



Texas Children's Hospital



**Texas Children's Hospital
Dermatology Service**

PCP Referral Guidelines- SEBORREHIC DERMATITIS

Diagnosis/symptom: **SEBORREHIC DERMATITIS**

Referring provider's initial evaluation and management should include:

Seborrheic dermatitis is a common, benign skin condition in infants and young children. The expected course is gradual resolution over a period of months to years. It is not necessary to treat all cases of seborrhea.

Treatment should be initiated for moderate to severe cases and/or symptoms of pruritus/pain.

Scalp:

- ketoconazole 2% shampoo or Selenium Sulfide shampoo two to three times weekly (shampoo should be allowed to sit for ~5 minutes before rinsing)
- Topical steroid solution or oil (such as Dermasmoothe or synalar) once to twice daily
- Baker's P&S shampoo and solution are available over the counter (excellent when thick scale present)

Body:

- Routine sensitive skin care including bathing once daily with a mild soap and moisturizing liberally with a bland emollient cream (such as cetaphil/cerave/aveeno/eucerin)
- Low potency topical steroid ointments twice daily to affected areas (Initiate treatment with OTC Hydrocortisone 1% ointment, increase to desonide 0.05% ointment or Hydrocortisone 2.5% ointment as needed)

Ketoconazole 2% cream twice daily for red creases (can be mixed with topical steroid)