

Nappy rash

Overview

There would be very few babies in nappies that didn't have nappy rash at least once.

It commonly appears with a red, scaly rash involving skin in contact with the nappy.

It is usually mild but it can become severe with pimples, blisters and sores.

If your baby's nappy rash becomes infected, it may become bright red and swollen.

Small red patches or pimples can also spread beyond the nappy area.

Some common causes

Most cases are caused by skin irritation from nappies:

- Rubbing against a baby's soft skin.
- Fitting too tightly.
- Being on too long when they are wet and/or soiled.

Chemicals in some **baby wipes** and **laundry soaps** can also cause irritation.

Prevention

To prevent and treat nappy rash, there are a number of steps you can take.

These include:

- Cleaning your baby's bottom with warm water and a face washer (which you can keep in a plastic snap-lock bag if your out and about) instead of baby wipes.
- Using barrier creams, such as zinc cream to protect your baby's skin.
- Allowing your baby's bottom to dry completely after a clean before putting on a new nappy.

Cause

In most cases nappy rash is caused by skin irritation, where substances, yeast or bacteria are trapped against the baby's skin by the nappy.

Some of the known triggers include:

- Prolonged skin contact with a wet or soiled nappy, particularly if you are using cloth nappies.
- Friction from nappies that are either too tight or rub against a baby's soft skin.
- Some brands of disposable nappies that contain dyes or glues that can rarely cause allergies.
- Baby wipes, particularly perfumed ones.
- Plastic pants that fit over nappies - these can raise the temperature and moisture in the skin around the nappy area. Heat and moisture make it easier for nappy rash to start and for germs to grow.
- Paper liners used with cloth nappies.
- Your baby being on antibiotics - or if the mother is on antibiotics while breastfeeding.
- Diarrhoea from any cause.

Symptoms

Some signs that indicate your baby has nappy rash include:

- A rash: There will be a rash in the area where a

baby's skin touches his or her nappy.

- **Redness:** This will often begin with faint, raised pink spots which seem to get larger and soon cover the nappy area if left untreated.
- **Inflammation:** The rash will appear inflamed because urine and faeces contains irritating substances that can penetrate broken skin.
- **Blistering:** In bad cases, the skin may blister, look raw and begin to peel.
- **Irritability:** Babies can become irritable and unsettled, especially if the rash is raw because their skin will be sore and tender. Babies may be fretful and fussy, and cry, especially after urinating or moving the bowels.

Treatment

There are a number of steps you can take at home to treat - and prevent - nappy rash including:

- Carefully clean your baby's bottom between nappy changes using cotton wool or a soft face washer and warm (not hot) water.
- Allow your baby's skin to dry completely before putting on a new nappy.
- Use a good quality disposable nappy, as these allow moisture to be absorbed quickly, keeping your baby's skin dry.
- Change your baby's nappy frequently (about 5-7 times a day in babies under 12 months) and immediately if it is soiled with faeces.
- Avoid baby wipes that are scented or contain alcohol.
- Avoid using plastic pants or nappies with plastic edges.
- Thickly apply a barrier cream each time you change your baby's nappy to prevent moisture and irritants from reaching the skin. Zinc cream or plain white soft paraffin (Vaseline) is the best.

These products can be purchased from your local chemist or may be prescribed by your doctor.

Avoid so called "natural products" as they may contain colourings, perfumes and plant products that have the potential to cause an allergic reaction.

When using creams, a mixture you can make yourself is putting 10% of olive oil in zinc paste, according to The Royal Children's Hospital Melbourne.

If the rash persists for more than a few days, see your doctor.

A medicated cream may be required, such as an antifungal (for example Canesten, Daktarin, Nysatin) or hydrocortisone (for example Sigmacort 1%), or there could be another skin condition affecting your baby that requires a different treatment regime.

Medicines

A medicated cream may be required for nappy rash, such as an antifungal (for example Canesten, Daktarin, Nysatin) or hydrocortisone (for example Sigmacort 1%).

Lifestyle and diet

Some steps to help preventing nappy rash involve:

- Changing nappies regularly.
- Cleaning your baby's bottom with warm water and a flannel or washer, rather than scented wipes.
- Allowing your baby's skin to dry before putting the next nappy on.
- Using good quality and absorbant nappies.
- Using a thick layer of barrier cream on your baby's bottom.

Support & online resources

Support and online resources for nappy rash include:

- The Royal Children's Hospital Melbourne: www.rch.org.au/kidsinfo/factsheets.cfm?doc_id=5172
- The Children's Hospital at Westmead: www.chw.health.nsw.gov.au/parents/factsheets/nappyraj.htm

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