SUMMARY

The skin shows many changes during pregnancy; some abnormalities are believed to be specifically related to pregnancy and often called dermatoses of pregnancy. Most of them are pruritic.

Herpes gestationis is an intensely pruritic vesiculo-bullous eruption of all trimesters of pregnancy, characterized by destruction of the epidermal basement membrane and deposition of C3 and a special antibody known as herpes gestationis antibody.

Impetigo herpetiformis is a rare disease characterized by a serious generalized pustular eruption associated with pregnancy or with hypocalcaemic status and may be a variant of pustular psoriasis. It is associated with poor maternal and fetal prognosis.

Pruritus gravidarum is defined as a condition of pregnancy characterized by severe generalized pruritus in the absence of primary skin lesion, it is considered as mild anicteric form of recurrent cholestasis.
pregnancy and it results from disturbance of bilirubin excretion caused by the effect of oestrogen and progesterone.

Pruritic urticarial papules and plaques of pregnancy is a highly pruritic eruption of the third trimester of pregnancy, characterized by urticarial papules and plaques initially localized to the abdomen. It clears at delivery and its rate of recurrence is unknown.

Papular dermatitis of pregnancy is defined as a continuous daily eruption of few short lived papules. Widely scattered over the body. It is variable in time of onset, recurrent with successive pregnancies associated with hypersensitivity to placental antigen, responsive to systemic corticosteroid therapy, and potentially detrimental to fetus if left untreated.

Toxaemic rash of pregnancy is intensely pruritic eruptions of late pregnancy and has no connect on to pre-eclampsia. It starts by itching of abdomen
followed by appearance of slightly raised, bright red wheals with crusted papules in the centre.

Prurigo gestationis is a pruritic eruption which involves the limbs in middle trimester, it appears as papular and urticarial lesions with abdominal involvement near term, usually clears after delivery and may recur in subsequent pregnancy.

Prurigo annularis is characterized by single or multiple slowly expanding large rings of pruritic papules.

Insufficient information exist to differentiate pruritic urticarial papules and plaques of pregnancy, prurigo gestationis of Besnier, toxaemic rash of pregnancy and papular dermatitis of pregnancy and no conclusive data show any of them to be harmful to the mother or fetus.

In relation to the treatment of pruritic dermatoses of pregnancy many drugs have been used with care e.g. corticosteroids and antihistaminics.
The effects of corticosteroids on the fetus during pregnancy is controversial but most authors agreed that it cause cleft palate, also some of these drugs is harmful for mother and fetus so benefit risk ratio is indicated.

If corticosteroids are indicated they are better avoided during early trimester and used for short courses and doses should be kept as low as practicable. Fluorinated steroids should be avoided as they may be more teratogenic.