

# Dr Sarah Jarvis



A familiar face on The One Show, My Weekly GP Dr Sarah Jarvis writes for you

## Spot The Problem

Rashes are usually mild and easily treated, but some need serious action

**Y**ou've heard the saying "It's all over me like a rash!" and sometimes rashes are, indeed, all over you, but very often they only affect one part of your skin.

With these tips you can help separate the majority, which are nothing to worry about, from those that need more than time and a bit of soothing cream. If simple measures don't help, though, do get your GP to check it out.

### Common rashes include:

- Contact dermatitis. Dermatitis just means inflammation of the skin. Contact dermatitis is a red, sore, bumpy rash,

sometimes with blisters, caused by an allergy to something you've touched – like nickel in jewellery, latex or cosmetics. Even a brief contact can bring out the rash, usually on your hands or face. You may need a steroid cream to reduce inflammation.

- Irritant dermatitis. This causes dry, scaly, red sore skin, usually on your hands. Harsh chemicals or detergents are often to blame. Use lots of unscented moisturiser and avoid coming into contact with detergents and cleaning products, or spending too much time with your hands in water. Rubber gloves – unless you're allergic to rubber! – should help.
- Eczema. This tends to cause dry, itchy red patches which come and go. Unscented moisturisers are often enough, but you need to apply them several times a



Just dry skin?

**FACT!** Recurring bouts of intertrigo can indicate diabetes, so get it checked out

day for best effect. Avoiding highly perfumed products, and sticking to hypo-allergenic brands, including make-up, will reduce the risk of it returning.

**Summer holiday rashes**  
Heat rash, or prickly heat,

happens when you're hot and sweat can't escape, so it's common on holidays or in summer. It usually causes clusters of small, red bumps that produce a pricking or stinging sensation. Keeping yourself cool and wearing loose clothes in natural

**Prickly heat rash can often be avoided by staying cool and wearing loose clothes in natural fibres**



Avoid contact with cleaning chemicals

## Controlling Psoriasis

The inflamed red patches and thick, silvery scales of psoriasis cause misery to over 1.5 million people in the UK. Although psoriasis isn't catching, it can't be cured either.

Psoriasis can usually be kept under control, but too many people give up and suffer in silence when one or two treatments haven't done the trick. That means they may not know about some of the newer treatments available from the GP, which are less messy, more convenient and often more effective than older ones. For instance, two treatments – a topical steroid and another cream – are now available together as a single cream, Dovobet gel, which can be applied to both body and scalp just once a day.

Visit [www.morethanpsoriasis.co.uk](http://www.morethanpsoriasis.co.uk) for tips on treatment.



New treatments

fibres will often be all you need to do.

### Rashes caused by yeast

Intertrigo gives rise to sore red patches which may have a "cheesy" smell, usually under your breasts or in your groin. It's caused by a yeast infection, similar to athlete's foot. Treat it with anti-fungal cream, available from your chemist, and try to avoid getting too warm or sweaty. If it's a recurrent problem, see your GP about getting tested for diabetes.

### Do you feel unwell?

Rashes caused by infection can often make you feel generally unwell along with

the rash. Such rashes can possibly indicate:

- Life-threatening meningitis – usually a red, blotchy rash that doesn't fade when you press a glass against it. It's very important to see your doctor urgently if there's any chance of meningitis.
- Cellulitis – infection spreading under the skin, causing a red painful area of skin on one part of your body.
- Shingles – a band of pain followed by blisters, strictly on one side of your body.

## NEXT WEEK

How to cope during hayfever season

## What's The Alternative?



**Sarah Merson** advises on going down the natural route

**This Week: Hayfever advice**

**Q** I suffer from hayfever and have tried lots of different ways to control it. Someone mentioned that homeopathy might be helpful – can you advise me please?

**A** Homeopathy has a good track record in changing the sensitivity of those affected with chronic hayfever, so that attacks become less frequent and less severe. It's advisable to seek consultation with a professional or medical homeopath for this. If, however, you have an acute flare-up of symptoms, Ralf Jeutter, homeopath at the College of Naturopathic Medicine ([www.naturopathy-uk.com](http://www.naturopathy-uk.com)) recommends the following remedies:

**Allium Cepa 30C** – if you have burning discharge from nose, bland discharge from eyes and symptoms are worse indoors than outdoors. There can be pain in the throat as if hooks are sticking in it. You may feel slightly sensitive, and not feel like taking warm drinks or food.

**Sabadilla 30C** – for violent sneezing, watering eyes, and red, swollen eyelids. You may have a sore throat,

which feels soothed by hot drinks, and you may also feel chilly.

**Gelsemium 30C** – if you are sneezing non-stop and your eyes are heavy, puffy and watering. You may feel lethargic, dizzy and shaky.

**Arsenicum 30C** – if you are feeling weak and worn out, chilly, restless and anxious. You may have burning pains in your eyes and nose. You may want to sip cold water.

For all of the above, put two pills in 100ml of water, let them dissolve, then stir the water. Take one teaspoon of the same solution every two hours, to a maximum of 4 dosages. Stir the solution well before taking it.



Atchoo!