy, red, dry, and cracked. Many factors exacerbate eczema including dry skin, sweating, scratching, and extremely high or low temperatures. Irritants, such as detergents, chlorine, or rough fabrics, can also worsen eczema.

Eczema is a chronic skin disorder. It will come and go, and must be managed when it flares. Proper bathing is a must. Bathe your baby in lukewarm water to decrease dryness. Do not use perfumed bath soaps. Pat, do not rub, the skin dry after a bath. Non-perfumed lubricants or creams should be applied within three minutes of bathing. If your home is dry, a cool-mist humidifier will provide moisture your baby's skin needs. Steroid creams are sometimes used with exacerbations, but prolonged use of strong steroids can have side effects. Do not use steroids on your baby's skin without consulting your pediatrician.

Diaper Rash: Diaper rash is most often caused by irritation from stool and urine. To minimize a rash, change the diaper frequently, use water to wash rather than perfumed wipes and soaps, and allow time out of the diaper so that the skin may dry. Diaper ointment may help by providing a barrier to moisture. Irritant diaper rashes usually improve in a few days. If there is no improvement, a yeast infection may be present. Yeast infections are characterized by bright red patches, especially in skin creases, and are surrounded by red bumps. The rash is itchy. Fortunately, it is easy to treat with Lotrimin cream, an over-the-counter anti-fungal medication. If your baby's diaper rash does not improve despite these measures, please call your pediatrician.

call time: 8:30-9:00 am www.framinghampediatrics.com