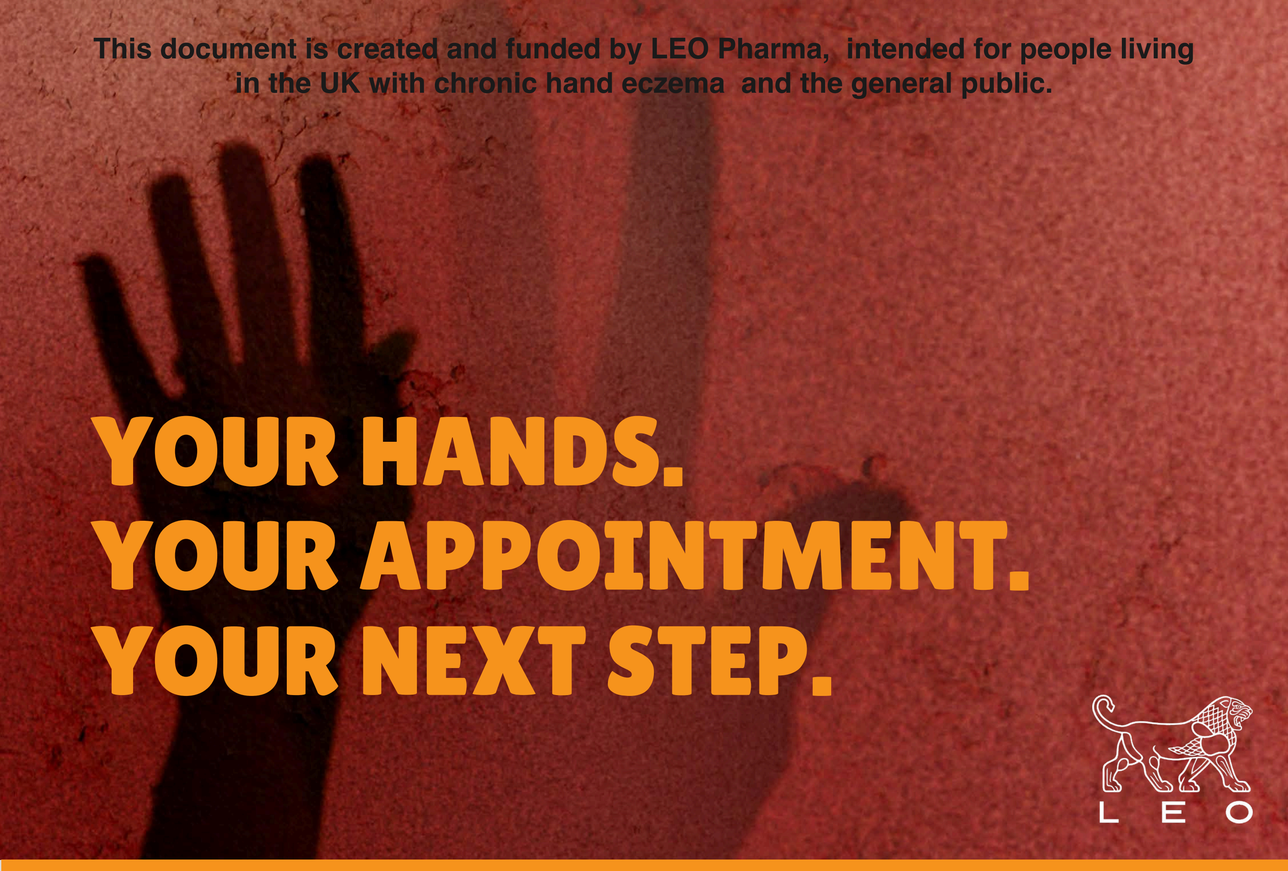
This document is created and funded by LEO Pharma, intended for people living in the UK with chronic hand eczema and the general public.



YOUR HANDS. YOUR APPOINTMENT. YOUR NEXT STEP.

If things still aren't better, it might be time to speak to your doctor.

Before you go in

Chronic Hand Eczema (CHE) is eczema on the hands and wrists that hasn't gone away for 3+ months, or keeps coming back.[1] It isn't always easy to cover everything you need in a short appointment with your doctor and time can go quickly.

This helpful guide can help you express what you're experiencing, so that you can make the most of your time together with your doctor and move your care forward.

Save this guide. Read from it. It's yours to keep.

This guide is for you if you think you might have, or have already been diagnosed with Chronic Hand Eczema
It is not intended to provide medical or diagnostic advice. Always speak to your healthcare professional about your signs and symptoms.



Take a few minutes now, so your appointment counts

Here's a few things that can be helpful to think about before your appointment. Run through this, maybe make some notes in your phone before you go.

- ☑ How long it's been since your last appointment (weeks/months/years) and whether things have gotten (better/worse/or stayed about the same)
- ☑ How long your flares typically last, and how often they happen
- ☑ What you believe your triggers are
- ☑ How you try to avoid those triggers
- ☑ If this is affecting your life (itch, pain, dexterity, sleep, work, mental health, relationships)
- ☑ What treatments you've tried, if any, and how long you used each during a flare
- ☑ What 'success' would look like for you

TIP!

Photos of your hands and wrists during a flare are one of the clearest ways to show your healthcare professional the impact of hand eczema. Bring a few if you have them.



Image depicts a real patient

Use the questions that are most relevant to you.

You don't need to ask all of these, just the ones that match your situation and current challenges.

1. If you're not yet clear about your diagnosis…
   What type of hand eczema could I have?

2. If you don't know what's behind your flares…
   What may be triggering it?

3. If you're not sure…
   Could it be Chronic Hand Eczema?

4. If your flares keep coming back…
   Are there lifestyle changes that could help prevent my flares?

5. If you're getting repeated flares and aren't sure what's causing them…
   Should I consider allergy testing or patch testing?

6. About treatment options…
   What treatments are available to me, and which is best for me right now – why?

7. About your current treatment (if any)...
   How long should I use my prescribed medication, and what side effects might there be?

8. To get clarity on your plan…
   What should I do if my symptoms don't improve or keep coming back?

9. Could you need a referral?
   What could the future next steps in managing my condition look like?

Pick 2–4 questions that matter most for this appointment



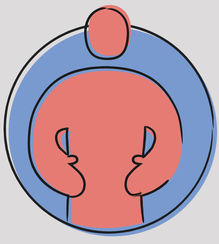
Image depicts a real patient

Still struggling with CHE? It's worth raising that with your doctor.

It can be disheartening when you've been to see your doctor and still don't feel you've found management that works for you.

Don't give up hope. Depending on your hand eczema, there may be other routes and management options to explore.

If you haven't yet talked to a healthcare professional about hand eczema...



If you've already talked to a pharmacist about hand eczema, but symptoms are persisting...

Pharmacist[1,2] can offer:



Creams and emollients



General advice

No improvement?
Ask your GP for additional support

GP[1,3,4] can offer:



Allergen advice/ patch test referral



Getting a Diagnosis



Prescribe topical treatment

Symptoms persisting?
Ask for a dermatologist referral

Dermatologist[1,4] can offer:



Getting a Diagnosis



Confirming triggers



Prescribe advanced therapies



Support

Book an appointment

If you believe there is a need, talk to your healthcare professional now



Say it so it gets heard

Here's how to use a few of the most useful CHE terms in the room with your doctor.

	What it means	Examples of how to use it
Flare–up	When your eczema suddenly gets worse: more itchy, painful red or sore.[2]	*"I've had three flare-ups in the last two months."*
Chronic Hand Eczema	Eczema on your hands and wrists that hasn't gone away for over 3 months, or that happens at least 2 times in a year.[1]	*"Could it be Chronic Hand Eczema, not just eczema?"*
Fissures/ Vesicles	Fissures = cracks in the skin. Vesicles = small, fluid filled blisters.[5]	*"I think I have fissures and vesicles, not just dry skin."*
Pruritus	The medical term for itching.[6]	*"The pruritus is affecting my sleep most nights."*
Erythema	Redness of the skin.[5]	*"There is noticeable erythema, not just dryness."*
Allergen	Something that causes an allergic reaction, like pollen, pet dander, or certain foods. These can sometimes trigger eczema flare-ups.[7]	*"I think an allergen might be triggering my flares. Could we look into that?"*
Atopic Dermatitis	Is the name for a common type of eczema. It's a skin condition that can make your skin dry and itchy.[7]	*"I've read this might be a type of Atopic Dermatitis. How is that different from CHE?"*
Oedema	Swelling.[9]	*"There's some oedema around the area, not just redness."*
Emollient	A type of moisturiser that helps soften and hydrate your skin.[10]	*"Should I be using an emollient more often than I am now?"*
Hyper–keratosis	Extra-thick skin, like your skin has built up extra layers.[11]	*"The skin feels really thick in some spots. Could this be hyperkeratosis?"*
Inflamma–tion	Redness, swelling, heat, and pain in an area of the body. It's your body's way of reacting to injury or irritation.[8]	*"The inflammation seems to flare up around the same time each month."*
Irritant	Something that damages your skin and can make your eczema worse, like soap, detergents, or certain chemicals.[12]	*"I think an irritant at work might be making this worse."*
Licheni–fication	Thickening and roughening of the skin, often caused by repeated scratching.[5]	*"I've noticed some lichenification where I scratch the most."*
Systemic	Medicine that you take by mouth or injection that works throughout your whole body and travels through the bloodstream.[13]	*"Could it be time to consider a systemic treatment instead?"*
Topical treatments	Medicine that you put directly on your skin, like creams or ointments.[14,15]	*"I am currently using topical treatments daily."*
Wet work	Jobs or activities that involve frequent contact with water, like hairdressing, cleaning, or healthcare. This can cause dry hands and make eczema worse.[16]	*"My job involves a lot of wet work. Could this be making things worse?"*

Ready to take the next step?

Talk to your healthcare professional now

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