

Pityriasis Rosea

Pityriasis rosea is a skin rash that can occur at any age, but is most common in people aged 10–35 years. The rash is thought to be caused by a virus, and is more common at certain times of the year, particularly in autumn and spring. The rash usually starts with a large scaled spot, then clusters of smaller patches tend to appear. The rash typically lasts for 6–8 weeks and does not leave any permanent scars or marks.

What does pityriasis rosea look like?

The first sign of pityriasis rosea is a large single spot, known as a 'herald patch' or 'mother patch'. This patch is usually scaly and brown, pink or reddish in colour. After several days you will start to see a fine rash of smaller, oval-shaped spots on the body, most commonly on the upper body, arms and legs. Spots can also appear on the neck and rarely on the face. The rash may be itchy. You may notice that the spots spread out in a branch-like pattern on the back or trunk (often called a 'Christmas tree' or 'evergreen tree' pattern). Sometimes the spots seem to follow the ribs in lines. If you have pityriasis rosea you may experience other symptoms such as tiredness and aching.

Treatment

Pityriasis rosea usually goes away on its own without treatment. You will probably have the rash for about 6–8 weeks, but some people have it for shorter or longer periods.

There is no treatment that can speed recovery, but your dermatologist may prescribe medication, cream or special light treatments if you find the itching is hard to tolerate.

What causes pityriasis rosea?

Pityriasis rosea is thought to be caused by a viral infection. It doesn't seem to be highly contagious. Although it may occur in more than one person in your household at the same time, it is not thought to spread directly from one person to another. Once the rash has healed it is uncommon for it to recur.

How is pityriasis rosea diagnosed?

Pityriasis rosea is usually diagnosed by your dermatologist. Diagnosis is based on the appearance of the rash, but sometimes it may look like other conditions, such as ringworm, eczema or psoriasis. Your dermatologist may order special tests to confirm the diagnosis, for example a blood test or a small scraping of affected skin (skin biopsy) to examine under a microscope.

What else can I do about pityriasis rosea?

If you have pityriasis rosea it may also be helpful if you:

- Avoid using soap on the skin (this can irritate the affected areas).
- Use lukewarm water when having a bath or shower.
- Try to avoid becoming overheated (this may make the rash temporarily worse).
- Use mild, unscented moisturising creams on the skin.

Some cases of pityriasis rosea may respond to ultraviolet light, so mild sunshine may be beneficial, as long as you do not allow the skin to burn or spend too much time in the sun (early morning or late afternoon are the best times).