INFORMATION ON PITYRIASIS AMIANTACEA
(also known as "Tinea amiantacea")

What is Pityriasis amiantacea?

- This is a scalp condition that can lead to hair loss. For some patients, the hair loss is temporary whereas for others it may be permanent.
- All patients with pityriasis amiantacea, have thick scale that surrounds hair follicles. The scale sometimes looks like "shingles" on a roof. When hairs are removed from the scalp, the scales come off with the hairs.
- Shiny scales are attached to the hair shaft.
- It can be localized to just one area or cover the entire scalp.
- Hair loss can occur from repeated removal of hairs attached to the scalp.

What causes this condition? Who gets it?

- It's important to understand that this is not a single condition but rather a scalp appearance that occurs from many different conditions. Therefore, patients with a variety of scalp conditions can get pityriasis amiantacea.
- Pityriasis can be seen in many conditions, including the following top three reasons:
  - Psoriasis
  - Seborrheic dermatitis
  - Atopic dermatitis
- It is a rare condition with women more affected than men.

What tests will be done with this condition?

- Most of the time, no tests are needed.
- Your doctor may perform a bacterial and fungal culture and rarely may do a biopsy.
What does this condition look like?

The condition is often associated with thick sticky scale which is tightly bound to hairs. The photo below shows a typical appearance.

![Photo of Pityriasis Amiantacea](image)

How do you treat this condition?

- There are a variety of treatments for pityriasis amiantacea and the precise treatment Dr. Donovan uses will depend on the cause
- If bacteria or fungi are found, you will be given medications by mouth
- Often, Dr. Donovan will use one or more of the following
  1. 5% salicylic acid in mineral oil applied overnight with a shower cap (it can get messy!). The oil is then washed out of the scalp in the morning with Sebcur T shampoo. Make sure to scrub your scalp well. Then apply Clobetasol lotion for the day.
  2. Steroid injections alone or Topical steroids alone
  3. Topical anti-dandruff shampoos including shampoos containing ketoconazole, zinc pyrithione, selenium sulphide or ciclopirox.
  4. Topical vitamin D analogues
  5. Topical vitamin D with topical steroids
  6. Topical retinoids

Generally, we advise no more than 3-4 weeks of treatment before the response to treatment is carefully assessed.