

keratosis pilaris

Keratosis pilaris is a common skin condition that appears on your skin as tiny bumps. Some people say that these bumps look like goosebumps. Many people also mistake these bumps for small pimples. These small bumps on the skin are actually dead skin cells that clog up a pore.

These lumps appear most often on the upper arms and front of your thighs. Kids might have these bumps on their cheeks as well.

Keratosis pilaris is harmless and not contagious. If the itch and appearance of these bumps bothers you, you can receive treatment. Treatment can calm the symptoms and help you see clearer skin. Treating the dryness of your skin also helps. Dry skin makes the bumps more noticeable. Many people with keratosis pilaris say the bumps clear during the summer, but return in the winter. If you live in a dry climate or swim in a pool a lot, you may see these bumps year round.

signs and symptoms:

This common skin condition causes tiny bumps that can:

- Feel rough and dry like sandpaper
- Look like goosebumps
- Be more noticeable in winter or dry climates
- Itch
- Appear in different colors, including:
 - White, red and pinkish purple on light skin
 - Brownish black on darker skin

Some people have a few flesh colored bumps, but most have noticeable bumps that look like pimples or a rash.

where it appears:

This condition can appear anywhere on your skin, except on the palms of your hands and soles of your feet. Bumps on your arms are the most common. Children see bumps appear mostly on upper arms, front of thighs and cheeks. Teens



and adults see bumps appear mostly on upper arms, front of thighs and buttocks.

Some people develop so many bumps that the bumps extend to their lower legs and even forearms.

who gets keratosis pilaris?

Anyone can get it. For most people it starts either before 2 years of age or during their teens. Fewer adults have it because it can eventually fade or completely disappear by late childhood or teens. Hormones may cause another flare-up around puberty. When it develops in the teen years, it usually clears by one's mid-twenties. Women are more likely to have this.

what increases risk of getting keratosis pilaris?

You are likely to develop this if you have one or more of the following:

- Close blood-related family members who have keratosis pilaris
- Asthma
- Dry skin
- Eczema
- Excess body weight, which makes you overweight or obese
- Hay fever
- Ichthyosis vulgaris (skin condition that causes very dry skin)
- Melanoma

diagnosing and treating keratosis pilaris?

A doctor will look closely at your skin to see if there are signs of keratosis pilaris. If your skin is itchy and dry your doctor can come up with a plan to help.

how to shrink the bumpy appearance:

To reduce the bumps and improve your skin's texture, your doctor may suggest exfoliating or removing dead skin cells from the surface of your skin. You can do this by gently rubbing with a wash cloth. Be careful not to rub too hard as this can make the bumpy appearance worse.

Your doctor may also prescribe you medicine that contains the following to remove dead skin cells:

- Alpha hydroxyl acid
- Glycolic acid
- Lactic acid
- A retinoid (adapalene, retinol, tazarotene, tretinoin)
- Salicylic acid
- Urea

for best results when using a medicine to exfoliate your skin:

- Use the exact amount your doctor recommends
- Apply it only as often as your doctor recommends (do not go overboard)
- Stop using the medicine for a few days if your skin becomes dry or irritated

preventing flare-ups:

Most times, this skin condition will flare up or start showing a rash when the skin becomes dry. To stop this from happening, many people apply a moisturizer.

Below is a list of actions to think about to prevent flare ups:

- Take short showers/baths with warm water instead of hot. Limit bathing to once a day.
- Use a mild cleanser instead of bar soap.
- Skip self-tanner. It tends to make the bumps more obvious.
- Plug in a humidifier when the air feels dry

key facts about treatment:

- Clearing takes time. If you don't see change after following your treatment plan for four to six weeks, tell your doctor.
- Some patients need to try a few different treatments before they find one that works.
- To continue seeing results, you will need a maintenance plan.

tips for self-care:

1. Exfoliate gently: when you clean your skin, you remove dead skin cells from the surface. You can rub off these dead cells gently with a loofah, buff puff, or rough washcloth. Avoid scrubbing your skin too hard because this irritates the skin and can worsen your condition.
2. Apply a keratolytic: A keratolytic is a skin care product that helps get rid of extra dead skin cells. Apply it after cleaning your skin.

3. Slather on moisturizer: Using a keratolytic dries the skin, so apply a moisturizer afterwards. Dermatologists recommend using an oil-free cream or ointment to help prevent clogged pores. For best results from a moisturizer or lotion, apply within five minutes after every shower or bath when your skin is wet. You can also use it when your skin feels dry. In total, use it at least two or three times a day.