PITYRIASIS ALBA

What are the aims of this leaflet?

This leaflet has been written to help you understand more about pityriasis alba. 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 pityriasis alba?

Pityriasis alba is a common skin complaint of children and young adults. It appears as pink scaly patches which later leave pale areas on the skin. These pale areas are more noticeable in people with dark skin, and more pronounced after exposure to the sun and the tanning of the non-affected skin. Pityriasis means skin scaling and alba means white.

What causes pityriasis alba?

The cause is unknown. It is thought to be due to a minor form of inflammation in the skin, related to eczema, but it can occur in people who have no history of eczema at all. It is not contagious.

Is pityriasis alba hereditary?

No.

What are the symptoms of pityriasis alba?

The rash can be mildly itchy but usually causes no problems. Sometimes it can be dry. It often goes unnoticed when it first starts, but it is the loss of pigment that triggers people to seek medical advice.

What does pityriasis alba look like?
It starts as rounded or oval pink rough patches of skin that fade to leave areas with reduced pigment. The most commonly affected areas are the cheeks, chin and skin around the mouth. It can also affect the trunk, arms and legs. The pale areas are often more noticeable after sun exposure, particularly in people with darker skin, as these areas don’t tan as usual.

**How is pityriasis alba diagnosed?**

This condition is usually diagnosed by its appearance and tests are not needed.

**Can pityriasis alba be cured?**

Pityriasis alba usually resolves spontaneously, and the skin colour gradually returns back to normal with no scarring. However, it may persist for a few years, and may come and go during this period, particularly in summer when the patches become prominent due to the tanning of non-affected skin.

**How can pityriasis alba be treated?**

Medical treatment is not needed unless the skin is uncomfortable from itching. The dryness can be helped by using a moisturiser and avoiding soap. If the patches are red or itchy, a mild steroid cream (hydrocortisone) can be applied for a short period to improve symptoms. Sunscreens in summer may prevent the patches becoming more noticeable by reducing the tanning of the non-affected skin.

**Self care (What can I do?)**

- Use moisturisers for the dryness
- Do not use soap
- Avoid sun especially in summer and in holiday by using high sunscreen products (no less than 30 SPF)

**Where can I get more information about pityriasis alba?**

*Web links to detailed leaflets:*

http://www.dermnetnz.org/dermatitis/pityriasis-alba.html
http://www.skinsight.com/child/pityriasisAlba.htm

For details of source materials used please contact the Clinical Standards Unit (clinicalstandards@bad.org.uk).
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: individual patient circumstances may differ, which might alter both the advice and course of therapy 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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