



The Sensitive Skin

Bell Raj Eapen

<http://www.gulfdactor.net>

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*To Sinu and all the wonderful people who taught me
the art and science of cosmetic dermatology.*

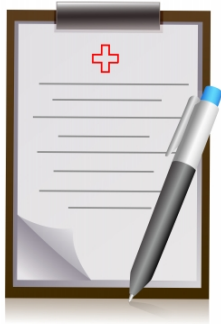
Preface

I wrote this book for two reasons. Firstly I wanted to give an unbiased view of various cosmetic dermatology procedures and services to laymen. Cosmetic Dermatology is a marriage of medicine and business. Internet is replete with claims of devices and gadgets capable of giving flawless skin. Since cosmetic dermatology is a medical specialty, you can be tricked into believing that most of these devices have passed the rigorous testing procedures of clinical medicine that unfortunately is often not the case.

Secondly, I wanted to learn the process of writing and marketing ebooks. I am a true DIY person: I assemble my computer, design and make my website and write software code for my needs (though I still need my wife to iron my clothes). During this process, I learnt how to make a simple ebook cover, handle graphics and typeset using free software. But I do believe in the cliché that content is king. All the articles in this ebook have been published in a local newspaper. The language is simple and I have tried to avoid medical jargon as much as possible.

I actually wanted to provide this ebook free. I ultimately decided to charge few cents for download. It is actually done to explore the market for a revolutionary product that I am planning to implement in the same segment with my cousin. But at this stage, I cannot discuss any further about our plan. If you like this book, do send me an email at sensitive@gulfdactor.net and I will send you a copy once it is ready.

Before I sign off, let me ask you a question. Do you have sensitive skin? I am sure you do!!



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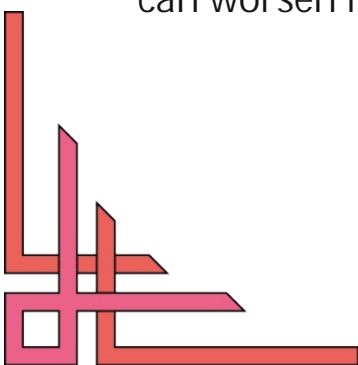


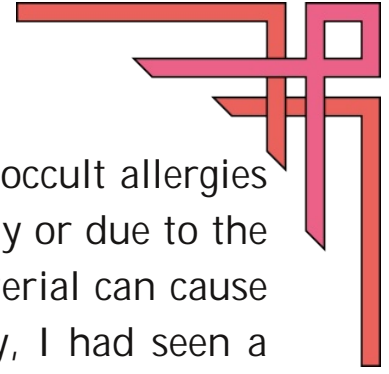
The Uncommon Skin

To a dermatologist, sensitive skin means hyper-reactive skin with no evidence of any obvious skin disease, often found in atopics or asthmatics (sorry for the medical jargon). This article attempts to explore the different meanings of 'sensitive skin' and the preventive measures you can take if you indeed have sensitive skin (I am sure you do).

Many of us use 'sensitive skin' for acne prone skin. Acne is a common teenage problem associated with oily skin. Acne can also occur in adulthood because of several reasons like hormonal imbalance and medications. Many of the skin care creams clog pores leading to acne. Even the so called 'non-comedogenic' creams are not completely safe. It is better to avoid skin care products as much as possible on acne prone skin. Cleansing and toning is all you need for mild acne while severe forms of acne require expert help from a dermatologist to prevent long term scarring.

Yet, another common cause of 'sensitive skin' is a condition called rosacea. Rosacea resembles acne in many ways. But in rosacea, redness is more noticeable than zits. Rosacea can be worsened by many factors including sun exposure, alcohol consumption, spicy food, sudden temperature variations, hot weather and emotional stress. The most common aggravating factor for rosacea in this region is canned dairy products. Skin care products and cosmetics can worsen rosacea leading to 'sensitive skin'.





The so-called 'sensitive skin' may be due to occult allergies from contact with a substance causing allergy or due to the irritant action of caustic chemicals. Any material can cause allergies in susceptible individuals. Recently, I had seen a patient with allergy only on the thumb and sides of the index finger of the right hand. After a Sherlock Holmes-type interrogation, we found the real culprit was the TV remote.

If you are among the unlucky ones with allergy to preservatives like lanolin or paraben, you can develop itching and burning sensation with most skin care products. Even the hypoallergenic creams may not be safe. Fragrance allergy is also fairly common in this region. I have seen allergy to the so-called natural and organic things too.

Dark red, raised itchy bumps may be due to a condition called Urticaria or hives. Urticaria can occur due to allergy to medications, sea food, infections like a sore tooth, emotional stress or even pressure.

Sensitive skin in children is mostly due to a condition called atopic dermatitis. It is a condition associated with dry skin and is seen mostly in association with asthma or nasal allergies. Many of those with atopic dermatitis will outgrow the disease by adolescence, though dry skin may persist. Atopics are known to develop irritant reaction with several skin care products.

I often see a form of self-inflicted 'sensitive skin' which I have termed 'The Magic Rash'. It is due to the prolonged use of a skin care product called 'magic cream', popular in Philippines. Though composition may vary, majority of these 'magic creams' have steroids as their main ingredient. Steroids when applied on the skin improves the tone and texture initially. But it comes at a huge cost of several side effects later.

Prolonged use of steroids often lead to acne, other skin infections and thinning of skin, making the blood vessels beneath the skin visible. Steroids absorbed inside the body can even cause side effects internally. Sensitive skin becomes apparent when the 'magic cream' is discontinued. The skin will then start reacting to moisturising creams as well.

Sensitive skin is not a single entity and the cause varies. It can be present in both sexes and all age groups. Sensitive skin does not mean dirty skin and the usual clean-ups only worsen the condition in most cases. A dermatologist's help may be required to identify the cause.



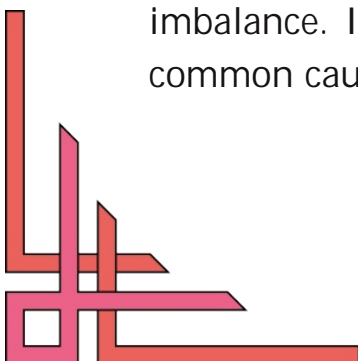
**4 Too old for
zits!**

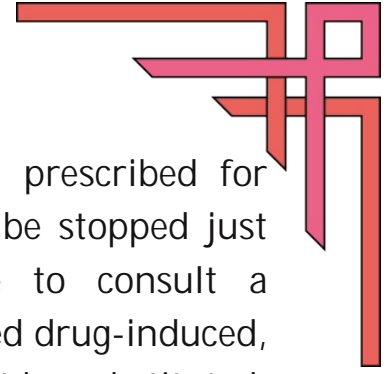
Do you feel you are too old to develop acne? I can assure you that you are not alone. These days I see more post teen acne than teenage acne in my practice. Pimples appearing later in life can be quite frustrating. Unfortunately it is often mismanaged leading to long term disastrous health consequences. Following standard recommendations and treatments for conventional acne may not be of much help here.

The commonest cause of late onset acne in women is hormonal imbalance often associated with a condition called poly cystic ovarian disease (PCOD). The pimples will be mostly over the lower face, chin and jaw line. The pimples may be deep seated and painful and scarring is prominent. Hormonal acne can also appear during the menopausal period and pregnancy. But it is usually self limiting and no aggressive treatment is necessary.

Certain skin disorders can present zits simulating acne. The two common conditions in this group are rosaceae and seborrhoeic dermatitis, both of which I have covered in my previous articles. In short rosaceae has prominent redness and a burning sensation and can be worsened by alcohol, dairy products and certain drugs. Seborrhoeic dermatitis is often associated with scalp dandruff (it can be masked by anti-dandruff shampoos) and gives rise to greasy scaling with itching on the central face.

Certain medications can also cause acne in the elderly. The oral contraceptives with progesterone are the most common culprit. But birth control pills are also prescribed to stabilise hormonal imbalance. In this case pills will actually improve acne. Other common causes of drug-induced acne include steroids and anti-





convulsants. But these medications are often prescribed for important medical conditions and should not be stopped just because they induce acne. You may have to consult a dermatologist to confirm that your acne is indeed drug-induced, before asking for alternatives. If the drug cannot be substituted, your dermatologist will help you to control the acne while on medication.

Though acne is not a reason to stop unavoidable medications, I often see typical steroid abuse in the form of 'magic creams' often used as fairness creams. Magic creams often cause acne as I have already discussed in my article on sensitive skin. Cosmetic allergy leading to acne is not uncommon. Many anti-ageing creams can also cause pimples. The list could include oily sunscreens and hair cosmetics. Though non-comedogenic products are better tolerated, they may not be completely safe. There is now incontrovertible evidence to prove the role of stress in acne. Stress can aggravate acne by inducing hormonal changes and by slowing down the healing process. Stress can also worsen PCOD. The rising incidence of late onset acne can be attributed to the widespread use of anti-ageing creams and heightened stress levels.

The effect of diet on acne has always been moot. But recent studies have shown that dairy products may contain enough anabolic steroids to aggravate acne. Studies have also demonstrated that food with high sugar content (glycemic index) can induce or worsen acne. Hence a healthy diet with less processed foods and more whole grains does help improve acne. But there is no scientific evidence to show any relationship

between oily food and acne. I've seen acne come from an allergic reaction to nuts in some patients. This reaction is not dose-dependent, and if you are one of the unlucky ones, you can develop a bad break out with one or two almonds.

Late onset acne is generally bigger and more red (inflammatory) compared to teenage acne. It can be itchy or painful. The skin may not be oily. It is deep seated and nothing comes out if squeezed. Though pus is rarely seen, scarring is generally more severe.

Late onset acne can be quite disturbing for those who never had acne during their younger days. Associated scarring increases the stress level thereby initiating a vicious cycle. Many of the affected would try all anti-acne medications available in the market with little benefit. The first step in the treatment of late onset acne is to identify the cause and eliminate it. It is advisable to avoid all unnecessary products. Normal clean-ups and facials can worsen late onset acne. Too much washing does not help either, as the skin is not very oily. The treatment should be aimed at reducing the inflammation, thereby reducing the chances of long term scarring. Another commonly made mistake is to treat the scars when the condition is still active. Treatment of scars should be attempted only after the underlying problem is controlled and the skin is stabilised.

Typical acne can normally continue up to one's 30s and rarely 40s. Dermatologists call it persistent acne. But it is also important to know that any pimple-like rash on the face may not actually be pimples. Hence it is better to take professional help for diagnosis and treatment of late onset acne.

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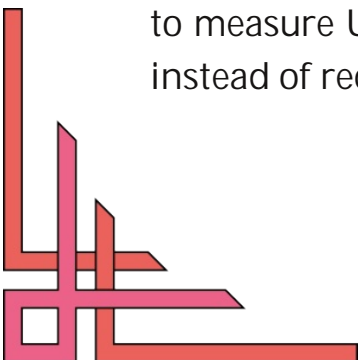


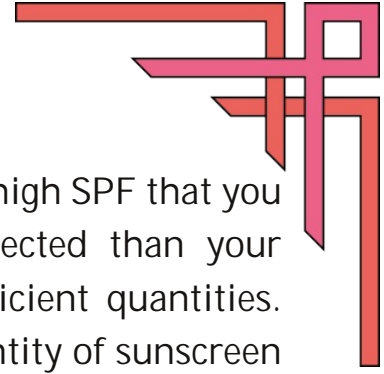
Honey I
shrank the
SPF!

What SPF sunscreen should I use? This is a question I hear quite often in my practice. There is nothing inherently wrong with this question. You can even see the answers if you do a simple Google search. But I believe this question misses several points.

Hence, before answering the question, let us analyse the question itself. When you are new to a city and want to commute to work, what is the first question you ask a person who knows the city well? Will you ask the minimum horsepower of the car you should buy to commute? There are several other questions to ask before this. You may want to ask alternate modes of transport. If you decide to indeed use a car, you may want to ask about mileage and comfort before the engine power. SPF is similar to the engine power of the car. This article is an attempt to answer all the questions that the concept of SPF fails to capture.

SPF is the ratio of the amount of UV radiation required to cause redness or sunburn on the skin to the amount without sunscreen. In practical terms, if you apply a sunscreen with an SPF of 10, you will be able to stay 10 times longer in the sun before developing visible redness. The fundamental limitation of SPF is reflected in the definition itself. SPF measures redness on the skin, which is mostly due to a type of ultra violet radiation called UVB. Many of the harmful effects of the sun are due to UVA, which has a longer wavelength than UVB and does not cause redness. So higher SPF does not mean higher protection from UVA. Persistent Pigment Darkening (PPD) method is used to measure UVA protection. But PPD method measures tanning instead of redness and is not very popular.





Do you have an expensive sunscreen with very high SPF that you apply sparingly? You are probably less protected than your friend who uses a low SPF sunscreen in sufficient quantities. SPF does not account for variations in the quantity of sunscreen applied. SPF assumes that sunscreen is applied at a thickness of 2 mg/cm² that translates to 1/3 of a teaspoon for the face of an average adult. If you apply less than that, the protection decreases proportionately. A corollary to this fact is that if you need better protection you don't have to hunt for the highest SPF sunscreen; simply apply more of the sunscreen you already have.

Many of us use a high SPF sunscreen before swimming at the beach. Have you developed sunburn even after using high SPF sunscreen? Sunscreens can get washed off easily like most other creams when you swim. If you swim a lot, water resistant properties of the sunscreen are more important than its SPF. The same applies if you sweat a lot too.

If you go to a chemist here, he will show you an SPF 100 sunscreen. You may even be tricked to believe that SPF 100 means 100 per cent protection. Let us try to get to the root of this 'SPF 100' campaign that was so effective till US Food and Drug Administration (FDA) and European regulatory agencies intervened. It is needless to say that SPF 100 sunscreens have all the limitations I explained before. If you are good at mathematics, you can calculate and compare the theoretical protection offered by a 50 SPF sunscreen and a 100 SPF sunscreen. If your calculations are right, you will see that a 50

SPF sunscreen gives a theoretical protection of 98 per cent and a 100 SPF sunscreen gives a theoretical protection of 99 per cent! FDA and European regulating agencies enforced labelling restriction to avoid this confusion by instructing manufactures to use 50+ for any sunscreen claimed to have an SPF in excess of 50. Though FDA managed to 'shrink' SPF, 100 SPF sunscreens still rule the roost here.

FDA does not recognise laboratory determination of SPF. If it normally takes 10 minutes to develop redness on sun exposure, volunteers have to stand for 1,000 minutes (16 hours) in front of a solar simulator for SPF determination! From my personal experience on SPF determination on darker skin, it is almost impossible to measure SPF over 15. Our clothes can also protect us from the harmful effects of the sun especially those made out of closely woven fabric.

The concept similar to SPF called ultraviolet protection factor (UPF) is used for the rating of sun protective clothing. Needless to say: a wide-brimmed hat and umbrella can also protect you from the sun. Though SPF has several limitations, it has helped sunscreen research by providing a widely accepted rating system for sunscreen efficacy. But people should be aware that SPF is a research tool and not a practical tool that everybody can use to compare sunscreens.

Do you know how to use a sunscreen properly? Do you think sunscreens can be harmful if not used properly? Have you heard of sunscreens you can eat?

More about these in another chapter.

About the Author

Dr Bell Raj Eapen is a specialist dermatologist with Kaya skin clinic, the largest international skincare clinic chain in the Middle East and India. He has practiced dermatology in India and UAE for over 10 years. He has completed his MD in Dermatology and Venereology from Kasturba Medical College in Manipal and MBBS from Saint John's Medical College, Bangalore(INDIA). He also has a Diploma in Dermatology from Royal College of Physicians And Surgeons of Glasgow, (UK) and DNB in Dermatology and Venereology from India. He has been an Assistant Professor in skin and STD at the Sri Ramachandra Medical College and Research Institute in India (a Harvard Medical International associated institution). Dr Bell's key skills include clinical dermatology, cosmetology (Botox, fillers and laser) and clinical research with several publications in peer-reviewed international journals. Please visit his website <http://www.gulfdoctor.net>

