Algorithm for the Management of Diaper Rash

- **Rashes (Diaper area only)**
  - **Diffuse?**
    - Y: **Depth of skin folds clear?**
      - Y: **Consider** Cutaneous candidiasis; Intertrigo
        - **Topical antifungals; topical steroids; antihistamines**
      - N: **Involved**
        - **Consider diaper dermatitis**
        - Keep area dry. Mild topical steroids
    - N: **Satellite lesions**
      - **Consider candidiasis**
      - **Topical antifungals**
Rashes
(Diaper area + elsewhere as well)

Is child ill or growing poorly (e.g., poor suck, fever, etc.)?
Y → Refer to pediatrician
N

Is rash mostly in skin folds (neck, axilla, groin)?
Y → Consider seborrheic dermatitis; candidiasis; intertrigo
N → Consider atopic dermatitis; miliaria; insect bites

Topical steroids; antibiotics; oral antihistamines; hydration, emollients; zinc oxide preparation
## Guidelines for the Diagnosis and Treatment of Common Skin Disorders

### Cutaneous Candidiasis

**Definition:** Cutaneous candidiasis is a superficial infection occurring on moist, cutaneous areas.

**Age:** Any age. Common among infants

**Etiology:** Candida albicans

**Predisposing Factors:** Hyperhidrosis, diabetes, obesity, heat, maceration, polyendocrinopathies, systemic and topical corticosteroids, chronic debilitation

**Sites of Predilection:**
- Body folds: axillae, inframammary, intergluteal areas
- Webspaces: fingers (erosio interdigitalis blastomycetica), toes
- Genitalia

**Clinical Manifestations:** It presents initially as papules or pustules on an erythematous base that becomes confluent creating large eroded areas. Subsequently, fairly sharply demarcated, polycyclic, eroded patches with small pustules and papules at the periphery (“satellite lesions”).

**Management:**
- Keep intertriginous areas dry. Powder with miconazole applied daily.
- Topical use of antifungal preparations (e.g. nystatin, miconazole, terbinafine, ketoconazole, etc.). If area is secondarily infected, you may add antibacterials.

### Diaper Dermatitis

**Definition:** Diaper dermatitis is a form of irritant contact dermatitis caused by irritation with urination, defecation and the use of diapers.

**Age:** Any age. Common among infants

**Predisposing Factors:** Prolonged contact with diapers

**Sites of Predilection:** Inguinal area, intergluteal area, buttocks, medial thighs

**Clinical Manifestations:** It may present with erythema, edema with papular and pustular lesions: erosions, oozing, collarette-like scaling at the margins of lesions involving perigenital and perianal skin, inner aspects of the thighs and buttocks.

**Management:**
- Frequent changing of diapers
- Keep area dry
- Mild topical steroids

### Intertrigo

**Definition:** Intertrigo is a condition brought about by friction and maceration of two opposing surfaces.

**Age:** Any age. Common among infants

**Predisposing Factors:** Obesity hyperhidrosis, heat, moisture

**Sites of Predilection:** Groins, perineal area, intergluteal cleft, medial thighs, neck, axillae, inframammary area.

**Clinical Manifestations:** It presents as erythematous scaly patches that become eroded and confluent and may be associated with itching and burning sensations.

**Management:**
- Mild, topical steroids
- Symptomatic relief of pruritus (e.g. antihistamines)

### Seborrheic Dermatitis

**Definition:** Seborrheic dermatitis is a chronic dermatosis characterized by redness and scaling in regions where sebaceous glands are most active.

**Age:** Infancy (within the first months and may be present at birth)
- Puberty
- Majority between 20-50 years old

**Etiology:** Pityrosporum ovale

**Sites of Predilection:** Scalp, face, neck, body folds, genitalia

**Clinical Manifestations:** It presents as yellowish and, often greasy or white dry scaly macules and papules of varying sizes. Sticky crusts and fissures are common and lesions may be weeping. Pruritus is variable.

**Management:**
- For weeping lesions:
  - Wet compresses
  - Topical steroids: Mid-potent for scalp lesions (e.g. betamethasone propionate, fluorinated steroids, etc.).
  - Mild for face and intertriginous areas (e.g. hydrocortisone, mometasone furoate, etc.).
- Topical antifungals
- Antibacterials if infected
- Oral antihistamines for pruritus
• For dry lesions:
  • Mineral oil for scalp lesions to soften the scales
  • Topical steroids
  • Topical antifungals

ATOPIC DERMATITIS

Definition: Atopic dermatitis is an acute, subacute, but usually chronic pruritic condition often occurring in association with a personal or family history of hay fever, asthma, allergic rhinitis or atopic dermatitis.

Age: Onset is at 2 months of age for infantile atopic dermatitis and by the first year in 60% of the patients.

Hereditary Predisposition: Over 2/3 of patients have a personal or family history of allergic rhinitis, hay fever, asthma.

Sites of Predilection: Usually face (cheeks) but may also involve the eyelids, neck, forehead, flexures or intertriginous areas.

Clinical Manifestations: It presents as erythematous patches, papules or plaques with or without scaling. There may be erosions and excoriations as a result of scratching and sites may be secondarily infected. For chronic cases, lichenification (thickening of the skin with accentuation of skin markings) that results from repeated rubbing or scratching. There may be painful fissures as well.

Management:
• acute
  • Wet dressings and topical steroids; topical antibiotics when indicated
  • Oral antihistamines for pruritus
  • Oral antibiotics
• Subacute and Chronic
  • Oral antihistamines are useful in reducing itching
  • Hydration (oilted baths or baths with oatmeal powder) followed by application of unscented emollients (e.g. hydrated petrolatum) is a basic daily treatment needed to prevent xerosis or dryness.
  • Topical anti-inflammatory agents such as corticosteroids are the mainstays of treatment.
  • Oral or topical antibiotics if infected.

MILIARIA (Bungang-Araw)

Definition: Miliaria is a condition that results when the free flow of eccrine sweat to the skin is obstructed and sweat is retained within the area.

Age: Any age. Common among infants

Predisposing Factors: Hot humid environment

Sites of Predilection: Neck, trunk, back

Clinical Manifestations: It usually presents as pruritic erythematos papules that may coalesce.

Management:
• Advise to stay in a cool environment
• Zinc oxide (Calamine lotion, Desitin)
• Symptomatic relief of pruritus

INSECT BITES (Prurigo Simplex)

Definition: Prurigo simplex is a reaction occurring at the bite site hours to days after the bite.

Age: Any age:

Sites of Predilection: Exposed areas (arms and legs)

Etiology: Mosquitoes

Clinical Manifestations: It is characterized by an intensely pruritic eruption and may manifest as grouped urticarial papules, papulovesicles, and/or bullae with areas of excoriations. The lesions may also be secondarily infected.

Management:
• Protective clothing
• Potent topical steroids (e.g. clobetasone propionate, betamethasone dipropionate, etc.)
• Antimicrobial agents if secondary infection is present
• Control of pruritus
### Drugs Mentioned in the Treatment Guideline

This index lists drugs/drug classifications mentioned in the treatment guideline. Prescribing Information of these drugs can be found in the Philippine Pharmaceutical Directory (PPD) 7th edition. Opposite the brand name is its page number in the PPD 7th edition.

#### Antibacterials
- **BNP Ointment** 149
- **Trimycin** 149

#### Antihistamines
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- **Astemizole** Hismanal 26
- **Azelaic Acid (HCl)** Azep 25, 204
- **Cetirizine** Virlix 28, Zyrtec 28, 206

#### Chlorphenamine
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- **Betneton** 28
- **Chlor-Trimeton** 25
- **Clormetamine** 25
- **Coistan** 25
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#### Chlorphenoxyazine HCl
- **System** 27
- **Clemastine hydrogen fumarate** Tavegyl 27, Tavist 27

#### Diphenhydramine
- **Alertuss** 25
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#### Hydroxyzine diHCl
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#### Loratadine
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- **Fabhistin** 26

#### Mequitazine
- **Primalan** 27

#### Promethazine HCl
- **Phenergan** 27, 132, 140

#### Antifungals
- **Amorolfine HCl** Locetar 150
- **Bifonazole** Mycospor 150
- **Clotrimazole** Baycuten N

#### Antibacterial, Antiinflammatory
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#### Antiinflammatory
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#### Topical Corticosteroids
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#### Fluocinolone
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#### Triamcinolone acetonide
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#### Mometasone furoate 0.1%
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### Additional Drugs

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- **Sicorten Plus** 160
- **Hydrocortisone**
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