

North Carolina Dermatology Associates, PLLC
7920 ACC Blvd., Suite 100
Raleigh, NC 27617
Ph# 919-596-9600

Seborrheic Dermatitis

Seborrheic Dermatitis is a common skin condition affecting millions of Americans. It shows up as flaking skin, or reddish patches. Unlike people with dry skin, the skin in people with seborrheic dermatitis is usually oily. It can be unsightly, itchy and, since it is often on the face, may cause embarrassment. It is not contagious. Scales form on reddened skin.

In adults seborrheic dermatitis usually affects the scalp, eyebrows, ear canals, sides of the nose, and behind the ears. It sometimes affects the armpits, chest, and the groin area. Most people with it complain of dandruff, especially on the back and sides of the scalp (bad dandruff is usually seborrheic dermatitis).

Stress, fatigue, weather extremes, oily skin and infrequent shampooing or skin cleaning make it worse. Several other medical conditions can be associated with seborrheic dermatitis. These are thought to make the normal skin care that prevents seborrheic dermatitis harder to keep up with. The vast majority of people with seborrheic dermatitis have no associated conditions.

Seborrheic dermatitis may start in infancy as cradle cap. It affects the scalp as thick, crusty, yellow scales. Children usually outgrow by age 3. Cradle cap is not contagious, it is not caused by poor hygiene, it is not an allergy, and is not dangerous. Cradle cap usually does not itch, but it may. If excessive scratching occurs, it can cause additional inflammation, mild infections or bleeding.

The problem in seborrheic dermatitis is in the oil (sebaceous) glands and hair follicles. People with seborrheic dermatitis produce too much sebum (the natural skin oil). Later, pityrosporum yeast grows excessively in the sebum, sometimes along with bacteria, making the dermatitis more persistent.

Seborrheic dermatitis and psoriasis can be difficult to tell apart. Psoriasis tends to have a whiter scale, and affected areas will bleed fairly easily if they are plucked or picked or scratched. Plaques or patches of psoriasis also tend to be thicker and more persistent. Although both can produce dandruff, psoriasis is less common and more severe. A few people have both conditions, however, which can make diagnosis difficult.

A person may need to try several shampoos to find the one that works the best, and then rotate between several medicated and non-medicated shampoos to maintain effectiveness. It is important to massage the shampoo onto the scalp and other affected areas and leave it in place for five minutes before rinsing thoroughly.

Some Over The Counter shampoos include Neutrogena T-Sal or T-Gel, Sebulex, Selsun Blue, Denorex, or Nizoral. An OTC hydrocortisone can be used for 5-7 days as well. Hydrocortisone is not meant to be used daily on the face and can cause thinning of the skin, acne, and broken blood vessels if used daily. Finally your physician may recommend a prescription cream or shampoo.