

What are the symptoms of eczema?

Eczema is a very common skin condition. Although the term eczema is used to describe a few different conditions, when people say eczema they usually mean the condition called atopic dermatitis or atopic eczema. In eczema, the skin becomes dry and more vulnerable to inflammation and infection. People with eczema are also likely to have asthma and hay fever. All three of these are called atopic conditions. In atopic conditions, the immune system response is activated by otherwise-harmless things - such as allergens. Eczema is not contagious. It can't be passed from person to person.

Summary

Eczema is a long-lasting (chronic) condition. It's especially common in children. Like many chronic conditions, it tends to go through a pattern of flaring up for a few days or weeks, and then getting a bit better in between flares.

Symptoms of eczema include:

- Itchy patches of dry skin.
- Irritated skin. Areas of eczema can become inflamed - especially if scratched - causing:
 - The skin to become even more itchy and uncomfortable.
 - The skin to change colour. On lighter skin tones, the skin becomes pink or red. On darker skin tones, it can turn pink, red, purple or darker brown - or it might be difficult to see any skin colour change at all.
- Thickening of the skin (lichenification) with long-standing patches of eczema.

Eczema can affect anywhere on the body, but it's most likely to be found on the hands, the inside of the elbows, and the back of the knees. In children, it's also common to get eczema on the face.

Some people get only a few patches of mild eczema. Other people have more widespread eczema affecting most of the body.

Eczema can become infected. Symptoms of infected eczema include:

- Eczema symptoms that have suddenly got worse.
- Painful areas of eczema.
- Fluid oozing or weeping from areas of eczema.
- Golden or yellow crusts over areas of eczema.
- Yellow or white blisters in areas of eczema.
- Other symptoms of infection, like [fevers](#), [shivers](#), or otherwise feeling very unwell.

In this series of articles centred around eczema you can read about eczema symptoms, [eczema treatment](#), and [eczema causes](#) - all written by one of our expert GPs.

The rest of this feature will take an in-depth look at the symptoms of eczema, as, at Patient, we know our readers sometimes want to have a deep dive into certain topics.

Symptoms of eczema

The main symptoms of eczema are dry and itchy patches of skin. Scratching those itchy areas leads to the itch-scratch cycle - scratching damages the skin, causing inflammation in the skin, this then makes the skin even more itchy, triggering more scratching, and more inflammation.

Inflammation (active eczema) can lead to other skin changes:

- The skin often becomes red or pink (in lighter skin tones), or red, pink, dark brown or purple (in darker skin tones). Sometimes, in people with darker skin, it can be difficult to see the colour changes.

- Scratching can cause marks on the skin (excoriations) – which can bleed and scab over.
- Skin can become cracked and sore.
- Skin that's been repeatedly scratched over a long time can become thickened and leathery (lichenification).
- After the inflammation from eczema has settled, the skin can sometimes look darker or lighter than the surrounding skin. This is more common in people with darker skin tones. The medical term for this is post-inflammatory hypopigmentation (if the skin becomes lighter) or post-inflammatory hyperpigmentation (if the skin becomes darker).

Itchy skin from eczema can be a distressing symptom – for example, it can make it difficult to sleep at night. Eczema can also lead to other problems in daily life, and the burden of living with eczema – especially if it's been difficult to keep under control – can affect people's mental health too.

Eczema often goes through a cycle of flaring up and then getting a bit better. Identifying eczema triggers, such as soaps, detergents and other harsh chemicals, can be important to help prevent eczema flares – see [eczema causes](#) for more detail.

Eczema can sometimes become infected. It's most likely to be infected by a bacteria – usually one called *Staphylococcus* – but can also get infected by herpes virus, causing a condition called [eczema herpeticum](#). Infected eczema needs to be treated quickly, as it can potentially become serious – especially eczema herpeticum. Symptoms of infected eczema include:

- An area of eczema that has suddenly got a lot worse.
- Areas of eczema that are very painful.
- Fluid oozing or weeping from areas of eczema.
- A yellow or golden crust over areas of eczema – suggests an infection with the bacteria *Staphylococcus aureus*.
- Blisters filled with yellow or white fluid in areas of eczema – suggests herpes virus infection ([eczema herpeticum](#)).

- Other symptoms of an infection, such as [fevers](#), feeling [shivery](#) or [shaky](#), or feeling otherwise generally unwell.

What does an eczema rash look like?

Eczema varies quite a bit depending on skin tone, where it is in the body, and whether it's active (inflamed) or not. There are also a few rarer types of eczema which look a bit different. Generally, eczema can look:

- Dry - it's often easier to feel this than see it.
- Flaky, sometimes with scaly skin - if the skin is really dry, dead skin can peel, flake, or form scales. Typically, though, very scaly skin suggests other skin conditions, such as [psoriasis](#).
- Red, pink, purple, or darker brown if inflamed - depending on skin tone.
- Thickened (lichenified) - it feels thicker and the normal skin markings are more obvious.
- Scratch marks can often be seen if someone has been scratching at it.

The following photos show some typical examples of eczema.



This shows eczema in a typical location - the inside of the elbow. The skin is slightly red and there are a few scratch marks where the skin has been broken and scabbed over. The skin is thickened - shown by the prominent skin markings - suggesting that this eczema has been there for a while and been repeatedly scratched. The skin would probably feel dry if touched.



This shows more extensive eczema. Again, it's in a typical location - the back of the knees. The skin is pink - it's hard to tell if that's a normal skin tone for this person or if the eczema is affecting all of the leg. There are scratch marks and scabs where the skin has been broken. The skin is thickened. There are flaky bits of skin visible. It's likely that the skin is very dry.

There are other types of eczema, which look a bit different and can be difficult to diagnose. They include:

- **Discoid eczema.** This causes round-shaped patches of thickened skin that is usually very itchy. Sometimes, it can weep fluid and have a golden crust over it. It can be difficult to tell this apart from a [fungal skin infection](#), or a bacterial skin infection such as [impetigo](#).
- Venous eczema - also called stasis eczema or venous stasis dermatitis. This causes warm, red, itchy, and often swollen legs. It's mostly seen in older people. It's often mistaken for infection ([cellulitis](#)) of both legs - however, cellulitis of both legs at the same time is very rare.
- **Dyshydrotic eczema (pompholyx).** This looks like tiny fluid-filled blisters on the hands and feet. They are very, very itchy.

- Asteatotic eczema (eczema craquelé). This causes dry skin which looks scaly. The skin looks cracked – hence the French term craquelé. It's been described as looking like crazy paving, cracked porcelain, or a dried-up riverbed. It usually affects older people.

Where do eczema symptoms appear on the body?

Eczema can affect anywhere in the body. It's most likely to affect the hands, the insides of the elbows, and the back of the knees. In young children, it's more likely to affect the face and scalp as well – though this can also happen in adults.

Does eczema hurt?

Most doctors would say no. We typically use words such as itching or discomfort to describe eczema symptoms, rather than pain.

However, people with eczema do experience pain, but this has only recently been researched and is starting to be recognised. Several, relatively small, studies have reported that a large proportion of people with eczema experience pain from eczema, with the pain often described as burning or stinging. There are some suggestions that people with eczema might experience nerve-related (neuropathic) pain. This is still an area that is being researched.

Severely painful eczema is unusual, though. It might suggest infected eczema, or, alternatively, a different condition entirely, [such as shingles](#).

When to see a doctor for eczema symptoms

Very mild symptoms of eczema can be treated with over-the-counter treatments from a pharmacy – moisturisers and mild topical steroid creams. For anything else, it's best to see a doctor to confirm the diagnosis, and consider whether prescription-only treatments are needed.

You should speak to a doctor urgently if you or your child has eczema and symptoms of infected eczema, which include:

- Eczema symptoms that have suddenly got worse.

- Painful areas of eczema.
- Fluid oozing or weeping from areas of eczema.
- Golden or yellow crusts over areas of eczema.
- Yellow or white blisters in areas of eczema.
- Other symptoms of infection, like [fevers](#), [shivers](#), or otherwise feeling very unwell.

How is eczema diagnosed?

Eczema can be diagnosed based on the symptoms and what the skin looks and feels like. It's usually easy to diagnose for any doctor who sees skin problems regularly - such as a GP, a paediatrician, or a dermatologist.

Some types of eczema - such as discoid eczema, pompholyx and venous eczema - can be trickier to diagnose, because they are rarer, and can sometimes look very similar to other conditions. It's not unusual for those types to be diagnosed after initial treatment for something else hasn't worked.

If it's thought that eczema has become infected, sometimes doctors may take a swab to try to detect which bacteria or virus is causing the infection.

GPs might seek input from a dermatologist if the diagnosis isn't clear, or if eczema treatments aren't working to control the condition.

Rarely, a skin [biopsy](#) might be suggested. This is only if it's still unclear as to what the diagnosis is. For example, if there are features of a different skin condition and it's proving impossible to tell it apart from eczema on clinical examination alone.

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