




# L-Lysine as an Alternative Treatment for Pityriasis Rosea (PR) [Response to Letter]

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## Dear editor

We have read with great interest the letter by dos Santos et al entitled “L-lysine as an Alternative Treatment for Pityriasis Rosea (PR)”,<sup>1</sup> commenting our previously published manuscript reviewing current literature on the PR and PR-like eruption following COVID-19 vaccination.<sup>2</sup> It is well known that there is an association between PR and human herpesvirus (HHV) 6–7, which, like all HHV, is characterized by the ability to establish lifelong latency.<sup>3</sup> Among the several cutaneous reactions and viral reactivations reported following COVID-19 vaccination, PR was one of the commonest.<sup>4,5</sup> Among the proposed pathogenetic mechanisms, despite the exact correlation is not still understood, it has been hypothesized that the exposure to the viral antigen boosts the cell-mediated immune response, and this immune response can sometimes become dysregulated, leading to inflammation and reactivation of latent viral infections, including human herpesviruses HHV6 and HHV7, linked to PR.<sup>6</sup> Moreover, therapeutic approaches to PR have not been discussed in our review, since this disease is usually self-limited.<sup>2</sup>

In this context, dos Santos et al showed that one case of PR following the second dose of AZD1222 was treated with the L-lysine + L-arginine protocol, based on the capacity of lysine to inhibit the availability of arginine through competitive antagonism, leading to viral replication impairment.<sup>7</sup>

According to authors, this therapeutic approach should be suggested in severe cases of PR, regardless the COVID-19 vaccination.

Despite the watchful waiting strategy, coupled with the treatment of eventually associated symptoms such as pruritus with oral antihistamines, it is the mainstay of treatment of PR; patients with severe disease or requiring faster resolution may benefit from other therapies such as antivirals (acyclovir) and phototherapy.<sup>8–10</sup> In this context, L-lysine + L-arginine protocol may be an interesting option, also as monotherapy. Certainly, further studies are required to establish the best treatment algorithm for PR.

## Disclosure

The authors report no conflicts of interest in this communication.

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