

**THE ORIGIN OF NUMMULAR DERMATITIS, THE MOST EFFECTIVE METHODS
OF TREATMENT**

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Annotation: Nummular eczema is a skin condition that causes circular, raised spots on your skin. Nummular comes from a Latin word for “coin,” and the patches are coin-shaped. The lesions are often itchy, sometimes ooze clear fluid and may become crusty on top.

Key words: Nummular eczema, autoimmune, psoriasis, discoid eczema.

The condition is chronic. Patches can last for weeks to months, and flare-ups or episodes can repeatedly happen over a long period of time.

Nummular eczema is also called nummular dermatitis and discoid eczema.

Ringworm and nummular eczema both cause circular patches on your skin. But the causes and treatments are different.

Ringworm is a contagious skin infection caused by a fungus. Nummular dermatitis is a type of eczema rather than a fungal infection. Ringworm tends to appear as one or two patches on your skin, but nummular eczema often causes multiple patches.

It can be difficult to tell the difference between eczema and psoriasis.

Psoriasis tends to cause thick scales on your skin. Nummular eczema causes bumps that may ooze and become crusty. Eczema tends to be itchier than psoriasis.

Psoriasis is an autoimmune condition that causes inflammation in your skin. Symptoms of psoriasis include thick areas of discolored skin covered with scales. These thick, scaly areas are called plaques.

Psoriasis is a chronic skin condition, which means it can flare up unexpectedly and there's no cure.

Discoid eczema (nummular eczema) can affect anyone, but it's more common among men or people assigned male at birth. It tends to occur in:

Women or those assigned female at birth between the ages of 15 to 25 years.

Men or those assigned male at birth between the ages of 50 to 65 years.

Scientists aren't sure why nummular dermatitis occurs, but it may be triggered by:

Allergies.

Bacterial infection (for example, Staphylococcus).

Exposure to rough fabrics (for example, wool).

Extremely dry skin or dry environments.

Frequent bathing or showering with hot water.

Skin trauma or injury, like a burn, scrape or bug bite.

Use of irritating and drying soaps. Nummular eczema lesions usually appear on your arms, legs, hands or torso. The early signs are tiny bumps or blisters. The bumps may join together into a coin-like shape. They often leak clear fluid and become crusty on top.

Nummular dermatitis spots tend to be intensely itchy. Your skin may burn or sting.

The color of the lesions may vary, depending on your skin tone. They may be pink, red or brown. They can be lighter than your skin or darker.

For diagnosis, consider visiting a dermatologist, who specializes in skin conditions. They can tell the difference between ringworm, nummular dermatitis, psoriasis, additional types of eczema and other skin conditions.

Your healthcare provider can usually diagnose nummular eczema by examining your skin. Tests are generally not necessary, but sometimes, a healthcare provider will scrape your skin and look at it under a microscope.

To reduce your risk of discoid eczema flare-ups, try these skincare strategies:

Avoid skin products and laundry detergents that contain fragrances or dyes.

Avoid tight clothing and irritating fabrics.

Manage stress, which may contribute to flare-ups.

Moisturize with thick products, such as petroleum jelly or hydrating cream, especially when the skin is still damp after bathing or showering.

Prevent skin injury. If an injury occurs, clean the area and cover it with a bandage.

Take short (five-minute), lukewarm showers.

Avoid hot long baths.

Use gentle cleansers that contain moisturizers.

Avoid rubbing exfoliating skin.

Avoid using a washcloth, buff puff or loofah.

With correct diagnosis, treatment and self-care, nummular eczema usually clears up.

The nummular eczema healing process usually takes one to several weeks. The spots will flatten, get lighter in the middle and disappear.

To ease the symptoms of nummular dermatitis at home, use the prevention tips above. Also:

Avoid scratching the spots, as that can cause infections and scars.

Scars form as part of the healing process after your skin has been cut or damaged. The skin repairs itself by growing new tissue to pull together the wound and fill in any gaps caused by the injury. Scar tissue is made primarily of a protein called collagen.

Scars develop in all shapes and sizes. Some scars are large and painful, while some are barely visible. People with dark skin (especially people with African, Asian or Hispanic heritage), as well as red-haired individuals, are more likely to develop keloid scars. Keloids are raised scars that grow and extend beyond the injured area. Depending on their size, type and location, your scars may look unsightly and may even make it difficult to move.

Not all scars require treatment, and many fade away over time. If a scar is bothering you or causing pain, treatments can help.

Scars can develop anywhere on the skin. There are several types of scars, including:

Contracture: Often developing after a burn, a contracture scar causes the skin to tighten (contract). These scars can make it difficult to move, especially when the scarring gets into the muscles and nerves or occurs over a joint.

Depressed (atrophic): These sunken scars often result from chickenpox or acne. They look like rounded pits or small indentations in the skin. Also called ice pick scars, they develop most often on the face. Acne scars may become more noticeable as you age because the skin loses collagen and elasticity over time.

Flat: Although it may be slightly raised at first, this type of scar flattens out as it heals. Flat scars are often pink or red. Over time, they may become slightly lighter or darker than the surrounding skin.

Keloids: These scars are raised above the skin's surface and spread beyond the wounded area. The overgrown scar tissue can get large and may affect movement.

Raised (hypertrophic): You can feel a hypertrophic scar when you run your finger over it. These raised scars may get smaller over time, but they never completely flatten out. Unlike keloids, they don't grow or spread beyond the wounded area.

Stretch marks: When skin expands or shrinks quickly, the connective tissues under the skin can be damaged. Stretch marks often develop during pregnancy, puberty or after gaining or losing a lot of weight. They usually appear on the breasts, stomach, thighs and upper arms.

Scar tissue can also build up inside the body. Internal scar tissue can result from surgery (like abdominal adhesions) and some health conditions, such as Asherman's syndrome and Peyronie's disease. An autoimmune disease such as scleroderma creates skin changes resembling scarring from the inflammation in the skin.

Scars are part of the body's healing process. As part of your immune system, your skin is the barrier to protect you from germs and other harmful substances. When skin is injured, the body creates new tissue made of collagen to help reseal itself.

Collagen plays many important roles throughout your body, including plumping up your skin and helping your cartilage protect your joints. When a scar develops, collagen fibers repair damaged skin and close any open areas. The new tissue protects you from infection.

Cover lesions with a moist bandage (for example, an adhesive bandage with petroleum jelly on the pad).

Follow your healthcare provider's instructions carefully.

Take an antihistamine, such as hydroxyzine or diphenhydramine, to reduce itchiness and help you sleep at night.

If you have nummular eczema, you should talk to a healthcare provider and receive treatment. They can help you clear the flare-up more quickly and prevent infection.

During treatment, call for any signs of infection, such as:

Feelings of pain or tenderness on or near affected areas.

Red or brown streaks on the skin near a lesion.

Swelling.

Yellow or gold fluid or crust on the lesions, indicating the presence of pus.

Nummular eczema is a skin condition that causes raised, coin-shaped lesions on your skin. If you have any unusual spots on your skin, talk to a healthcare provider such as a dermatologist. They can differentiate between fungal infections such as ringworm, chronic problems such as eczema and other skin conditions.

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