Rash around the mouth, nose or eyes? It could be perioral dermatitis

By Katherine McDonald and Dr. Nordau Kanigsberg

Perioral dermatitis is a rash that appears around the mouth (most often), the folds of the nose and occasionally the evelids. The rash is formed of groups of tiny red bumps resembling little blisters or pustules. The immediate skin bordering the lips, nostrils and eyelid margins is usually unaffected and looks paler than the affected skin. In addition to the tiny red bumps, some people have dry and flaky skin. Individuals with perioral dermatitis occasionally feel a burning sensation or an itch in the affected area. In more severe cases, the bumps can be larger and form clusters. Those who develop perioral dermatitis are usually between 15 and 45 years old, but it can be seen in children. Girls and women are more likely to be affected by the condition (90 per cent of cases).

Diagnosis and risk factors

There are no specific tests for diagnosing perioral dermatitis because the clinical presentation is very typical and easy to recognize. The exact cause of the condition is unknown, but possible factors include a weakened skin barrier, activation of the body's immune system or an imbalance in the good (microflora) and bad bacteria on the face. The most important triggers of perioral dermatitis include steroids (creams, nasal sprays, oral steroids or puffers) and fluorides in toothpaste. Several other triggers have also been reported by patients (e.g., hormonal changes and use of makeup, synthetic sunscreens and face products containing chemical irritants), although there isn't much research-based evidence for these.

Treatment

Mild perioral dermatitis will usually clear up in a few weeks, if triggers are avoided. Topical therapy (i.e., erythromycin, clindamycin, pimecrolimus, tacrolimus or azelaic acid) can be used to treat mild perioral dermatitis. The evidence for metronidazole cream is weak, and this is therefore not an ideal treatment option.

Tetracycline antibiotics are the most effective treatment for perioral dermatitis. However, erythromycin is effective in children. If antibiotics prove to be ineffective then you might be prescribed oral low-dose isotretinoin.

Emotional and psychological impact

Because of its location on the face, perioral dermatitis can be difficult to hide and therefore a very distressing condition. If you have this condition then you might feel embarrassed and want to hide away when the rash flares. To minimize the emotional impact, try to recognize the condition early, avoid triggers, and speak openly and honestly with your physician.

Katherine McDonald, BScH, is a secondyear medical student at the University of Ottawa. She is an executive of the Dermatology and Pediatric Interest Groups, and a research assistant at the Children's Hospital of Eastern Ontario.

Nordau Kanigsberg, MD, FRCPC,

has a private dermatology practice in Ottawa as well as teaching clinics at the Ottawa Hospital and Children's Hospital of Eastern Ontario.

TIPS to reduce flares

- Avoid using corticosteroid creams on your face.**
- Use fluoride-free toothpaste.**
- If using fluorinated toothpaste, cleanse around the mouth after brushing.*
- Avoid applying foundation or concealer directly over the affected area.*
- ✓ Use gentle face products (i.e., free from sodium lauryl sulfate).*
- ✓ Use a physical-blocker (as opposed to a chemical) sunscreen.*
- If you have a rash around the eyelids, avoid eye makeup entirely.*
- Stay away from internet remedies.*
- Try not to scratch or pick at the rash.*
- Avoid exfoliating the flaky skin (aggravating).*

(**Good evidence, *patient feedback [unscientific])