

Information about your emollient



What are emollients?

Emollient is the medical word for a moisturiser.

Emollients trap moisture in the skin and form a protective oily layer on the outer skin which helps skin repair and improves skin hydration. Emollients replace natural oils that help keep water in the skin to prevent it becoming dry, cracked, rough, scaly and itchy. Their use can prevent conditions like eczema 'flaring up'.

Why use emollients?

Applying emollients regularly can be time consuming but is worthwhile as it can prevent eczema and other dry skin conditions from flaring up. It may mean that other treatments that could cause side effects e.g. steroid creams may not be needed as much or even at all. It can be continued after skin condition has cleared.

What precautions should I take with emollients?

Paraffin-based emollients are flammable so take care near any open flames or potential causes of ignition, such as cigarettes. Ointments and creams used in the bath and shower can make the surface slippery so take extra care. If you find an emollient is making your skin sore and/or very itchy, you may be allergic to one of the ingredients and you should discuss this with your doctor, pharmacist or nurse. If you are having ultraviolet light treatment or radiotherapy, ask for specific guidance on emollient use as instructions may differ slightly.

How much leave-on emollient should I apply?

The quantity of leave-on emollient required will vary depending on the size of the person, the severity of the skin condition, and whether the emollient is also being used as a soap substitute. As a general guide, if you needed to treat the whole body, the recommended quantities used are 600 g per week for an adult, and 250-500g per week for a child.

Are there any possible side-effects from emollients?

Emollients used for skin conditions tend to be bland and non-perfumed. However, some creams contain preservatives, fragrances and other additives. Occasionally, some people become sensitised (allergic) to an ingredient. If you suspect that you are sensitive to an emollient then speak to your doctor, nurse or pharmacist for advice.

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They provide greater moisturising than bath emollients that don't have enough contact with the skin. When drying do not rub with a towel but pat the skin dry to avoid damage to the skin.

Lifestyle

Light moisturiser during day and greasy one at night. Greasier the emollient, more effective at retaining hydration. You may wish to use different types of emollients at different times of the day, on different areas of the body or when severity of your condition varies. For example, use a cream in the morning if dressing to go to work or school and an ointment in the evening when wearing pyjamas.

Most emollients (except white soft paraffin alone) can be used as a soap substitute as well.

Skin irritation

People may react to a variety of irritants which may cause contact dermatitis, but there are many known ingredients that are **not recommended** for sensitive skin such as sodium lauryl sulphate, wool fat, lanolin, perfumes. Triggers should be identified and exposure minimised. Olive oil has the potential to promote the development of and exacerbate existing, atopic dermatitis as it can damage the skin barrier.

Using emollients and topical steroids together

Topical steroids are very different to emollients, and should be used and applied in a different way. When using the two treatments, apply the emollient first. Wait 20- 30 minutes after applying an emollient before applying a topical corticosteroid. That is, the emollient should be allowed to absorb before a topical steroid is applied (the skin should be moist or slightly tacky, but not slippery, when applying the steroid).

How often to use?

Apply emollients whenever the skin feels dry and as often as you need. This may be two to four times a day or more. You may apply more frequently in adverse weather conditions. Your doctor or nurse will be able to advise you on quantities to use per week which depends on how extensive and severe your condition is.

Types of emollients

There are many types and brands of emollients ranging from runny lotions to thick ointments.

The difference between lotions, creams and ointments is the proportion of lipid (oil) to water. The lipid content is lowest in lotions, intermediate in creams, and highest in ointments. The higher the lipid content, the greasier and stickier it feels, and the shinier it looks on the skin. As a general rule, the higher the lipid content (the more greasy and thick the emollient), the better and longer it works. You may need to try more than one emollient before you find one that suits.

Lotions: more water, spreads easily, absorbs quickly, can be cooling, and is good for very mild dry skin. These contain the least oil and most water so are the least effective in moisturising the skin. They normally contain preservatives so may cause skin irritation. Lotions are useful for hairy areas such as scalps and areas of weepy skin.

Creams: mixture of water and fat, well absorbed, less greasy, more cosmetically acceptable. These contain a mixture of oil and water and are less greasy, and therefore easier to spread on the skin than ointments. They should be used often and applied liberally to prevent the skin from drying out. Creams usually come in a container with a pump dispenser and are good for day-time application.

Ointments: oily preparation, more greasy and occlusive, usually preservative-free, more inert, less likely to irritate skin than creams/lotions, useful in very dry/thickened skin, and not appropriate for weeping areas. They are usually made of white soft paraffin or liquid paraffin, and are ideal for very dry or thickened skin and night-time application. They do not usually contain preservatives and are therefore less likely to cause skin reactions.

Soap substitutes: any emollient (except white soft paraffin) can be used with water to cleanse the skin, as they do not remove natural oils in the skin. Soap is very drying for the skin and should be avoided in people with dry skin conditions. Leave-on-emollient: these emollients are applied directly onto the skin and left on to soak in. they are not washed off the skin (as with soap substitutes). It keeps the skin well hydrated and supple.

Bath additives/emollients: (added to bath water) Cleans skin by removing scales, crusts, and dirt. Hydrates skins to make it more receptive to other treatments. A tablespoon of any emollient (except white soft paraffin) can be dissolved in some hot water and added to the bath water.

Urea containing emollients: well suited to the care of large areas of the skin, over long periods, patients with atopic eczema. It is recommended that such emollients are used once or twice a day as an add-on therapy to their regular emollient regimen as they can cause stinging.

Which emollient is best?

There is no 'best emollient'. The type (or types) to use depends on the dryness of the skin, the area of skin involved, and what is comfortable

and acceptable to you.

If you only have mild skin dryness and flare-ups do not happen often, then a lotion or cream may be best. If you have moderate-to-severe dryness then a thicker cream or an ointment is ideal. For areas of weeping eczema a cream or lotion is usually best as ointments will tend to be very messy.

How to apply emollients?

Step 1: Wash your hands

Step 2: Do not put fingers into tubs to scoop out the ointment as you may introduce bacteria into the ointment. To reduce the risk of infection, transfer some emollient onto a clean plate using a clean desert spoon. If you have a cream in a tub with a pump top, you can pump directly onto your hand.

Step 3: Emollients should be applied to the skin in a downward direction of hair growth and left in a thin layer to soak in – this may take 10 minutes. Please do not rub emollients in.

Shorter, smooth nails help to reduce likelihood of trauma to the skin. Topical products (e.g. steroid cream) should be applied to well-moisturised skin, can be applied at different times of the day. Applying an emollient on top of a topical steroid results in dilution and spread to areas of the body where it is not needed.

Bathing and washing

Bathe regularly in tepid water only, this cleans and helps prevent infection by removing scales, crusts, dried blood and dirt. Use an emollient as a soap substitute (most emollients can be used in this way) and should be applied prior to washing and directly afterwards onto damp skin.