KERATOSIS PILARIS

What is the aim of this leaflet?

This leaflet has been written to help you understand more about keratosis pilaris. It tells you what it is, what causes it, what can be done about it, and where you can find out more about it.

What is keratosis pilaris?

Keratosis pilaris is a very common and completely harmless skin condition. In the population as a whole, keratosis pilaris may affect as many as one person in three. Its name gives some idea of what it is; ‘keratosis’ means that there is too much keratin, which makes up the tough horny outer layer of the skin, while ‘pilaris’ comes from the Latin for hair (pilus). In keratosis pilaris, many small (1 to 2 mm across) horny plugs can be seen blocking the hair follicles on the upper and outer parts of the arms and thighs. This can look like goose bumps, but feels slightly rough.

What causes keratosis pilaris?

Keratosis pilaris is an inherited skin condition, running strongly in many families, sometimes with a dry skin condition (such as ichthyosis). The way it is inherited varies from family to family, but it often fits into an autosomal dominant pattern; this means that there will be a 1 in 2 chance that each child of an affected parent will inherit the condition. Keratosis pilaris appears when extra keratin accumulates in the hair follicles. This is usually in childhood, and most obvious during adolescence, often clearly in adulthood. For reasons not fully understood the condition seems to be better in the summer than in the winter. Keratosis pilaris is harmless, and is not infectious.

Is keratosis pilaris hereditary?

Yes, see above.
What are the symptoms of keratosis pilaris?

Some people find their keratosis pilaris looks unattractive. The skin feels rough or spiky, as though it has permanent goose bumps. Occasionally keratosis pilaris is itchy.

What does keratosis pilaris look like?

The groups of small spiky bumps are most common on the backs of the upper arms and on the fronts of the thighs. Sometimes keratosis pilaris also affects the back and chest and, in less common forms, the face and eyebrows as well. Some redness may appear around the small spiky bumps.

How will keratosis pilaris be diagnosed?

There are no specific tests for keratosis pilaris; however, your doctor will recognise it easily. A biopsy is seldom needed.

Can keratosis pilaris be cured?

No, but often it does clear up during adult life.

How can keratosis pilaris be treated?

No treatment clears keratosis pilaris satisfactorily, and ordinary emollients (moisturisers) are of limited benefit. Creams containing salicylic acid, lactic acid and/or urea are sometimes felt to be more effective, and can be purchased over the counter or obtained under prescription. In many cases it may be best to wait for the problem to improve on its own.

Self Care (What can I do?)

General measures to reduce skin dryness may help:

- Use mild soaps
- Apply emollients (moisturisers) frequently
- Have tepid showers rather than hot baths
- The use of an exfoliator may sometimes be of help
Where can I get more information about keratosis pilaris?

Web links to detailed leaflets:

www.emedicine.com/derm/topic211.htm
http://www.dermnetnz.org/acne/keratosis-pilaris.html

This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: its contents, however, may occasionally differ from the advice given to you by your doctor.

This leaflet has been assessed for readability by the British Association of Dermatologists’ Patient Information Lay Review Panel

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