

# ECZEMA HERPETICUM

## WHAT ARE THE AIMS OF THIS LEAFLET?

This leaflet has been written to help you understand more about eczema herpeticum. It tells you what it is, what the cause is, the treatment, and where you can find out more information about it.

## WHAT IS ECZEMA HERPETICUM?

Eczema herpeticum is a potentially serious viral infection which can spread to affect large areas of the skin. It most commonly affects people with **atopic eczema** but may also affect those with other inflammatory skin conditions, such as **seborrheic dermatitis** and **psoriasis**.

## WHAT CAUSES ECZEMA HERPETICUM?

Eczema herpeticum is most commonly caused by **herpes simplex virus**, the virus that causes cold sores.

This condition usually affects people who already have a skin condition called atopic eczema. Sometimes, it starts with a cold sore and then spreads to the face and other parts of the body, but it can also happen without a previous cold sore.

People who have had eczema since childhood or those with severe **eczema** are more likely to develop eczema herpeticum. It can also be triggered by injuries or certain cosmetic procedures such as lasers or skin peels.

## IS ECZEMA HERPETICUM HEREDITARY?

No.

## WHAT DOES ECZEMA HERPETICUM LOOK AND FEEL LIKE?

Eczema herpeticum generally starts with groups of small blisters. In the beginning,

these blisters may be filled with a clear fluid. They can occur on normal skin or in areas affected by **eczema** or other skin conditions where the skin is inflamed. They can cause a tingling or painful sensation. More blisters can develop over a period of 7 to 10 days and may spread, sometimes covering large areas of the face and body. After 1 to 2 weeks, the blisters may break down and become dry, looking like little pits. If the fluid inside the blisters starts to look cloudy (like a pus), this could mean there is an additional bacterial infection to the herpes virus infection. This is known as a secondary bacterial infection. The blisters often completely heal by 2 to 6 weeks, rarely resulting in scarring.

Eczema herpeticum mainly affects eczema on the head and neck. However, it is possible to affect any part of the skin and other common areas affected by eczema, such as the flexural areas (skin creases).

A more severe infection may occur in individuals who have a weakened immune system.

Eczema herpeticum produces a painful and sometimes itchy skin eruption. It may be associated with other symptoms, including:

- a high temperature with shivering
- swollen lymph glands
- headache
- feeling tired (malaise)
- sore or gritty eyes if eye involvement occurs.

Eczema herpeticum can affect individuals of any age. It can also affect pregnant

women, in whom the condition may be more serious. If you are pregnant and become infected with the **herpes simplex virus**, it is advised that you seek urgent medical attention. Often treatment with an anti-viral medication called aciclovir may be offered which is not known to be harmful when taken in pregnancy.

### HOW WILL ECZEMA HERPETICUM BE DIAGNOSED?

Eczema herpeticum is usually diagnosed based on how it looks (its clinical appearance). Sometimes, the diagnosis may be difficult to make based on clinical appearance alone, especially if there is an additional bacterial infection or a concurrent severe flare of the eczema or other pre-existing skin condition.

A viral and bacterial swab from one of the blisters may be taken to confirm the infection.

### CAN ECZEMA HERPETICUM BE CURED?

Yes – with antiviral treatment. However, the infection can reoccur (come back) in some people.

### HOW IS ECZEMA HERPETICUM TREATED?

It is important to get early treatment for eczema herpeticum from a doctor. They will usually prescribe an antiviral medication in the form of tablets or syrup. Some people who have severe eczema herpeticum, are very unwell or in individuals where the infection is spreading quickly or affecting the eyes, hospital admission may be needed for antiviral treatment through a vein.

Whilst taking antiviral medication it is likely that you will be advised to continue with your normal regular eczema treatments. If there is secondary bacterial infection of the skin, topical or oral antibiotics may be given.

### WHAT CAN I DO?

- Inform your doctor if you have any of the above mentioned symptoms including discomfort of your eyes. You may need to be referred to an eye specialist (ophthalmologist) if there is a possibility of eye involvement. It is important to let your doctor know about any eye-related concerns.
- **If your condition is getting worse quickly, seek urgent help with the out of hours team or A&E.**
- The herpes virus is contagious to certain individuals who are more susceptible to it. To help prevent the virus from spreading to these susceptible individuals, if you have active eczema herpeticum it is best to avoid contact with:
  - newborn babies and young children
  - people who have weakened immune systems
  - people who have not had chicken pox before
  - people with atopic eczema.
- People who have experienced eczema herpeticum should avoid close contact with relatives or friends with active cold sores.

### WHERE CAN I GET MORE INFORMATION ABOUT ECZEMA HERPETICUM?

*Other information sources:*

[www.herpes.org.uk](http://www.herpes.org.uk)

[www.dermnetnz.org/viral/eczema-herpeticum.html](http://www.dermnetnz.org/viral/eczema-herpeticum.html) (includes photographs)

The British Association of Dermatologists has a separate patient information leaflet on [herpes simplex](http://herpes.simplex).



This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.

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*This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel*

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**BRITISH ASSOCIATION OF  
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