

Pityriasis Rosea

What is Pityriasis Rosea?

Pityriasis rosea (Pit-ih-RYE-ah-sis Ro-ZEA ... abbreviated PR) is a distinctive rash that spreads over your abdomen, back and chest. PR may occur at any age but more often in people from 10 to 35 years old. The rash lasts from six to twelve weeks and, fortunately, does not cause any serious or permanent illness.

What are the signs and symptoms of this disease?

PR usually begins with a single, one to two centimeter, oval or round *herald* patch on the chest or back. It has a salmon-colored center and dark red outline with fine scales. You may think this is a fungus like *ringworm* and apply an anti-fungal cream. Since the rash is not caused by a fungus, the patch will not go away.

The herald patch is followed one or two weeks later by scores or hundreds of similar but smaller, oval patches covering your chest, back, abdomen, arms and legs. Rarely they may appear on your face, neck, hands or feet. In the classic presentation, PR can form the pattern of a Christmas tree on your back.

You may or may not itch ... about half to three-quarters of people with PR itch, especially if they get hot ... such as after a hot shower. Less commonly you may have some fatigue, body aches or headache. The rash usually lasts from six to eight weeks but can last three months or more, sometimes disappearing and then coming back.

Your skin will not scar. Dark skinned people may have some lingering discoloration that takes months to go away. It is rare for it to recur ... less than 3% of the time.

Looking back on the illness, 70% of patients can remember some viral symptoms leading up to the rash.

What is the cause of PR?

We don't know the cause for sure, but it definitely is not a fungal or bacterial infection. It isn't an allergic reaction either. Mostly likely, PR is a viral infection though it is not very contagious as your friends and family usually don't catch it. PR is not a sign of any serious internal disease and is not dangerous during pregnancy.

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How is PR diagnosed?

The rash of PR is very distinctive so your doctor will usually make the diagnosis by just looking at it. The rash can look different from person to person though. Occasionally, your doctor may order a blood test for syphilis, scrape the skin to look for fungus, or take a sample from one of the spots (skin biopsy).

What is the treatment?

There is no cure and no treatment is necessary. Be reassured that the condition does go away on its own without causing any serious problems ... it just takes awhile. There are no treatments to make it go away faster, just treatments to help with the itch.

If you itch remember that heat makes itching worse. Take lukewarm rather than hot baths and avoid strenuous activity. Apply moisturizing creams, skin lubricants, anti-itch creams (calamine lotion or over-the-counter corticosteroid creams) or use bath oils or Aveeno Oatmeal bath. Take Benadryl at night if the itch prevents sleep. The doctor may prescribe a prescription anti-itch pill or corticosteroid cream.

Moderate sun exposure may help. In severe cases, ultraviolet light treatments by a dermatologist may help. Recently, both the antiviral drug Famvir and the antibiotic erythromycin have been claimed to produce healing in one to two weeks.

Important Points

- Though the rash may look bad
- All the lesions will go away and your skin will look normal
- You are not contagious.
- Go about your normal activities.
- Treat the itch if necessary.