Nappy rash

Summary

- Prevention and treatment options include more frequent nappy changes, using disposable nappies and covering the sore area with a barrier cream (such as zinc and cod liver oil or zinc and caster oil creams).
- If the nappy rash does not get better in a couple of days, or if it spreads onto the tummy, get advice and treatment from your doctor.

Nappy rash is a common result of exposure to wet or dirty nappies. Urine is normally sterile (in the absence of certain conditions or infections). However, it is irritating to skin. Leaving a wet nappy on a baby for long periods of time can lead to nappy rash.

Most babies get nappy rash at some stage, no matter how well they are cared for. Some babies may have very sensitive skin and also develop rashes on other parts of their bodies. Infections, such as thrush, make the rash worse. Some babies only get nappy rashes when they have a cold or some other viral illness.

Most cases of nappy rash can be treated successfully at home with the help of a maternal and child health nurse. See your doctor if your baby’s nappy rash looks severe, is hurting your baby or doesn’t clear up within a few days.

Symptoms of nappy rash

Symptoms can include:

- Inflamed skin – the skin around the genital area and anus looks red and moist.
- Blistering – the skin may blister and then peel, leaving raw patches (ulcers).
- Spreading – the rash can spread onto the tummy and buttocks.
- Ulcers – small ulcers can sometimes form on healthy skin near the area of the rash.

Damage to the skin is sore and can unsettle the baby, especially when urine comes into contact with the rash.

Causes of nappy rash

Babies who have sensitive skin, with rashes on other parts of their bodies such as cradle cap or eczema (on the face or under the chin), may be more likely to develop nappy rash.

Some things can trigger nappy rash, including:

- Ammonia – chemicals in urine irritate the skin.
- Thrush (candida) – thrush can occur spontaneously. It is more common after a baby has been given antibiotics for another infection. Thrush can aggravate nappy rash.
- Chemical exposure – some baby wipes may cause irritation or allergy. Scented soaps or baby lotions can also irritate the skin of some babies.
- Plastic pants – these keep the baby’s clothes clean and dry, but prevent airflow. Because the clothes do not get wet, a baby may be left in a wet or dirty nappy for a longer and this may aggravate nappy rash.

Prevention and treatment of nappy rash

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Suggestions to treat or prevent nappy rash include:

- Change your baby more frequently.
- Use disposable nappies, which better absorb urine and leave the surface of the nappy (that is next to the skin) dry.
- Use only water or ph-neutral soaps to clean your baby’s bottom. Avoid wet wipes that have alcohol in them.
- Use a barrier cream, such as zinc and cod liver oil, to protect your baby’s skin.
- Make sure you change cloth nappies often and, whenever possible, do not put plastic pants over them.
- If you wash your nappies in a machine, the rinse cycle is sufficient to remove traces of detergents and other chemicals. If you wash them by hand, make sure they are rinsed thoroughly in clean water. If possible, dry them in a tumble drier – this makes them much softer than drying them in the sun.

Seek medical advice

If your baby’s nappy rash doesn’t improve after a week or so, see your doctor. The nappy rash may be infected by thrush.

If your doctor suggests creams for thrush or steroid creams (such as hydrocortisone cream), follow the directions for use. Wash the skin and put a thin layer of the cream on the affected areas, then replace the nappy. Disposable nappies are preferable while treating nappy rash.

Where to get help

- Your doctor
- NURSE-ON-CALL Tel. 1300 606 024 – for expert health information and advice (24 hours, 7 days)
- Maternal and child health nurse
- The Maternal and Child Health Line (24 hours) Tel. 13 22 29
- The Royal Children’s Hospital Tel. (03) 9345 5522

Things to remember

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