



Pityriasis Rosea

What is pityriasis rosea?

- **Pityriasis rosea** is a **common, harmless skin rash** seen most often in children, teens, and young adults.
- It is **not caused by a fungus, bacteria, or parasite**.
- The exact cause is unknown, but it is thought to be related to a **viral trigger**.
- The rash is **self-limited** and usually goes away on its own.

What does it look like?

- Often starts with a **single larger patch** called a “*herald patch*”
- Oval, pink or salmon-colored with fine scaling
- Days to weeks later, **smaller oval patches** appear on the chest, back, or abdomen
- Rash may follow skin lines, creating a “**Christmas tree**” **pattern** on the back
- Color may appear: Pink or red on lighter skin or Brown, purple, or gray on darker skin
- May be **mildly itchy**, especially with heat or sweating. Usually **not painful**
- Reference pictures can be found at KidsHealth.org or by scanning



How did they get it?

- Pityriasis rosea is **not contagious** and does **not spread from person to person**.
- It is thought to be triggered by a **mild viral infection** that was **present 1-2 weeks before the rash started**.
- The virus may have caused **no symptoms** or only mild symptoms such as cold symptoms, headache, fatigue, or sore throat.
- Most children are otherwise healthy and feel well.

Preventing the Spread

- **No special precautions are needed**
- Pityriasis rosea **does not spread** to siblings, classmates, or caregivers
- Children may **continue school, daycare, sports, and activities**
- No treatment is required before returning

How is it treated?

- Treatment focuses on **comfort**, since the rash resolves on its own
- The rash usually lasts **4–8 weeks**, sometimes longer
- Helpful options may include:
 - Moisturizers to reduce dryness
 - Gentle, fragrance-free soaps
 - Short, lukewarm baths or showers
 - Itching medications such as **Cetirizine (Zyrtec)** or low-strength topical steroids **such as 1% Hydrocortisone ointment**

Name	Strengths	Dose	Notes
Zyrtec (cetirizine)	Dissolve Tab: 10 mg Liquid: 1 mg/mL Swallow: 10 mg	6-12 months: 2.5 mg/day (2.5 mL liquid) 12 months- 5 years: 2.5 to 5mg/day (2.5-5mL liquid) 6 and older: 5 to 10 mg/day (5-10 mL liquid or 1 of 10 mg dissolve tab or swallow tab)	Can be sedating (10% of population).

- **Antifungal creams are not helpful**
- Antibiotics are not needed

When should I call PAA?

- The rash is **very itchy** and not improving with comfort measures
- The rash lasts **longer than 10–12 weeks**
- The rash involves the **face**, or looks unusual
- There is **fever**, pain, or signs of infection
- You are worried or are unsure whether the rash could be something else