

# Miscellaneous Rashes

- Pityriasis alba and Keratosis pilaris
- Phytophotodermatitis
- Terra firme forme dermatosis and mimics
- Pyogenic granuloma
- Liplicker's dermatitis
- Café au lait spots
- Diaper rashes
- Common neonatal skin findings (slides 36-47)

# Pityriasis alba and Keratosis pilaris

- Pityriasis alba
  - Commonly children 3-16yo with h/o atopy
  - Hypopigmented macules and patches with a fine scale
    - May be erythematous initially
    - Face (esp cheeks), arms, upper trunk
    - More noticeable in summer because surrounding skin tans
  - Low-potency topical steroids, emollients, sunscreen
  - Self-resolves but over a year, and may recur
- Keratosis pilaris
  - Keratin accumulation in hair follicles
  - Associated with atopy and ichthyosis
  - Goosebump or chicken-skin appearance
    - Extensor upper arms and thighs
  - Worse in winter
  - Exfoliate, moisturize



[Source: DFTB Skin Deep](#)



[https://commons.wikimedia.org/wiki/File:Keratosis\\_pilaris\\_\(moderate\).jpg](https://commons.wikimedia.org/wiki/File:Keratosis_pilaris_(moderate).jpg)

# Phytophotodermatitis

- Phyto + photo + dermatitis = Plant + sun → rash
- Furanocoumarins in plants react with UVA rays
  - “Lime disease”
  - Also: Fig, celery, parsnip, parsley, lemons, grapefruit, bergamot orange
- Shape of rash depends on how the plant sap/juice was distributed on the skin
  - Drip marks, handprint, spatters and streaks
- Red, brown, flat or blistered
- Rash typically seen 24-48 hours after exposure
- Symptomatic treatment with cool compresses, analgesics, topical steroids & anti-itch cream if itchy; avoid additional sun exposure
- Peaks 48-72 hours, self-resolves
- May be mistaken for: burn, abuse, cellulitis



[This and more images from wikidoc.org](https://www.wikidoc.org)



# Terra firme forme dermatosis

- Brown-gray velvety hyperpigmented patches or plaques that resemble dirt
  - Doesn't come off with soap & water
- Most commonly on the neck; can be face, trunk, ankles, other areas
- Disorder of keratinization causing delayed maturation of keratinocytes and retention of melanin
  - NOT poor hygiene
- Mainly children and adolescents
- Removed by wiping with 70% isopropyl alcohol pads – both diagnostic and therapeutic!



<https://www.pcds.org.uk/clinical-guidance>



Next slide for mimics

## Index



### **Acanthosis Nigricans**

- Dark, velvety, thickened hyperkeratotic skin
- Nape & sides of neck, axillae, inner thighs
- Associated with obesity, metabolic syndrome

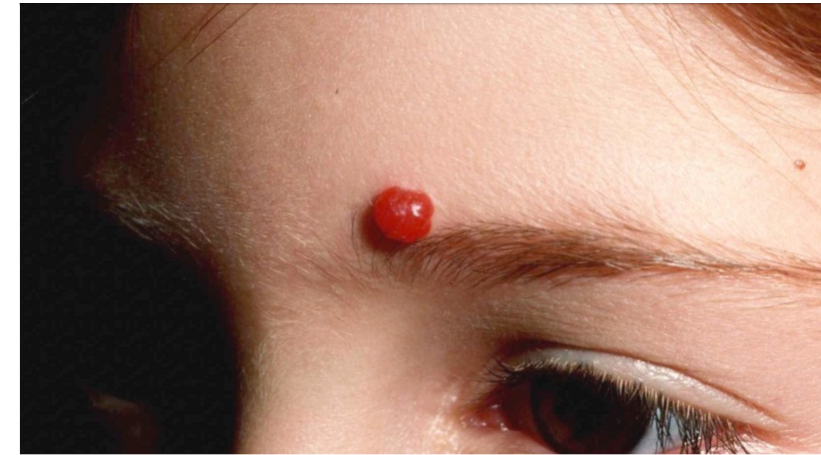


### **Atopic “dirty neck”**

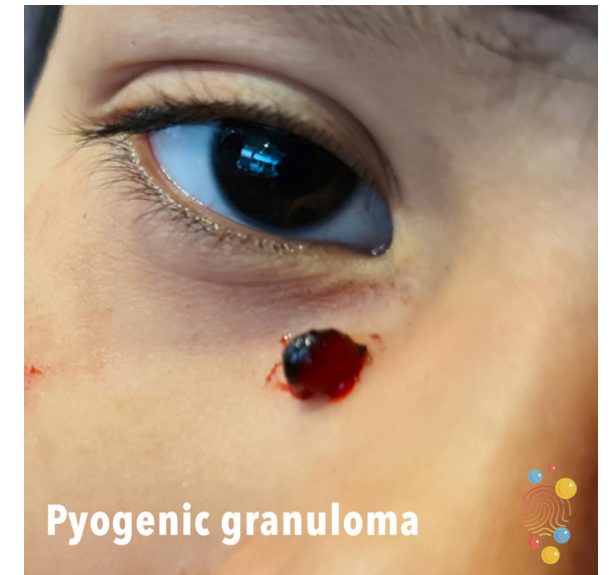
- Reticulate pigmentation in patients with atopic dermatitis
- Adolescents, peak in young adults
- More common in Asians

# Pyogenic granuloma

- All ages but common in children, peak 2<sup>nd</sup> & 3<sup>rd</sup> decades of life
- Overgrowth of vessels: lobular capillary hemangioma
- Small red papules that grows over weeks to months
  - Usually solitary
  - May become pedunculated
  - Head, neck, hands, feet, upper torso
    - May occur on the mucosa
  - Associated with minor trauma, pregnancy, retinoids
- May bleed when traumatized
- Refer for surgical excision



<http://www.remington-laser.ca/>



# Liplicker's dermatitis

- Usually dry winter months, child develops habit of licking chapped lips
- Most common in preschool and early school age
- Lip balm addiction can be similar to liplicker's dermatitis → vicious cycle of dry chapped lips, patient applies lip balm to treat, dermatitis develops in reaction to lip balm, patient applies more lip balm
- Must convince patient that the rash is due to lip-licking or lip balm
- Stop the offending activity
- Apply a mild topical corticosteroid
- Apply a bland emollient such as Vaseline (reminder not to lick)
- Encourage hydration and moisturization through drinking sufficient water, using a humidifier
- Treat any nasal congestion or other symptoms leading to mouth breathing



[https://commons.wikimedia.org/wiki/File:Lip\\_licker%27s\\_dermatitis.jpg](https://commons.wikimedia.org/wiki/File:Lip_licker%27s_dermatitis.jpg)

# Café au lait spots

- AKA Café au lait macules (CALMs)
- Uniformly pigmented light brown (color of coffee with milk) macules
- Up to 15% of the population has 1-3 macules
- Present at birth or first appear in infancy (may be difficult to see in neonates)
  - May continue to enlarge / darken during childhood
  - Black > Hispanic > White
- Solitary smooth-edged = no consequence except cosmetic
- Consider neurofibromatosis if multiple
- Consider McCune-Albright syndrome if “Coast of Maine” + precocious puberty + fibrous bone dysplasia



[https://www.blackandbrownskin.co.uk/abdomen/cafe-au-lait-neurofibromatosis-type-11#google\\_vignette](https://www.blackandbrownskin.co.uk/abdomen/cafe-au-lait-neurofibromatosis-type-11#google_vignette)

Video differentiating “Coast of California” from “Coast of Maine” café au lait macules