Avoiding Dyschromia Is Goal in Treating Dark Skin

BY DAMIAN McNAMARA
Miami Bureau

MIAMI BEACH — Prevention is the best therapy for patients of color regarding dermatologic procedures with a potential to cause postinflammatory hyperpigmentation changes, according to a presenter at this year’s Masters of Dermatology conferences sponsored by the University of Miami. “There are unique diseases and treatments to consider in children with skin of color. Understanding these differences is essential when treating our patients,” said Dr. Heather Woolery-Lloyd, director of dermatology, department of dermatology and cutaneous surgery, University of Miami.

Acne and atopic dermatitis put some patients at high risk for hyperpigmentation. These changes can be very cosmetically disconcerting. For example, patients are most concerned with pigmentation and not the acne itself when they have acne hypopigmented macules, Dr. Woolery-Lloyd said. Retinoids are recommended for patients younger than 16 years of age because they can improve both acne and pigmentation, Dr. Woolery-Lloyd said. Other therapeutic options include azelaic acid or 20% cream. In addition, she recommended a moisturizer containing sunscreen and soy. The soy is beneficial because it inhibits melanogenesis.

The “hydromelone halo” around the treated area is due to over application. “Hydromelone halo.” She suggested in stead using a cotton tipped applicator to spot treat facial lesions. Apply the agent as a thin layer on dark spots first and then apply a retinol to the entire face.

Postinflammatory hyperpigmentation can also be a challenge to treat in patients of color with atopic dermatitis, Dr. Woolery-Lloyd said. She suggested aggressive treatment to prevent permanent pigment changes. “Emphasize this to patients to improve compliance. Prevention is particularly important because bleaching agents can irritate patients with atopic dermatitis.”

Another tip is to educate patients about the expected duration of pigment changes. Remember that postinflammatory hyperpigmentation can take an average of 4 to 6 months to clear, Dr. Woolery-Lloyd said. She had no relevant conflicts of interest to disclose.

DATA WATCH

Personal Health Care
Spending for Children

25.2% Other services
37.3% Hospital
28.6% Physician/Clinics
7.8% Prescription drugs

Note: Numbers do not add up to 100 because of rounding.

Source: 2004 data, Health Affairs 2007

Skin & Allergy News • April 2008