

# HANDLE DIAPER RASH

# like a pro

## The basics

### Frequent diaper changes

Pee and poop and sweat are irritants. Change the diaper often, especially in newborns!

### **Limit wipes**

Use a peri-bottle or warm water/washcloth. If you must use wipes, water wipes are my fave.

### Pat dry (or allow to air dry)

No vigorous rubbing. Gentle is key. If you can, allow your baby to go diaper free or use a hair dryer on a cool setting to dry the bum!

### Thick barrier ointment

Use a Zinc oxide barrier ointment. Put it on like you're frosting a cupcake. Nice and thick!

## When to call the doctor

Always err on the side of calling your pediatrician if you have any concerns about your child. Other red flags include:

- · rash not improving within 2-3 days
- · pus or drainage
- severe pain
- · bleeding or many open areas/sores
- systemic symptoms (such as fever, vomiting, diarrhea)
- · frequent or recurrent infections
- you notice oral thrush (white patches in mouth)
- · if anything else is tickling your spidey sense

# Things to keep on hand

### Zinc Oxide ointment

Regular strength 13-16%, max strength 40%. I use Triple Paste, but really any should work, as long as applied correctly.

### Petrolatum/Vaseline

Safe and effective barrier. I tend to use this most if I see the beginning of minor redness, or if I anticipate not being able to change the diaper as frequently (eg long car ride).

### 1% Cortisone

Can work well for irritation/discomfort especially from simple contact dermatitis, but should not be used for more than a few days (if there is an infectious cause then using a topical steroid can backfire).

### Colloidal oatmeal

I've discussed this before! Works great!

### **Ilex Paste**

More expensive, and I only use this if normal methods not working. But it is a thick barrier and works great.

### Mylanta/Antacid

Can work well for rash related to frequent poops. Put it on topically before the barrier-acts as a neutralizing agent for the bile acids in the stool (so they are less irritating). But use with caution because prolonged use or with many open sores, can lead to systemic absorption of Mag or Aluminum.