



Dermatoses of pregnancy: Nomenclature, misnomers, and myths



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Abstract The most recent reclassification of dermatoses of pregnancy includes polymorphic eruption of pregnancy, atopic eruption of pregnancy, and pemphigoid gestationis; intrahepatic cholestasis of pregnancy, strictly not a dermatosis, was included in specific dermatoses of pregnancy for working purposes. Another dermatosis, pustular psoriasis of pregnancy, could be included for similar reasons. The nomenclature of these pregnancy-specific eruptions has been revised several times, generating potential confusion among practitioners. Clouding the picture further are misnomers that have been used to describe dermatoses of pregnancy. In addition, several cutaneous conditions that are associated with, but not specific to, pregnancy, have been misunderstood, which has resulted in certain myths among patients and physicians. In this contribution, we describe how the nomenclature of each dermatosis of pregnancy has evolved to fit the current classification scheme. We then identify several misnomers that have generated confusion within the scheme. Finally, we debunk several myths that have developed around cutaneous conditions outside of this scheme, in both mother and newborn.

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Introduction

The four well-established dermatoses of pregnancy are polymorphic eruption of pregnancy (PEP), atopic eruption of pregnancy (AEP), pemphigoid gestationis (PG), and intrahepatic cholestasis of pregnancy (ICP) (Table 1). A potential fifth dermatosis, pustular psoriasis of pregnancy (PPP), was formerly part of the original categorization of the dermatoses

* Corresponding author. Tel.: +1 650 934 7676. E-mail address: jemurase@gmail.com (J.E. Murase). of pregnancy but was dropped from the scheme by Holmes and Black in 1983 (Table 2)²; however, some authors still consider PPP as another disease within the current scheme. ^{1,3,4} The nomenclature and classification system of these pregnancy-specific eruptions, particularly PEP, AEP, and PPP, have been revised several times, generating potential confusion among practitioners. Generating further confusion are several misnomers, historic and modern, that have been used to describe dermatoses of pregnancy.

Many factors contribute to the paucity of large prospective studies on dermatoses of pregnancy. This lack of solid data on the nature of pregnancy dermatoses has increased confusion

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Table 1	Classification schemes of specific dermatoses of	
nregnancy		

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Author	Year	Evolution of the classification scheme of specific dermatoses of pregnancy	
Holmes and Black	1983	PG, PEP, PP, PFP	
Shornick	1998	PG, PEP, PP*, ICP	
Ambros-Rudolph et al.	2006	AEP [†] , PG, PEP, ICP	

AEP, atopic eruption of pregnancy; ICP, intrahepatic cholestasis of pregnancy; PEP, polymorphic eruption of pregnancy; PG, pemphigoid gestationis; PP, prurigo of pregnancy.

- * PFP was categorized under PP.
- † PP and PFP were categorized under AEP.

and allowed certain myths to be propagated among patients and physicians.

More research is needed in common skin problems, such as *striae gravidarum*, and controversial topics, such as the effect of lactation in reducing the risk of infantile atopic dermatitis. In this contribution, we describe how the original nomenclature of each dermatosis of pregnancy has been modified to fit the current classification scheme. We then identify several misnomers that have generated confusion within the scheme. Finally, we present the historical perspectives of myths that have developed around cutaneous conditions that are not included in specific dermatoses.

Dermatoses of pregnancy: Nomenclature and classification

To better understand the current nomenclature, it is useful to decipher how and why the names have evolved (Table 2). In the following sections, we shall trace the evolution of terminology from the early literature on dermatoses of pregnancy, which centered on morphologic description—urticarial eruptions and papular and prurigo-type eruptions, as previously highlighted in this issue.⁵

Urticarial eruptions

In 1931, Gross first described PEP (synonymously known as pruritic urticarial papules and plaques of pregnancy) as *erythema multiforme of pregnancy*⁶ to reflect the targetoid lesions observed in pregnant patients. Approximately 30 years later, the condition was renamed *toxemic rash of pregnancy* and was further characterized as erythematous urticarial papules and plaques associated with severe pruritus, which were found on the abdomen, thighs, and buttocks.⁷ In 1968, Nurse renamed the condition *late onset prurigo of pregnancy* to underscore how the eruption tends to occur in the third trimester of pregnancy.⁸

Shortly thereafter, in 1979, a case series was published of seven pregnant patients with late-onset, erythematous papules

Table 2 Nomenclature of specific dermatoses of pregnancy Current classification Historic synonyms Polymorphic eruption · Pruritic urticarial papules and plaques of pregnancy (PEP) of pregnancy * Toxic erythema of pregnancy Late onset prurigo of pregnancy (Bourne's) toxemic rash of pregnancy Erythema multiforme of pregnancy Linear IgM dermatosis of pregnancy † Atopic eruption of Prurigo of pregnancy Prurigo gestationis (of Besnier) pregnancy (AEP) (Nurse's) early-onset prurigo of pregnancy Papular dermatitis of pregnancy Pruritic folliculitis of pregnancy • Eczema in pregnancy Linear IgM dermatosis of pregnancy † Pemphigoid gestationis Herpes gestationis (PG) Intrahepatic cholestasis • Cholestasis of pregnancy of pregnancy (ICP) Pruritus/prurigo gravidarum • Obstetric cholestasis/hepatosis • (Idiopathic) jaundice of pregnancy • Hepatosis gestationalis Icterus gravidarum

IgM, immunoglobulin M.

Pustular psoriasis of

pregnancy (PPP)

pregnancy

• Impetigo herpetiformis

• Generalized pustular psoriasis in

and urticarial plaques, which generally responded to topical and oral corticosteroids. Unlike previous authors, these authors obtained biopsies and laboratory data from these women. Based on this additional information and slight differences on skin examination between his series of seven women and those diagnosed with toxemic rash of pregnancy (in whom urticarial lesions were less frequent and crusting was more common), the group renamed this eruption *pruritic urticarial papules and plaques of pregnancy* (PUPPP). 9

Although we now understand that toxemic rash of pregnancy and PUPPP describe the same condition, *PUPPP* has become the accepted term and is used predominantly in the United States and Australia. A synonym for PUPPP is *polymorphic eruption of pregnancy* (most commonly used outside of the United States), first introduced by Holmes and Black in 1983 to better describe the wide variety of observed morphologies, including eczematous lesions, which can include excoriated papules, plaques, and crust (22% of patients), targetoid lesions (6%), polycyclic erythema (6%), and vesicles (17%).^{2,10} Although it would be favorable to use only one of these terms to describe this dermatosis, both terms are used widely and interchangeably.

^{*} Pruritic urticarial papules and plaques of pregnancy (PUPPP) is still currently used in the United States as a synonym of PEP.

[†] Linear IgM dermatosis of pregnancy has been categorized under PP, of the current categorization AEP, as well as under PEP.

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