



GRANULOMA ANNULARE PATIENT INFORMATION LEAFLET

What are the aims of this leaflet?

This leaflet has been written to help you understand more about granuloma annulare (GA). It tells you what it is, what causes it, what can be done about it, and where you can find out more about it.

What is granuloma annulare?

Granuloma annulare is a fairly common condition. Groups of small firm bumps appear in the skin, arranged roughly into rings.

What causes GA?

The cause is unknown, but GA does not damage the general health, and is not infectious or due to allergies. Some types of granuloma annulare have been linked with diabetes but this is very uncommon in the ordinary type. It usually affects children and young adults.

Is GA hereditary?

No.

What are the symptoms of GA?

In most cases, GA causes no symptoms, or a just mild itch at the start of any new area. It can be tender if knocked.

What does GA look like?

In most patients, patches occur on only one or two sites of the body, often on bony areas such as the backs of the hand, elbows or ankles. Each patch consists of tiny bumps arranged in a ring.

Typically, the rings slowly grow to 1 or 2 inches across but become flatter and rather more purple in colour as they do so, and then gradually fade. Patients can develop a more widespread rash, but this is rare. In most people with this disorder, GA will go away in about 2 years, but this cannot be predicted accurately on an individual basis.

How will GA be diagnosed?

In some instances, especially in the less common types, a skin biopsy helps to prove the clinical diagnosis, A urine test for sugar is often performed too, as

there is an increased risk of diabetes for those with the less common, widespread type of GA.

Can GA be cured?

No, but usually it goes away by itself (see above).

How can GA be treated?

Unfortunately there is no really effective treatment.

- Itchy patches may improve using steroid creams or ointments, or occasionally steroid injections into the rings, but this is not always the case and such treatment is not recommended in every individual, as there is some risk of thinning the skin.
- Aspirin or similar drugs may help, but again this is not routinely useful.
- A special form of light treatment known as PUVA has also been successful in a few cases with the condition affecting a lot of skin.
- For most patients, no treatment is suggested.

What can I do?

There is not a great deal you can do to influence the course of GA. Modifying your diet will make no difference. However cosmetic creams or fake tans may help to conceal the affected patches.

Where can I get more information?

Web links to detailed leaflets:

www.dermnetnz.org/dna.granuloma.annulare/grananu.html

www.emedicine.com/derm/topic169.htm

(Whilst every effort has been made to ensure that the information given in this leaflet is accurate, not every treatment will be suitable or effective for every person. Your own doctor will be able to advise in greater detail.)

**BAD PATIENT INFORMATION LEAFLET
PRODUCED AUGUST 2004**