



PRURITIC URTICARIAL PAPULES AND PLAGUES DURING PREGNANCY (PUPPP)

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ABSTRACT During pregnancy the common skin conditions can be divided into three main categories: Hormones related skin conditions, pre-existing skin conditions and pregnancy specific skin conditions. Hormones related skin conditions during pregnancy includes striae gravidarum (stretch marks), hyper pigmentation and some vascular changes. Pre existing skin conditions which are common during pregnancy includes psoriasis, fungal infections, cutaneous tumors and atopic dermatitis. Pregnancy specific skin conditions includes pruritic Urticarial Papules and Plaques during pregnancy (PUPPP), intrahepatic cholestasis of pregnancy, pruritic folliculitis of pregnancy, prurigo of pregnancy and impetigo herpetiformis. Among all of them the most common is PUPPP.

KEYWORDS :

INTRODUCTION:

“Pruritic Urticarial Papules and Plaques during Pregnancy i.e PUPPP is also called as *polymorphic eruption of pregnancy (PEP)*. It is the most common pruritic dermatoses which is being observed in pregnant women. It is a chronic condition in which some women experiences hives like rashes which usually begins from stomach and later on spreads to feets, legs, arms, chests and neck.”¹



EPIDEMIOLOGY

It occurs in 1 out of 160 pregnancies. The condition may be less common in black population.^{2,3}

ETIOLOGY

The exact etiology of PUPPP is still unknown. Some proposed causes are listed below:

- hormonal imbalances, placental products and damage to connective tissues by converting non antigenic molecules to antigenic one.
- Multiple gestation pregnancies(14% in triplet & 2.9% in twin pregnancy).
- Increased maternal weight gain during pregnancy.
- Skin stretching (distension) which is more common in mothers who are having large fundal height.^{4,5,6,7}

RISK FACTORS

- Maternal hypertension
- Being Caucasian
- First pregnancy
- Multiple pregnancies
- High weight gain in pregnancy¹⁶

OTHERS NAME OF PUPPP

- Bourne's toxemic rash of pregnancy
- Toxic erythema of pregnancy

- Polymorphic eruption of pregnancy
- Nurse's late onset prurigo¹⁶

SIGN & SYMPTOMS

The condition occurs most frequently in last trimester of pregnancy. The condition is very annoying for the patient due to itching but it is not having any long term side effect or risk to mother as well as to unborn child. The eruption initially occurs on abdomen and slower and later on extend to legs, buttocks, back, arms and breasts. Usually the rash won't spread higher than breasts. The rash of PUPPP usually very itchy, especially at night. Along with the growing belly, it the ability of the mother to get a good sound sleep and rest at night.⁸

Face, scalp, mucous membrane (Mouth and genital area) are very rarely affected. sometimes very small blisters are present, which when scratched straw coloured fluid may leak out and form the crust.¹⁴

CAN WOMEN WITH PUPPP BREASTFEED?

Yes, breastfeeding does not appear to affect PUPPP. It is always safe to breastfeed the baby even when then mother is on steroids as only very tiny amount of steroids gets into breast milk.¹⁴

DIAGNOSIS AND ETIOPATHOGENESIS

PUPPP lacks specific histologic features but serologic tests may show elevated level of serum IgE. It has been found that PUPPP and ICP (Intrahepatic cholestasis during pregnancy) are closely related to each other.⁹

INTERESTING STAT

The women's who experience PUPPP have one thing very common that they are going to deliver a male baby as according to some experts it is believed to be attributed to some hormones from the male fetus.¹⁰

CAN WE PREVENT PUPPP?

Sadly, no. there is nothing we can do to prevent the condition. But the itch does clear within a couple of weeks post delivery.¹⁰

TREATMENT:

PUPPP is the skin condition which does not carry any fetal risk. They resolve usually in early post partum period.^{11,12} symptomatic relief typically requires moderately potent topical steroids and oral antihistamines which are usually safe during pregnancy.² cooling baths and antipruritic topical medications such as 1-2% menthol with aqueous cream are useful with pruritus. Mild cases are usually treated with the application of topical moisturizing creams and emollient ointments. Severe or more aggressive cases are being treated with class I or II Corticosteroid creams and oral corticosteroids.¹³

SOME HOME REMEDIES

Following home remedies are found to be helpful in taking care of PUPPP rash at home:

- Apply Coconut oil to the rash twice daily.
- Drink two cups of Nettle or Dandelion tea
- Take two tablespoons of Flaxseed oil in a cup of milk.

- Use Pine Tar Soap with shower each time (With warm water)
- Apply Olive oil to wet skin and then pet dry.
- Rub a Banana peel to the rash a few times a day
- Make a paste of corn starch and apply to the rash¹⁷

PROGNOSIS

PUPPP generally clears within days to weeks after the baby is delivered, but in some cases, it may took 1 month of postnatal period. The condition usually does not reoccur in future pregnancies.¹⁵

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