Transcript Details
This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: https://reachmd.com/programs/frontlines-pediatric-skin-health/understanding-the-emotional-impact-of-pediatric-skin-disease/56678/

ReachMD
www.reachmd.com
info@reachmd.com
(866) 423-7849

Understanding the Emotional Impact of Pediatric Skin Disease

Announcer:
You're listening to *On the Frontlines of Pediatric Skin Health* on ReachMD. And now, here's your host, Dr. Steve Jackson.

Dr. Jackson:
Welcome to *On the Frontlines of Pediatric Skin Health* on ReachMD. I'm Dr. Steve Jackson, and joining me to discuss the emotional burden of pediatric skin conditions and strategies for supporting children is Dr. Cheryl Bayart. Dr. Bayart is an Associate Professor in the Departments of Pediatrics and Dermatology at the University of Cincinnati.

Dr. Bayart, thanks for being here today.

Dr. Bayart:
Thanks so much for having me.

Dr. Jackson:
To start us off, Dr. Bayart, what are some of the biggest misconceptions you see about pediatric skin disease and its impact on children?

Dr. Bayart:
It's a really good question, and I think it depends on who you're asking. If you ask insurance companies, they will tell you that a lot of pediatric skin conditions are really just of cosmetic concern and an aesthetic problem, which is not true. The vast majority of them do have a significant functional component.

Certainly, any eczema, psoriasis, and a lot of different kinds of birthmarks like epidermal nevi can be really itchy and really uncomfortable and affect kids' ability to focus in school or to get a good night's sleep. Conditions like alopecia areata, when it affects the scalp, everyone can see. When it affects the eyebrows and eyelashes, kids are getting foreign matter, like dirt and sand, in their eyes, and are at risk for corneal abrasions. Kids with vitiligo have areas of skin that are completely devoid of pigment, and those areas are extremely prone to sunburn. And if they are really chronic, they can also be prone to development of skin cancer in the future.

So I think we have to really look beyond what's visible on the skin and look at the functional impairment.

At the same time, there really is a huge emotional impact to having something on your skin and looking different from everyone else. With the skin, you can see what's happening. It's not like having a liver problem or a heart problem, where people might not see it from the outside. A lot of times, it's the first thing that people see about you before they even get a chance to meet you. And that can have a huge impact on how these children are seen and how they see the world.

Dr. Jackson:
So, knowing that, how do common conditions like eczema, alopecia, or psoriasis affect a child's emotional wellbeing over time?

Dr. Bayart:
Yeah, the impact can be huge. I think eczema and psoriasis are very similar, in that they are both usually itchy and very uncomfortable skin conditions where there is flaking of the skin, and there's areas of open skin. A lot of times, other people are concerned that the condition is contagious. Kids are excluded from certain activities or made to feel like there's something wrong with them.

As I mentioned before, the itch can really interfere with normal growth and development. If you are so itchy that you can't sleep at night,

© 2026 ReachMD

it becomes really hard to meet all of your developmental milestones. If you are using a ton of energy to build new skin all the time—because skin is basically made out of protein—you are not going to grow the way that you should. And so this really impacts every aspect of children's lives, both physically and emotionally.

Alopecia is a condition that I have seen be particularly emotionally difficult for children, especially at certain stages of development where personal appearance, blending in, and looking like everyone else is of particular importance, or where there's a lot of emphasis on physical beauty. So particularly for adolescent and teenage girls, it can be really devastating to not have hair.

Dr. Jackson:
And if we focus on the social aspect for a moment, what kinds of challenges do these children face in school or with peers?

Dr. Bayart:
So, in addition to concerns about contagiousness, kids deal with a lot of questions, and that starts even very early on: around age four or five, when kids become cognizant of their own appearance and the appearance of others. Kids get a lot of questions, like why do you have that? Why does your skin look like that? And that can make them feel singled out and self-conscious.

Parents also get a lot of questions from other parents. What happened to your child? Was your child burned? Were they in an accident? And that can be really stressful for parents as well. And I think the dynamic there can really affect the whole family.

As kids get older, sometimes kids are not very nice about physical differences, particularly if it's not something they understand. And kids do deal with bullying or not feeling comfortable in their own skin, because people are making comments and looking at them.

Dr. Jackson:
For those just tuning in, you're listening to *On the Frontlines of Pediatric Skin Health* on ReachMD. I'm Dr. Steve Jackson, and I'm speaking with Dr. Cheryl Bayart about the emotional and social impact of pediatric skin disease.

So, Dr. Bayart, with all that in mind, let's talk about how we can support children with these conditions. When you're working with patients and families, what strategies do you use to balance the emotional and the physical components of treatment?

Dr. Bayart:
I think the first step is to acknowledge that there is both a physical/medical and emotional component of treatment, acknowledge the potential impact it is having on the child, and really assess what that impact is.

I think a common mistake is looking at a child with severe disease and assuming that they are profoundly emotionally affected, or looking at a child with really mild disease and assuming that their condition does not have a significant emotional impact. The medical severity of a condition does not necessarily correspond with the emotional impact. So I think you really need to unpack that and ask the patient—and ask the family members also—how it is impacting them, and how it is impacting the entire family to help people get the support that they need.

So I will ask children, how is this affecting you? Do other kids ask about your skin? What do you say to them? This helps to assess how they are coping with it. I ask parents, are they able to stick to the care regimens that we've talked about? Is that practical for their lifestyle? Applying creams to the full body twice a day or giving kids injections at home can be really, really challenging. So I think the first step is knowing what those issues are.

Does the child need some counseling or coaching on how to interact better with their peers? Do the parents need coaching or additional social support to help the child get the treatment that they need? Does the child have depression, anxiety, or another mental health condition because of their skin condition that needs treatment? I refer lots of children for therapy. Even if I'm treating their skin condition, often the emotional component needs to be addressed in addition to the medical part.

Dr. Jackson:
Now, outside of the office, what role do parents and caregivers play in helping children cope with their skin condition, and how can we help them take on an active role in care?

Dr. Bayart:
I'm glad that you asked that. I think, as pediatric subspecialists, the child is our patient, but we also really need to care for the parent or caregiver as well to ensure the best outcome for the child. Parents do play a huge role in shaping how kids see themselves and how they see their skin condition.

For example, if a child has a really obvious birthmark, I think using a language like your special spot, or this is what makes you unique, can really help kids feel positively about that physical difference, whereas using words like ugly or obvious can make kids feel like it's something wrong and something that needs to be changed about them. I think perception and shaping perceptions is really important. I

© 2026 ReachMD

think we need to really ask the child how they feel about the condition and help them along with that.

I think parents can bring a lot of their own anxiety that skin conditions either make kids different or may be off-putting to other people. If they are nervous about it and treat the child like they can't cope with the situation, then the child will feel nervous and like they can't cope with the situation. So parents are really important in that respect.

And I think just helping with all the practical aspects of care is important, and then, at appropriate developmental stages, transitioning care to the patient themselves in a graduated manner. If you're expecting your five-year-old to put on all her creams and take all of her medicines on time, that's not fair. You're setting them up for failure. By the same token, if you have a developmentally normal child that's 16 or 17,you want to be transitioning them, as a parent, and to empowering them to be able to do all of this on their own as they become an adult.

Dr. Jackson:
And before we come to the end of our discussion, Dr. Bayart, do you have any final takeaways you'd like our audience to remember?

Dr. Bayart:
I think I'd like to reiterate that I don't think we can make assumptions about how people feel about their skin just by looking at them. And the reason I want to reiterate that is that I think it's a really easy thing to do—to just assume, this looks bad, it must be really bothersome; or this looks like nothing, it must not be bothersome. I think you really have to be curious and ask people how they feel about things, what they need, and what you can do to help to serve them best.

Dr. Jackson:
And with those comments in mind, I want to thank my guest, Dr. Cheryl Bayart, for sharing her insights on how we can support the emotional wellbeing of children with skin conditions. Dr. Bayart, it was great having you on the program.

Dr. Bayart:
Thank you so much for having me. It was really my pleasure.

Announcer:
You've been listening to *On the Frontlines of Pediatric Skin Health* on ReachMD. To access this and other episodes in our series, visit *On the Frontlines of Pediatric Skin Health* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!

© 2026 ReachMD