

## Quick Reference — Skin Concerns in Down Syndrome & Recommended Products

Condition	What It Looks Like	Why It Happens	Care Tips	Workshop-Recommended Products (Brand + Active Ingredient)
Dry Skin (Xerosis)	Rough, bumpy, flaky, cracked, or peeling skin; thickened areas on elbows/knees/feet; light/dark/pink patches; may itch.	Weaker skin barrier in DS lets water escape and irritants enter; worsened by weather, water exposure, detergents, meds, family history.	Moisturize ≥2x daily (creams/ointments > lotions); apply after bathing; short lukewarm baths; mild fragrance-free cleansers; loose cotton clothing; gloves in cold; rinse/moisturize after swimming; trim nails; sun protection.	<b>CeraVe® Moisturizing Cream</b> (ceramides + hyaluronic acid)  <b>Eucerin® Advanced Repair Cream</b> (urea + ceramides)  <b>Vanicream® Moisturizing Cream</b> (gentle, fragrance-free)  <b>Aquaphor® Healing Ointment</b> (petrolatum) Petroleum jelly (100% petrolatum)
Seborrheic Dermatitis	Flaky, dry or greasy scales; white/yellow/brown flakes; rash on scalp, eyebrows, nose folds, ears, chest, back, armpits, groin; may or may not itch.	Overgrowth of normal skin yeast ( <i>Malassezia</i> ) + changes in oil production; more common in DS teens/adults; flares with stress, cold, illness.	Medicated shampoos to scalp (leave 3–5 min); rotate 2–3 actives; adjust frequency to hair type; avoid scalp hair products; gentle facial cleansing; short-term low-strength cortisone or antifungal creams for face/body.	<b>Head &amp; Shoulders®</b> (zinc pyrithione 1%)  <b>Selsun Blue®</b> (selenium sulfide 1%)  <b>Neutrogena® T/Gel</b> (coal tar)  <b>Neutrogena® T/Sal®</b> (salicylic acid 3%)  <b>Nizoral® A-D</b> (ketoconazole 1%)
Psoriasis	Red, raised patches with thick white/silvery scales (purple/brown on darker skin); common on elbows, knees, scalp; nail pitting/thickening; may itch or burn.	Immune system speeds skin cell growth; genetics + immune differences in DS; flares from infections, skin injury, stress, cold/dry weather.	Moisturize often; gentle cleansers; short lukewarm baths; protect skin from injury; treat infections promptly; stress-reduction; humidifier in dry seasons.	No specific OTC “workshop” brand list; common topicals include coal tar (e.g., Neutrogena® T/Gel®), salicylic acid (e.g., T/Sal®), vitamin D analogues (Rx), corticosteroids (Rx)
Alopecia Areata	Sudden round/oval bald patches; smooth skin or fine regrowth; can affect scalp, brows, lashes, body hair; nail pitting/ridges possible.	Autoimmune attack on hair follicles; 15x more common in DS; linked to thyroid disease; may be triggered by illness, stress, or no clear cause.	Thyroid checks; protect scalp from sun/cold; hats/scarves if desired; gentle hair care; involve person in treatment choices; emotional support.	No specific OTC “workshop” brand list; treatments are prescription-guided (e.g., topical corticosteroids, minoxidil, JAK inhibitors).
Folliculitis	Small red/pink bumps around hair follicles; may have pus/crust; common on buttocks/thighs; can form boils/abscesses.	Follicle inflammation/infection from friction, shaving, blocked pores; DS skin barrier differences may increase risk.	Antibacterial washes (leave on 3–5 min); loose clothing; avoid sharing towels/razors; shave with care; topical/oral antibiotics if needed.	<b>PanOxyl®</b> (benzoyl peroxide 4–10%).  <b>Hibiclenz®</b> (chlorhexidine 4%).  Sodium hypochlorite/bleach baths (diluted).
Hidradenitis Suppurativa (HS)	Painful deep bumps/abscesses in skin folds; may drain; can form tunnels/scars; odor possible.	Chronic inflammation of hair follicles in sweat gland areas; 7x more common in DS; worsened by friction, heat, hormones.	Annual skin checks from age 8–10; loose clothing; antibacterial washes; avoid picking; warm compresses; weight management; medical treatments from topicals to biologics.	<b>PanOxyl®</b> (benzoyl peroxide 4–10%).  <b>Hibiclenz®</b> (chlorhexidine 4%).
Fungal Infections (Tinea, Athlete's Foot, Nail Fungus)	<b>Skin:</b> red scaly ring with clear center;  <b>Scalp:</b> flaky, broken hairs, bald patches;  <b>Feet:</b> peeling, moist between toes;  <b>Nails:</b> thick, yellow, brittle	Caused by dermatophyte fungi; thrive in warm/moist areas; contagious via contact, shared items, surfaces, pets; DS immune differences may increase risk.	Don't share personal items; keep skin dry; wear sandals in public showers; change socks daily; antifungal creams for skin; oral meds for scalp/nails; medicated shampoo for scalp + contacts.	<b>Lamisil®</b> (terbinafine 1%) <b>Lotrimin®</b> (clotrimazole 1%) <b>Micatin®</b> (miconazole 2%) <b>Tinactin®</b> (tolnaftate) <b>Ketoconazole 2% shampoo (Rx)</b> <b>Selsun Blue®</b> (selenium sulfide 1%) for scalp alongside main treatment.

**Caregiver Tip:** If the exact brand isn't available where you live, ask a pharmacist for a local product with the active ingredient listed in brackets above.