

Seborrheic Dermatitis (Dandruff)

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What is seborrheic dermatitis?

Seborrheic dermatitis is a common skin disorder that can be easily treated. This condition is a red, scaly, often itchy rash most commonly seen on the scalp, sides of the nose, eyebrows, eyelids, skin behind the ears, and middle of the chest. Other areas, such as the navel (belly button), buttocks, skin folds under the arms, axillary regions, breasts, and groin, may also be involved.

Are dandruff and seborrheic dermatitis the same?

Dandruff appears as scaling on the scalp without redness. Seborrheic dermatitis has both redness and scaling.

Who gets seborrheic dermatitis?

This condition is most common in three age groups — infancy when it's called "cradle cap," middle age, and the elderly. Cradle cap usually clears without treatment by age 8 to 12 months. In some infants, seborrheic dermatitis may develop only in the diaper area where it could be confused with other forms of diaper rash. When seborrheic dermatitis develops at other ages it can come and go. Seborrheic dermatitis may be seasonally aggravated particularly in northern climates. It is common in people with oily skin or hair, and may be seen with acne or psoriasis. A yeast-like organism may be involved in causing seborrheic dermatitis.

Is this condition associated with other diseases?

Seborrheic dermatitis may occur in patients with diseases of the nervous system, such as Parkinson's disease. Patients recovering from stressful medical conditions, such as a heart attack, may also develop this problem. People in hospitals or nursing homes and those with immune system disorders appear more prone to this disorder as well.

How long does this disease last?

Seborrheic dermatitis may get better on its own, but with regular treatments, the condition improves quickly.

Can it be prevented or cured?

There is no way to prevent or cure seborrheic dermatitis. However, [it can be controlled](#) with treatment.

How is this condition treated?

Gentle shampooing with a mild shampoo is helpful for infants with cradle cap. Mild corticosteroid creams and lotions, or anti-fungal topicals such as ciclopirox or ketoconazole, may also be applied to the affected areas of skin. Adult patients may need to use a medicated shampoo and a stronger corticosteroid preparation. Non-prescription shampoos containing tar, zinc pyrithione, selenium sulfide, ketoconazole, and/or salicylic acid may be recommended by a dermatologist, or a prescription shampoo, cream gel, or foam may be given. As excessive use of stronger preparations can cause side effects, patients should follow their dermatologist's advice.