

## DERMATITIS/CRADLE CAP

### I. DEFINITION:

A relatively common oily, scaling skin eruption affecting areas with large numbers of sebaceous glands. A common, chronic, inflammatory skin disorder with a characteristic pattern for different age groups.

### II. CLINICAL FEATURES:

- A. In children, two age groups are affected: infants and adolescents
- B. Mild scalp skin inflammation presents as fine, dry, white or yellow greasy scale, on an inflamed base
- C. More severe eruptions appear as dull, red plaques with thick, white or yellow scale in a diffuse distribution, occurring in common areas:
  - 1. Infants: Scalp (cradle cap), scalp margins, and forehead.
  - 2. Adolescents: Scalp, scalp margins, eyebrows, base of lashes, paranasal, nasolabial folds, external ear canals, posterior auricular fold, presternal areas, upper back and groin.
- D. Pruritis is usually not prominent, but may have mild itching.

### III. MANAGEMENT PLAN:

#### A. General

- 1. **MILD TO MODERATE CASES:** Remove heavy scales and crusts with warm water and baby shampoo. Apply shampoo to affected area and leave on 5-10 minutes before rinsing. Comb hair with fine-tooth comb, soft baby brush or soft toothbrush, after each treatment. Shampoo every other day until scales are gone, then twice a week.
- 2. **MODERATE TO SEVERE CASES:** Use any non-prescription dandruff shampoo containing selenium sulfide (i.e., Selsun Blue) or zinc pyrithione (ie. Head and Shoulders) every day or two. After the scales resolve, regular shampoo may be used with intermittent use of dandruff shampoo. The frequency will vary depending upon the child. If redness or irritation of the scalp are apparent, discontinue shampoo. Caution parents to keep shampoo out of the eyes.

#### B. Prevention

- 1. Instruct parents to wash infant's scalp with mild soap and water.
- 2. Reassure parents that vigorous rubbing to remove scales on infant's scalp will not injure the infant. Avoid scratching scales with fingernails, as this may lead to secondary infection.
- 3. Do not use oil or vaseline except when removing scales. Wash off with baby shampoo and water afterward. (Oil left on the hair worsens cradle cap.)

C. Referral

1. No response to treatment after 1 month or if continues to increase in severity at the end of the first week.
2. Refer severe cases of cradle cap to APRN or physician.

REFERENCES:

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