

Doctors' Voice

January/February 2014

Dandruff and itching scalp

Dandruff is the term used to describe simple scaling of the skin on the scalp. About 50 per cent of the population suffers from dandruff. Applying simple oils (for example, bath oil) to the scalp can be useful in the treatment of dandruff.

Why dandruff occurs

The top layer of the skin is constantly being shed and renewed. Although this usually goes unnoticed when it occurs on most areas of the body, it may become more visible on the scalp as the hair traps the scaling skin.

Itching scalp

Itching scalp, with or without scaling, is a very common problem. It commonly occurs in middle-aged people, for no obvious reason. The usual response is to scratch, and this will often cause scratch marks and little crusty sores throughout the scalp. Dandruff can cause itching scalp. There are also a number of less common skin conditions that can present as itching in the scalp.

Seborrhoeic dermatitis can cause itching scalp

Seborrhoeic dermatitis is the name given to a red, itchy, scaly reaction in the scalp. It can be considered a more severe form of dandruff, except the scale is more marked and the scalp is often inflamed. It can be very itchy and can affect other parts of the body, including the face, eyebrows, beard and central chest area.

Symptoms of seborrhoeic dermatitis

- Dry or greasy diffuse scaling of the scalp (most common).
- Yellow-red scaling along the hairline, behind the hair, on the eyebrows, on the bridge of the nose, in the creases between nose and the lips, inside the ears, over the sternum (middle of the chest) on the underarms and in groin hairy areas.

Why it occurs

Seborrhoeic dermatitis affects areas with high densities of large oil glands. The inflammation is caused by the body's reaction to yeast on the scalp and to products that break down oil produced by the oil gland.

Cradle cap

Cradle cap is a form of seborrhoeic dermatitis that occurs in newborns. It may not be the same disease as in adults. It results in a thick, yellow-crusty scalp lesion. Other symptoms can include splits in the skin and behind the ears, red facial pustules and stubborn nappy rash.

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Factors that can make seborrhoeic dermatitis worse

The incidence and severity of seborrhoeic dermatitis seems to be affected by:

- Other illnesses – for example, patients with neurologic disease (especially Parkinson's disease, stroke and paralysis) or HIV
- Emotional or physical stress
- Genetic factors
- Seasonal – seborrhoeic dermatitis is usually worse in winter.

Psoriasis can cause itching scalp

Psoriasis is a relatively common skin condition that affects about 3 per cent of the population. It is often confined to the scalp, elbows and knees. While seborrhoeic dermatitis tends to involve almost all the scalp, psoriasis often occurs in small, localised patches of redness with quite prominent thick scaling. Because psoriasis may only occur on the scalp, it can be mistaken for a severe case of dandruff or seborrhoeic dermatitis. Psoriasis has a genetic link – there is often a family history of the condition. It may be triggered by some form of stress.

Medicated shampoos can help dandruff and itching scalp

Regular washing of the scalp with medicated soaps may be all that is required to relieve itching scalp. How often you need to use medicated shampoos will depend on how severe your dandruff is and what treatment you are using. Always read the directions on the shampoo pack before using it.

Where to get help

Ask your doctor, practice nurse or pharmacist for advice.

Ref: www.betterhealth.vic.gov.au

Doctors' Voice

Glandular fever

Glandular fever is the common term used to describe an acute viral infection called infectious mononucleosis. The virus that causes glandular fever is known as Epstein-Barr virus. Glandular fever mainly affects young adults. A chronic form of glandular fever is one of the suggested causes of chronic fatigue syndrome. It is sometimes referred to as kissing disease, although you can catch glandular fever without kissing someone with glandular fever.

Symptoms of glandular fever

Fever and sore throat with exudates (deposits of fluid) around the tonsils and pharynx are typical symptoms. Other clinical features are:

- Enlarged lymph nodes (lymphadenopathy)
- Enlargement of the spleen (splenomegaly) – this occurs in 50 per cent of cases
- Jaundice (yellow discolourations of the skin and eyes) – this affects approximately 4 per cent of people with glandular fever.

The symptoms usually develop four to six weeks after infection with the virus. In young children, glandular fever usually causes mild or no symptoms. Most people are infected with glandular fever at some time in their lives.

Glandular fever is spread by close contact

Glandular fever spreads through close, personal contact and is transmitted by saliva. About 50 per cent of people who are infected with the Epstein-Barr virus will develop symptoms. It is most common among high school and university aged students, but young children can also become infected by saliva on toys, shared cups or the hands of carers.

Diagnosis of glandular fever

If you think you have glandular fever, blood tests can show whether you have the infection.

No specific treatment for glandular fever

There is no specific treatment for glandular fever. You will not have to be isolated from other people. Once you have had glandular fever you will develop a high resistance to further infection. However, if your immune system is weak, the virus may be reactivated.

You cannot be immunised against glandular fever

To prevent the spread of glandular fever:

- Ensure proper hygiene, including hand washing
- Avoid sharing drink containers
- Disinfect articles soiled with nose and throat discharges, for example, handkerchiefs or tissues

For further information speak to your doctor or practice nurse.

Ref: www.betterhealth.vic.gov.au

If you have any ideas for topics, please speak to your GP or Practice Nurse

Ear problems in children

Babies and young children are prone to middle ear infections, called otitis media. Pus or fluid builds up in the ear canal behind the ear drum, which causes pain and sometimes deafness. Sometimes the ear drum bursts, releasing the fluid and making the child feel better. (Burst ear drums usually heal up by themselves).

Symptoms of middle ear infections

- Earache
- Headache
- Fever
- Discharge from the ear
- Mild deafness
- Difficulties in sleeping
- Loss of appetite.

Common after a cold

Middle ear infections are caused by either bacteria or viruses and can be triggered by a cold. Babies and young children are more likely to develop middle ear infections because they are still building up their immunity.

Some precautions

You can reduce the risk by:

- Limiting day care - exposure to other children increases a baby's odds of catching a cold.
- Breastfeeding - offers better immunity than bottle feeding. Propping up a bottle with the child lying down should be avoided as milk may enter the Eustachian tube and increase the risk of ear infection
- Not smoking - passive smoking is a risk factor.

See your doctor or practice nurse for further information.

Ref: www.betterhealth.vic.gov.au