

What is keratosis pilaris?

Keratosis pilaris (KP) is a common bumpy rash. It is usually found on the outer upper arms, upper thighs, and cheeks. It looks like small bumps that are skin colored or red. The bumps can feel like "goose bumps" or sand paper. KP can be itchy for some people, but usually there are no symptoms. The skin can become irritated if it is very dry or if the bumps are picked or scratched.

KP is caused by a plug of dead skin cells around a hair follicle. It worsens in the winter when the weather is dry. KP can be confused with eczema, acne, or infections, but it is *not* any of these.

Some people with KP have a lot of redness in their skin which may worsen with heat or emotion (flushing). This is called keratosis pilaris rubra.

▼ WHO GETS KERATOSIS PILARIS?

KP is a genetic condition. That means that it can be passed on from one or both parents. There are often several people in a family that have KP. Children and teenagers who have KP can also have dry skin or eczema. KP may continue into adulthood but usually improves with age.

▼ HOW IS KERATOSIS PILARIS DIAGNOSED?

A doctor can diagnose keratosis pilaris simply by looking at your child's skin and asking about their medical history.

HOW IS KERATOSIS PILARIS TREATED?

KP is a harmless condition that usually does not need to be treated. However, it can be itchy and last a long time. If KP is bothersome, you can treat it. Unfortunately, no treatment can "cure" KP. After stopping treatment, the rash usually comes back.

The following may improve how the skin looks:



Moisturizers:

Most patients improve with a daily moisturizing cream. Moisturizers help with dry skin but will probably not clear the bumps.

TREATMENT (CONT.)

"Peeling" creams:

Your doctor may recommend a "peeling" cream, but these can be irritating and are not recommended for small children. These creams help open the plugged follicles. This can improve how the rash looks or give the skin a smoother feel. The most commonly used creams are over-the-counter urea preparations, lactic acid creams, glycolic creams, salicylic acid creams, and topical retinoids. Medicated washes can also be used.

Mild steroid creams or non-steroidal anti-inflammatory creams:

Some children have redness or itching associated with the bumps, which may improve with mild cortisone creams or newer non-steroidal anti-inflammatory creams. These should not be used continuously.

Laser: Laser treatment has been used to treat severe cases of KP, but it is mainly helpful in reducing the redness of the skin, not the bumpiness.

Not everyone responds to treatment the same way and the bumps may remain despite treatment. Exfoliating when bathing may sometimes be helpful, but may be irritating, so be gentle.

YOUR DOCTOR RECOMMENDS THE FOLLOWING TREAT	MENTS:
Moisturizers:	
Peeling creams:	
Other:	



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