



## “Doc, what’s scaling his scalp?”

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A three-week-old infant presents with a one-week history of thick yellow scales on his scalp (Figure 1). The infant is otherwise healthy, and there is no family history of skin disease.

### 1. What is the most likely diagnosis?

- a) Allergic contact dermatitis
- b) Impetigo
- c) Seborrheic dermatitis (cradle cap)
- d) Tinea capitis
- e) Histiocytosis-X

### 2. What can you tell the parents?

- a) It may be itchy
- b) Infants outgrow this condition
- c) It is not contagious
- d) Treatment is usually more for the parents' sake
- e) All of the above

### 3. How could you manage this infant's scalp?

- a) Mild topical corticosteroids
- b) Watchful waiting, since it is harmless
- c) Shampoos containing tar, salicylic acid or selenium
- d) Topical olive or baby oil, followed by brushing out scales
- e) All of the above



Figure 1. Thick, yellow scales on infant's head.

Cradle cap is a papulosquamous condition characterized by greasy, yellow, scaly patches on the skin of the scalp of infants. It is temporary and harmless and shouldn't be treated unless it bothers the infant (if pruritic) or parent. Scalp appearance varies from mild, patchy scaling to widespread, thick, adherent crusts.

The gentlest treatment is to simply rub a small amount of baby oil or olive oil onto the baby's scalp. Wait several minutes for the oil to soften and loosen the scales and brush them away with a soft brush or a dry washcloth. A mild topical cortisone can be added if there is underlying erythema and/or the infant is excoriating.



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“Case in Point” is a series of interesting cases and diagnoses so general practitioners can sharpen their skills. Submissions and feedback can be sent to [diagnosis@sta.ca](mailto:diagnosis@sta.ca).

Answers: 1-c; 2-e; 3-e