



Address:

□ 109 N Eagle Road, Havertown, PA 19083

□ 1202 Foulk Road, Suite A, Wilmington, DE 19803

Phone: (610) 789-SKIN(7546)

www.789SKIN.com

Seborrheic Dermatitis

What Is Seborrheic Dermatitis?

Seborrheic dermatitis is a common skin condition that causes a **scaly, flaky rash** in **oil-prone areas** like the scalp and face. It may look like dandruff, redness around the nose, or flaky eyebrows. It is **not contagious**.

It often **flares and improves** over time, so many people do best with a simple long-term maintenance routine.



What Does Seborrheic Dermatitis Look Like?

Common signs include:

- **Flakes** on the scalp (“dandruff”)
- **Greasy or yellowish scale**
- **Redness or irritation** (may appear different across skin tones)
- **Itching** or tightness
- Involvement of the **scalp, eyebrows, sides of the nose, ears/behind ears, beard area, and chest**

What Causes It?

Seborrheic dermatitis is thought to be related to a combination of:

- Normal skin oil production
- Skin inflammation
- Sensitivity to a normal skin yeast (*Malassezia*) and immune response factors

Common triggers:

- Cold/dry weather
 - Stress
 - Illness
 - Harsh or fragranced hair/skin products
-

How It's Diagnosed

Diagnosis is usually made with a **skin/scalp exam** and your history. Because it can resemble other rashes (like psoriasis or eczema), seeing a dermatologist helps ensure the right plan.

Treatment Options

Treatment depends on where it is (scalp vs face/body) and how severe symptoms are.

Scalp (Dandruff / Scalp Scale)

- **Medicated dandruff shampoos** are often first-line for mild to moderate scalp disease
- If needed, prescription scalp treatments may be used briefly to calm inflammation

Face / Ears / Chest

- **Topical antifungal treatments** are a mainstay for face/body seborrheic dermatitis
- Short courses of anti-inflammatory treatments may be used during flares (your dermatologist will guide safest options)

Good news: most patients improve significantly with the right routine.

Pre-Op Instructions (Before Your Visit / Starting Treatment)

(Not surgery—these are “before you start treatment” tips.)

- Bring (or take photos of) the products you use: **shampoo, conditioner, styling products, face wash, moisturizer, “natural” oils.**

- If possible, avoid heavy scalp oils or thick styling products on the day of your exam (they can hide scale).
 - If you've tried OTC dandruff shampoos, note **which ingredients** and how often you used them.
 - If symptoms affect your face, come with **minimal makeup** if you can.
-

Post-Op Instructions (After Starting Treatment)

Scalp care

- Use medicated shampoo **exactly as directed** (frequency matters).
- Let it sit on the scalp for the recommended **contact time** before rinsing.
- Don't scratch/pick—this can worsen inflammation.

Face/body care

- Use a gentle, fragrance-free cleanser and moisturizer.
- Avoid harsh scrubs, strong acids, and alcohol-based toners unless your dermatologist approves.
- Use sunscreen daily (especially if you're using prescription anti-inflammatory creams).

Call the office if

- Painful cracking, drainage, pus, fever, or rapidly spreading redness
 - Symptoms worsening despite following the plan
 - You suspect an allergic reaction to a product (burning, swelling, or rash beyond typical areas)
-

Seborrheic Dermatitis FAQ

Is seborrheic dermatitis the same as dandruff?

Dandruff is often considered a **milder form** limited to the scalp, while seborrheic dermatitis can involve the scalp **and** areas like the face and chest.

Is it contagious?

No—seborrheic dermatitis is **not contagious**.

Why does it keep coming back?

It tends to be a **chronic condition with flares**, often triggered by stress, weather, or product irritation—so maintenance treatment is common.

Is it the same as eczema (atopic dermatitis)?

No, but they can look similar. Seborrheic dermatitis often affects **oil-prone areas** and may have **greasy scale**, while atopic dermatitis is commonly very itchy and related to skin barrier sensitivity.

How is it different from scalp psoriasis?

Both can cause flaking and redness. Psoriasis often has **thicker, drier scale** and may extend beyond the hairline. If you're unsure, a dermatologist can confirm.

Will it cause hair loss?

Seborrheic dermatitis usually does **not** cause permanent hair loss, but severe inflammation and scratching can contribute to temporary shedding.

How long until I see improvement?

Many people improve within **a few weeks**, especially with consistent shampoo/skin routines, but maintenance may be needed to prevent flares.

When should I see a dermatologist?

If flaking/itching persists despite OTC care, spreads to the face, becomes painful, or you're not sure whether it's seb derm vs psoriasis vs allergy, it's worth an evaluation.