Season Three Introduction

Hi, welcome to season three of the Baby Manual podcast, The Holistic Mama's Handbook. This season we'll go through alternative and supportive care to help you take care of your little one when they're sick, but too young to take most medicines.

I'm your host, a pediatrician and mom, and the author of The Baby manual and The holistic Mama handbook, Dr. Carol Keim. Hello, welcome to this week's episode of the Baby Manual Podcast.

Today we're going to talk about allergies and eczema, which are things that we typically diagnose. So allergies are usually diagnosed in older children after age three, but we do see allergies in the first three years of life and they look a little bit different.

And exima is super common in babies. If you check out the Holistic Mama's Handbook, I also have a section on asthma in there. Asthma is also something that gets diagnosed a bit later in life in children around age older, and all three of these are called the atopic diseases.

They tend to run together in families. So if there's a family member that has either allergies or eczema or asthma or multiple of those, then your child is at higher risk of developing any one of We're going to start off with allergies at first.

So let me just tell you real quick about the allergic cascade because you can target that allergic Cascade kind of anywhere along it.

Allergies, Eczema, and Atopic Diseases

We have a lot of different medicines and a lotta different treatments for different parts of it So the way that allergies happen is that it starts with an antigen and an Antigen is a protein that is in something in the environment.

It could be pollen. it could Be something and food it Could be a medicine All kinds of things are antigens and the antigen binds to the IgE, which is an immune globulin that's produced by the white cells called B cells.

And then Ig-E goes and sticks to these cells, called mast cells and mast cell are what have histamine inside of them and also other cytokines which are cellular chemical signals that call other things to area and they cause the symptoms.

The granules that are in the mast cells are getting released and that's what causes all the symptoms of allergies. And it causes things like blood vessels to get wider and leakier, which makes you kind of secrete all over the place.

It makes watery eyes, runny nose, it cause swelling in tissue, causes the hives that you see under the skin. it makes your airways swell and so can cause the wheezing that see there, cause of the mucus in airwaves as well.

So histamine is really responsible for a lot of this stuff and also the other cytokines that are in there. Histamine itself also causes itching. It's very irritating and itchy and so that's where you get the rashes, the hives, that itch of the eyes, and that itchy at the back of your throat or that clicking of tongue to kind of scratch your own throat, itchy inside your ear feeling.

and then also it causes spasms of the airways.

How Allergic Reactions Work

In addition to causing swelling inside the lungs, you can get spasm of and the little tiny airways in there. And when

those spasm down, you know how if you listen to organ pipes, the big ones make a deeper sound, and little ones makes a higher pitched sound.

So as your airway spasms down you get this high pitched wheezing noise. Severe allergic reactions known as anaphylaxis are when your blood vessels dilate so much and so quickly that the blood pressure can drop dangerously low and also the airways can spasm even all the way closed.

So anaphylaxis is very dangerous, very serious. And if your child has an anaphyl axis, typically the medicine we would do for that is an EpiPen or epinephrine, some sort of an injector, because eponephrin just works immediately on the blood vessels to spasm them up so that they tighten up, so you stop that leaking and you increase that blood pressure.

Then they do the opposite in the airways, they open them, up they make them completely relaxed and so their child can breathe. Epinephrine is a great emergency treatment for anaphylaxis specifically.

But in terms of like regular allergies, so for younger babies, a lot of times what we'll see for babies in the first six months of life, typically the allergy that we see is actually some sort of a protein allergy to something that they're eating and it can show up either as blood in their poop.

So in addition to the itchy irritation stuff that like older kids get throughout their body, In young babies what happens is the gut just gets a little leakier and like leaks more blood into it, into the poop and so you'll see blood kind of mixed in throughout the poops and sometimes even on top of it.

And so gastrointestinal bleeding is one of the first signs of a food allergy in young baby's. Most commonly it's milk protein, sometimes it soy and those do tend to cross react with each other but they could be allergic to just about anything.

So if you feel like your child is having blood in their poop make sure you bring the diaper in to the doctor. They can test it to see if it's blood or not.

Then they can sort of guide treatment from there. But typically for young babies like that, we would put them on a hypoallergenic formula, or we will talk to mom about doing an elimination diet.

And it can take, if is dairy, it could take six to eight weeks for those dairy proteins to come out of your milk after complete elimination. It is really hard to do a complete That means no butter, no yogurt, cheese, ice cream, nothing like that.

Most baked goods have some dairy in them, so it's very hard to do and I don't recommend doing it on your own. Definitely talk to your doctor if you're thinking about doing an elimination diet.

So for older children, allergy symptoms are more of like things like hives, sneezing, watery eyes, coughing, itching, rashing up on their skin, some eczema too, which we'll get to in a minute.

Other treatments for allergies. So obviously, so from Western standpoint, the first step to treating allergies is to avoid what you're allergic to.

Allergy Symptoms in Babies and Older Children

So if you can avoid that, that's great. If your child is allergic to cats and you don't own one, just don' go to any houses that have cats. That's kind of an easy fix.

if they're allergic the outside, if their allergic like pollen, dust, it's a little bit harder. So keeping the house clean can help cleaning often. Remember that when you vacuum, a lot of times that kicks up dust.

And so if your kid is allergic to dust, vacuuming can actually make them worse in the moment. But vacuum often

makes it so that not enough dust accumulates.

Make sure you have a HEPA filter. Hepa filters, they filter out really small particles like in dust and the dust mites so it doesn't get so aerosolized while you're vacuum and then also you can get HPEA filters for your vents, for you air conditioning and heating vents.

so that the air that's blowing throughout the house doesn't have all this dust in it. If they're allergic to pets, avoid having pets unfortunately, or just avoid houses that have pets.

if they are allergic things outside, you can wash them off when they get inside. Sometimes just rinsing off, head to toe, doing a quick bath or shower can help to get a lot of the allergens.

You can use something like a saline nose spray or nose wash. or a sinus rinse, and that will just wash out whatever dust is inside the nose, whatever pollen is in there, after being outside, that can really help to decrease the exposure.

And of course, if they're allergic to a food or medication, they need to avoid that food and medication. Now, with medication allergies, I get asked a lot, like parents will tell me, hey, am allergic to this medicine, can we not give it to my kid?

And typically the answer is that since you're allergic something, your child is more likely to be allergic too something. But most of the time it's something different.

So if a parent's allergic amoxicillin, it is okay to try giving that medicine to a child. Just keep in mind, any medicine can cause an allergic reaction.

And so keep an eye on your child, especially if you have any allergies, eczema, or asthma in the family. Whenever they start a new medication, they are, you know, just unfortunately at higher risk of developing an allergy to something.

So yeah, the short answer is that yes, if your allergic is, well, basically no, If you're allergic to, something your, child doesn't need to avoid that same thing.

There are some allergies that cross-react with each other. So in terms of the food allergies, the top food allergens are milk and soy, which cross react with other, nuts, like tree nuts which are things like almonds, cashews, hazelnuts, pecans, pistachios.

These tend to crossreacts with others with nuts. Peanuts, which are in their own class because peanuts are legumes and sometimes they'll cross react with soy which is also a legume or peas sometimes but not always.

Typically with peanuts a lot of times it's just that isolated peanut allergy. Fish and different types of fish will cross-react with other fish so if your child's allergic to salmon they're more likely to be allergic too trout or tuna.

but not always necessarily, sometimes it's only specific fish.

Avoiding Allergens and Cross-Reactivity

Shellfish is another one, so being allergic to one type of shellfish, like say crab, makes you more likely to be allergic other types like shrimp or mussels or oysters.

So shell fish tend to cross-react with each other. And then sesame has just come out as one of the top allergens in children. And sesame seeds can potentially cross react with other seeds.

But a lot of times also sesame is an isolated allergy. And what I've seen just through clinical practice is that sesame and peanuts tend to sometimes, like kids who are allergic to sesame, a lotta times are also allergic peanuts, but

they're not technically in the same allergy family.

Okay, so moving up the allergic cascade, in addition to avoiding the allergens, we kind of work backwards through the allergy cascade. So we start with the late symptoms first.

I said epinephrine for anaphylaxis, and that's only getting those very tail-end symptoms, it's not doing anything for the allergies cascade itself. The next step is antihistamines.

So we used to do diphenhydramine, which is brand name Benadryl in the US, and that has pretty much fallen out of favor completely because we have better treatments available.

It only lasts for four to six hours. it tends to be sedating in older children, but for kids under age three can actually cause them to hyperactive. They can get a paradoxical reaction.

And it's just, it has all these side effects that can also decrease their respiratory drive, make it harder to breathe or make them even stop breathing.

We don't really do Benadryl anymore, but there are some second-generation antihistamines that dont get absorbed into the brain, and so they don´t have those like sedative or potentially stimulating side effects.

And those are things like loratadine, which is claritin. Satirazine, which is brand name Zyrtec, are the two that we use very commonly in children. And so these second generation antihistamines, they last for 12 to 24 hours.

They're the strongest for the first 12 hours, and we give them once a day. So if your child is allergic to things like in the environment, say things that are outdoors, seasonal allergies, that kind of thing, then I would say give that medication in But if they're allergic to things like dust or dust mites or dogs or cats or things inside the house mold, I would give the medicine at nighttime.

If you find that they are waking up really congested in the morning or they have trouble sleeping because of allergy symptoms, you want to be given that medicine because it's strongest for those first 12 hours.

But then if you're suffering during the day, give it in in morning. If you're not sure what your child is allergic to, they can always go for allergy testing, go to an allergist specifically, and the next kind of treatments a lot of times are what are prescribed by allergens.

Now, sometimes your general practitioner will give their child steroids for allergies, or if they are sick, if the have a cold and tend to get these kind asthma-y allergy type of symptoms with hives when they get colds, like viral infections, we can do steroids for that as well.

Steroids are meant to be given short acting, for a short amount of time, five to seven days typically, and some of them are only given as a single dose or a couple of days of dosing.

And that's because steroids have a lot of side effects. But the way that steroids work is they decrease the number of white blood cells, and they suppress the bone marrow from making white-blood cells.

And they decreased inflammation. They're very anti-inflammatory. So they kind of work a little higher up in the allergic cascade by decreasing the amount of White-Blood Cells and therefore the Amount of IgE and Ammount of Mast Cels in The Body.

and then they're directly anti-inflammatory, working kind of against those cytokines that are released by the mast cells.

Allergy Medications and Emergency Treatment

So steroids are very effective in the short term, but the typical side effects we see in children on a short course of

steroids, are things like mood changes because they are precursors to hormones and they kind of act like they've got some hormones going on.

So you might notice that your child is very moody or more angry or acting out more while they're on steroids. They also cause a little bit of weight gain because the increase your appetite.

And so children will be craving more things with like fat and sugar in them while their own steroids and could potentially gain a weight and then kids that are on them long term.

You can suppress the adrenal glands and make your body stop producing as many steroids. There are some instances where kids need steroids long-term, but they're definitely a double-edged sword.

So yeah, in terms of allergies, they don't really get those long term effects like the Adrenal Gland Suppression or Decreased Bone Density or things like that that you see when they are on longterm steroids Just a quick side note, if your child is on an inhaled steroid for asthma, these don't get absorbed super well into the body.

They mostly stay right in the airways, so they also don t tend to get a lot of these long-term side effects with those. So they are safe to be using on a regular basis for a long term steroi.

Okay, so from the allergist, they might suggest things like mast cell stabilizers. We just have one in the US. It's called chromaline sodium, and it's given as an eye drop.

And you have to start the chromalin before the allergy season starts. These are for kids with seasonal allergies that are mostly eye-related, like allergic conjunctivitis, where their eyes get red and itchy.

It takes a while, like a couple weeks for those to kick in and they have to be used regularly throughout the whole allergy season. And so we don't do a whole lot of mast cell stabilizers here.

They can get anti-IGE injections. We have one that's called omalizumab or Zolair, and that is a shot that lasts for a month. And it's just actually IgG antibodies that bind against the IgE antibodies.

And so it prevents those from sticking to the allergens and sticking the mast cells and causing all these symptoms. So the anti-IgE shots are really good.

They work really well. But they're sort of a later treatment because it is a shot. It's an injection. And they tend to be kind of expensive, and it's hard to get insurance to cover them.

So it was one of those kind later treatments, but definitely a good option if your child has tried a lot of different allergy medicines. And then allergy shots are actually small amounts of whatever your children is allergic to.

Say they're allergic cats. They use the cat allergens in water, they dilute them, then you go up in dose each week. Sometimes it is twice a week, and they get these shots in their arms until the dose gets to a certain amount and then they like make it ten times as concentrated and than they do more and more until they they got up to level where the body recognizes it no longer as foreign and is like, oh, it's okay for us to be around cats and not react to them.

The allergy shots are really good for things like bee and wasp sting allergies. Those, unfortunately, kids who are allergic to wasps and bee sting, so everyone will have a local reaction if they get stung by a bee or a waspa.

You know, it's normal to get redness, swelling, pain, all of that, because there's histamine that gets released when they sting you. But if they have a severe allergic reaction where they're getting anaphylaxis from it, and the more stings a person gets throughout their life, the most likely they are to develop an allergy to bee stangs.

So kids that get stung multiple times when their young are more likely to developing allergy it. If they ever have any severe allergy reaction to it they need an EpiPen.

And also allergy shots are really good at desensitizing for these bee and wasp stings. The allergy shot don't really work as well for food allergies. Sometimes they can.

Definitely talk to your allergist about that. And they don' really help with things like pollen or dust. But sometimes they add those things in aswell.

So it's typically more for like the more severe allergies, wasps and bee sting and then some of the environmental allergies The way that allergy testing is done is either with a skin test or a blood test.

Testing, Food Introduction, and Vaccine Reactions

So talk to your allergist about it. Allergy testing, is very accurate for things like environmental allergies. The skin prick testing it's really accurate, for like dust, dust mites, cockroaches, cats, dogs, pollen, trees, grasses, all of those kind of things.

When it comes to food allergies, Unfortunately, allergy testing is not amazing at that. And usually what we're looking for with that is a blood test. We're The trick is, in order to have those antibodies, your child has to eat just enough of that food that they develop the antibodies but not so much that the get a reaction that makes them stop eating it or makes you realize they shouldn't be eating this.

And if they avoid it completely, those anti-bodies tend to go away. So food allergy testing can be as high as 80 to 90% inaccurate when you get the results back.

I would take that into account with the bigger picture. Does your children seem to react if the eat the certain food? For babies and children that are starting foods, we usually recommend starting one food every three to five days.

You can do it more often than that, especially if you don't have a family history of any allergies. And just keep in mind that if your baby is around six months old and you're starting to feed them, and I have this all in the previous episode about feeding.

If you look back to season one, there's an episode all about starting food and babies, We go slowly because we want to know if they are reacting, what they're reacting to.

If you start multiple foods on the same day, give them three different things at once that they haven't tried, and then they get a rash, you don't know what caused that rash.

And so typically, rash is the sign that we see around 6 to 12 months of age when children are allergic to a food. Sometimes we'll see vomiting as well.

So vomiting can be a sign of allergy because histamine is also released in the gut, and when that happens, that causes vomiting, profuse vomiting. If your child vomits several times, then that can also be an allergy.

After vaccines, sometimes children will have vaccine allergies as well. And what we see with that is, again, this either like a whole body rash with the vaccine or profuse vomiting.

So vomiting multiple times after a vaccine can be a sign of an allergy. Definitely look out for those two things. Those are not normal after vaccines.

It is normal to have a local reaction after a vaccine, so local redness and swelling, even as much as the whole thigh or the upper arm that got the shot in it, can be swollen and red and itchy and hot, and that can a normal reaction from the inflammation.

but when it's a whole body rash or that vomiting, those are not normal. All right, sorry, that was a lot from a western standpoint for allergies. Now, from acupuncture.

So acupuncture can decrease overall inflammation and is really good for environmental allergies and we don't usually recommend it for anaphylactic type of allergies, it can help a little to decrease it, but Still, you need to have that emergency medicine on hand if your child does have anaphylaxis.

But yeah, acupuncture, I've seen great results with that with children and adults with allergies as well. Chiropractic also helps with overall wellness and inflammation, but doesn't specifically treat allergies, and this is one that it's not as strong as other types of things that is treats.

So I usually don't recommend chiropractic as much for allergies. From a nutrition standpoint or supplements, there's not really anything in the US that we have that's great for allergies, unfortunately, you know, just like avoiding the food they're allergic to, avoiding foods that could potentially cross-react.

And then outside the U. S.

Alternative Allergy Treatments

, they can do sublingual immune therapy, which is kind of like those allergy shots, insane principle, but instead of being a shot in arm, it's actually a sugar pellet.

that they put under your child's tongue and that has to be done every day. The problem with that is that there is a risk for a serious allergic reaction or an anaphylactic reaction with the oral immune therapy and in the U. S.

we just assume the risk to to high and so we don't have that as an option. But I know that like in Europe they do that and it's just as effective as allergy shots.

One thing to keep in mind, if your child does have sublingual immune therapy, is if they miss a dose, do not double dose them the next time. That can be very dangerous, and they're a lot more likely to react.

From a homeopathic standpoint, so the idea with homeopathy, again, not fully supported by Western science, but the ideas behind homeapathy is that like treats like.

And so if you're child is allergic to something, they would do whatever that antigen is. Now with Homeopathics Remedies, The way that they're made is that, they are so diluted out that there's none of the original antigen in there when they get it.

So, it doesn't quite work the same way as allergy shots where there is a detectable amount of allergen in their. With homeopathy, again, you can always talk to a certified classical homeopath or naturopath about that and see if they have any specific recommendations.

There may also be some other homepathic remedies that help symptomatically. with the things like the itchy eyes or the burning in the eyes, or runny nose, and things.

But because these remedies are so dilute that there's not any detectable active substance in them, they're not fully supported by Western science. So again, CCH should be able to help guide that.

From an aromatherapy standpoint, there are some essential oils that are anti-inflammatory and they can help with, if you put them in a diffuser, you could put eucalyptus or peppermint in the diffusers and that can with respiratory symptoms.

And then lavender and tea tree can sometimes be applied topically if there's some local irritation. But keep in mind that if a child is having an allergic rash or hives, that their skin tends to be more sensitive and sometimes they cause more of a reaction.

Whenever you're applying oils topically, you wanna have them in a carrier oil and you want them to be very dilute. And then also children are sometimes allergic to the carrier oils itself.

So just use with caution if you are going to use these and stop using them if they seem to make your child's rash any worse. So now on to eczema. Now exema is caused by the same process as allergies, and it just happens in the skin.

What we see in babies with exima in their first year of life is it's typically on the surfaces that rub the most, like we seen on their cheeks and the back of their arms and on there back.

where the diaper rubs, like at the edge of the diaper and on their legs. And we see it in areas that are mostly dry. So typically eczema is not found inside the Diaper area.

Wait for next week, we will be talking about diaper rashes.

What Eczema Looks Like in Babies

Yes, for diaper rashes, they're treated a little bit differently than eczema. Now, exema starts as dry skin, and in children who are over a year, the places we tend to see exima are on the flexor surfaces, so inside the elbow, like the elbows pit.

It doesn't have a great name. It's the antecubital area in medical speak. But anyway, the front of the elbows and then the back of knees also where they're rubbing.

And then also, where clothes rub that can cause eczema too. So it starts off as dry patches of skin. The first treatment for exema is keeping the skin moisturized, making sure they are drinking lots of water, but then, also using things that are like unscented moisturizers and emollients.

I like the really greasy things after a bath. If you do a plain water bath and then cover them up with something like petroleum jelly like Vaseline Aquaphor, that works super well to keep their skin really moisturized.

And then after that dry skin, the skin is itchy and when they scratch it, it rashes up. Any kind of break in the can also potentially get infected with ringworm, and I do have a ring worm in Holistic Mama's handbook.

where I talk about treatment for that, but eczema is something that we call it the itch that rashes. So it starts off as dry, itchy skin, and then it turns into a rash later.

And sometimes the rash can get really severe. It can be really pinkish or reddish. Or in children with darker skin their skin can de-pigmented from it where they have it.

it could potentially get infected either with a fungus like ringworm or with the bacterial infection like impotigo. And so those have different treatments as well.

So starting off with just the eczema, focusing on that, keeping that skin moisturized, avoiding anything scented, things that are like scended lotions, soaps, laundry detergents, dryer sheets or fabric softeners, all of these can make exima a little bit worse.

Using unscented detergents and then unsented soaps tend to help or even just washing your child with plain water can help with that. If you are getting new clothes for your children, I would wash them before putting them on your kid because that new clothing has chemicals in it that can also make eczema worse.

If you're finding it on the edges of the diaper, especially if it's pretty bad, or even if your kid is prone to a lot of diaper rashes, sometimes just changing the brand of diapers can help.

So you may experiment with different brands. I know some diapers are scented, so that can sometimes trigger that eczema as well. And then having loose fitting clothing, natural clothing like cotton can often help with eczema because it breathes a little better or bamboo is super soft and tends to help children with really sensitive skin.

The things that are synthetic or things are rough or the things which are animal hair based like wool, cashmere, mohair, those can cause a bit more exema as well.

Eczema Skin Care and Steroid Creams

After all of these types of things that are sort of like your basic symptomatic things, we will sometimes recommend steroid creams for eczema. And that's because steroids are anti-inflammatory and they do help quite a lot with ectoma.

There's an over-the-counter one called hydrocortisone. It's giving out a 1% concentration. Now, with steroide creams, you don't want to use them for more than two weeks straight.

Typically, if you need them about a week with an exima flare, If your child needs more than that, or if they need a stronger steroid cream, you should talk to a doctor about that because really, steroids do get absorbed through the skin.

They're lipophilic, which means they go through fat, so they through skin, they subcutaneous fat and they get into the bloodstream and over time can cause the side effects that you get with steroids that I had mentioned earlier.

So steroid creams are really just short-term use things and if your child's needing them really regularly talk to your doctor potentially go see an allergist about it and see if you can either get different treatments.

There are some other things that allergists can prescribe or that doctors can prescribed. Some other prescription strength creams that are non-steroids that can help also with that inflammation.

From an acupuncture standpoint, acupuncture does decrease overall inflammation and can actually help a bit with eczema. And potentially, if you see a Chinese herbalist, they might be able to recommend some poultices or something that you can put on topically to help with those flare-ups with the exima.

Keep in mind, though, herbs are plants, and so children who have things like grass and tree allergies or pollen allergies can sometimes flare up from those as well.

So talk to a pediatric acupuncturist about it. Just a reminder that pediatric Acupuncture does not use needles. They're not sticking needles into your child.

they're just using something called Shonishin, which is tapping or pressing on different points along the Acupunture channels. I do love acupuncture and feel like it is semi-effective at least with eczema.

From a chiropractic standpoint, again, chriopractic does help with overall wellness and inflammation, but doesn't treat eczema specifically and perhaps isn't as good as some of these other things for exima.

From a nutrition and supplement standpoint, you want to avoid allergenic foods, but then also anything that's inflammatory. So things like processed foods tend to be more inflammatory, excess meats can be.

Also dairy, it tends to inflammatory whether or not your child is actually allergic to it. It can still cause more inflammation in the gut, especially milk.

I would avoid drinking milk if your children has eczema or avoid letting them drink cups of milk when they're over a year of age. really water is the healthiest thing they can drink anyway.

For babies who are less than a year, babies that are on formula, sometimes we'll give them an anti-allergenic formula that's called a hydrolyzed formula.

And those formulas are pre-digested and so the carbohydrates, fats, and proteins are all broken down somewhat. Some are partially hydrolysed and some are completely hydroysed.

And they have different kind of bases to them, depending on what your child might be allergic to. So a lot of them are corn-based here in the United States.

And the hydrolyzed formulas can help quite a with eczema when it's really severe.

Alternative Eczema Treatments and Diet

Children who have like head-to-tow exema or just exima that's a really resistant to moisturizing creams and needing steroids fairly often, a lotta times for those younger babies, we will switch them over to a hydroalyzed formula.

You can talk to your doctor if you're breastfeeding and you think there might be something your baby's allergic to in the breast milk that's causing the eczema.

A lot of times we don't stop breast feeding when people have ectoma and we can consider elimination diets, but I don' want you cutting anything out until you've talked to a doctor about it because elimination diet are a big deal.

It takes several weeks for allergens to come out of your breastmilk and kids can be allergic too literally anything. So talk your your doctors first before eliminating any foods.

if you're thinking of going that route. Remember sugar is also inflammatory and some oils can be inflammatory, so any hydrogenated oils are inflammatory.

Olive oil if, you cook with it when it gets heated up, it can become inflammatory as well. So olive oil is meant more for colder foods to be eaten like a salad dressing, for example, versus cooking with it in a pan.

If you're cooking oils, things like coconut oil and avocado oil have a higher smoke point and they're less likely to become hydrogenated while you are cooking them and inflammatory.

So those are better for sauteing with in pan And things like vegetable oil, canola oil rapeseed oil those can be more inflammatory as well. So really like avocado oil and coconut oil are the ones that we recommend cooking with if you're worried about that for inflammation.

Adding in more fruits and vegetables into a diet can really help to decrease inflammation and fiber can help as well. So again, like whole fruits, veggies, whole grains, things that are minimally processed, really just a clean diet, can with inflammation, and can potentially help with eczema aswell.

And then vitamin C and vitamin D are the two vitamins that anti-inflammatory. Just a reminder that I do have an affiliate link in my show notes there at the bottom of this.

So if you wanted to click on that, you can find all these vitamins and stuff at a 10% discount through my affiliate. Homeopathy standpoint, the things that are recommended are calendula cream, which calendulia comes from marigolds and is thought to be anti-inflammatory.

And it might just be that the moisturizing cream is helping with the eczema, but calendular is fairly gentle. and tends to be helpful for this. Pine tar soap is something that can help with eczema and even hives.

When I had something called PUPS, which stands for pruritic urticarial papules and plaques of pregnancy, the P-O-P-B-E-S, PUPs is extremely itchy. It's basically just hive that happen late in pregnancy or around the time that your baby is born.

Mine happened postpartum. So I was pretty miserable. But the pine tar soap is one thing that was recommended to me by several different people and helped a little bit as well.

Pine tar seems to be anti-inflammatory, anti itch, and very gentle. And it has a pretty strong smell. It smells like pine

trees. That's something, it kind of smells, like you're out camping.

So yeah, pine tar soap is something you can try for eczema. And then the homeopathic remedies that are thought to help with exema are antimonium crudum, graphites, and sulfur.

The one that you pick is kind of based on your child's constitution. Remember that these types of homeopathy remedies are taken by mouth.

Wrap-Up and Next Episode Preview

They're not fully supported by Western science, but if you talk to a certified classical home path or CCH, or a naturopathic doctor about this, they might be able to guide you a little better as to which one might helpful for that.

Eczema is one of those things that responds fairly well to different alternative treatments. So this is on case where I would suggest talking to a Naturapath and see if they have any other suggestions.

Sometimes they can do some other types of testing to figure out what things in the environment your child might reacting to that you could potentially cut out.

And then from aromatherapy standpoint, so you can try some topical oils in a carrier oil. Remember to dilute them. And I have instructions in the Holistic Mama's Handbook on how to Dilute Oils Down in The Carrier Oiles.

But it should be very diluted because remember that essential oils can burn baby's skin. You can use dilutes lavender, chamomile, oregano, or tea tree oil, topically and these tend to be helpful overall but because they're anti-inflammatory and also oregano and tea tree are also antimicrobial and so they help with that colonization but sometimes the topical oils because, they are plant-based, sometimes they can make eczema worse.

So you can give them a try but yeah I would say if any of these treatments of course make your child worse then definitely stop them. So yeah, in the Holistic Mama's Handbook I also have information on asthma and which is related to eczema and allergies and also on nosebleeds which are sometimes related allergies as well and how to stop those from a multidisciplinary approach standpoint.

So I hope this was really helpful. Next week we're going to be talking about diaper rash and baby acne so make sure you're subscribed if you are not already.

I would love it if he'd leave me a review and I have a wonderful day. Thank you so much for listening. Thank you for listening to the Baby Manual Podcast.

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