

Common Newborn Rashes

Many newborn babies develop temporary skin rashes. Some common ones include *erythema toxicum*, milium, sebaceous hyperplasia, miliaria, and neonatal acne. These are harmless conditions that generally go away with no treatment. Call our office if your newborn has a rash that seems to be causing itching or discomfort.

What kinds of rashes can occur in newborns?

Newborns can develop a number of common rashes that are harmless and usually go away without treatment. However, the doctor may still want to check the rash, just to be sure that the diagnosis is correct and the condition doesn't need treatment. Any rash that seems to be bothering your baby, or a rash that is accompanied by fever, should be checked by the doctor.

What do they look like?

Erythema toxicum. Most cases begin 1 or 2 days after birth. It is rare in premature infants.

- Small, yellow/white bumps on a background of red, splotchy skin.
- Usually seen on the face and body; can occur other places as well.
- Rash may clear up in one place, only to reappear in another.
- The rash can last up to a week or so. No treatment is needed.

Neonatal acne. Sometimes called “baby acne.”

- Usually begins in the first few weeks of life. The cause is unknown.
- Small, red bumps or little pustules appear on the face, particularly the cheeks. The rash doesn't bother the baby.
- Usually goes away on its own. If the rash is severe or doesn't clear up, it can be treated with acne medicine such as benzoyl peroxide (although this is rarely needed).

Infantile acne is a little different:

- Usually begins after 2 to 3 months.
- Rash looks like teenage acne: red bumps, pustules, and pimples (comedones). This rash may be related to male hormones (androgens).
- The rash usually gets better by age 12 to 16 months. If needed, treatment is similar to that for teenage acne.

Miliaria. Sometimes called “heat rash” or “prickly heat.”

- Caused by plugging of the sweat glands. This rash usually appears when your baby is overheated, such as when dressed too warmly for the weather, in a humid environment, or during a fever.
- In newborns, the rash appears most often as very tiny blisters often on the back, neck, or face. The blisters break easily with mild pressure.
- More commonly in older children, the rash may look like small, red bumps or occasionally pustules. It most often appears on the neck, forehead, or areas covered by clothing.
- No treatment is needed, except to keep the baby cooler and prevent overheating.

Sebaceous hyperplasia. Caused by enlarged sweat glands.

- Rash looks like lots of small, yellow/white, smooth bumps.
- Most common on the nose, forehead, and upper lip.
- The bumps usually disappear in a few weeks; no treatment needed.

Milia. Despite their similar names, this rash is different from “miliaria” (discussed above).

- Rash looks like tiny white bumps, usually on the face, but can appear anywhere.
- The bumps are actually tiny, fluid-filled cysts. This rash looks similar to sebaceous hyperplasia, but the bumps are not yellow in color and there are not as many of them.
- This rash can occur later in infancy and childhood and usually goes away on its own.

What puts your baby at risk of these rashes?

These rashes are very common—for example, erythema toxicum occurs in about one half of babies.

Can they be prevented?

There is generally no way to prevent these harmless rashes. Miliaria may be decreased by not letting your baby get overheated.

When should I call your office?

Call our office if your baby has:

- Rash that is causing obvious itching or other discomfort.
- Rash with fever.

