Skin and Hair Health

How our skin and hair look is important to many of us. At the same time, your skin and hair are organs that do special jobs that support life. Skin protects your inside organs from injury, bacteria, and viruses. Your skin, hair, and sweat glands help control body temperature. Body hair also alerts you to heat and touch. You can take steps to keep your skin and hair healthy. You can also look to your skin and hair for clues to your overall health. And, as a bonus, good skin and hair care will help you to feel your best, too.

Caring for your skin and hair
Good skin and hair care involves:

- eating a variety of healthy foods rich in vitamins and nutrients
- keeping physically active
- managing stress
- practicing sun safety
- limiting alcohol
- not using tobacco and other recreational drugs
- drinking plenty of water

Unhealthy behaviors can take a toll on skin and hair. For instance, habits like smoking and sunbathing dry out skin and cause wrinkles.

Caring for your skin
Follow this simple skin care routine to keep your skin healthy and radiant:

- Bathe in warm—not hot—water using mild cleansers that don’t irritate. Wash gently—don’t scrub.
- Keep skin from drying out by drinking plenty of water and using gentle moisturizers, lotions, or creams.
Practice sun safety to prevent skin cancer. Sun exposure puts you at greater risk of skin cancer, whatever your skin color or ethnicity. To protect your skin:

- Limit exposure to the midday sun (10 AM-4 PM).
- Wear protective clothing, such as wide-brimmed hats and long sleeves.
- Use sunscreen with a sun protection factor (SPF) of 15 or higher and with both UVA and UVB protection.
- Avoid sunlamps and tanning booths.
- Check your skin for sun damage. Tell your doctor about changes on the skin, such as a new growth, a sore that doesn’t heal, or a change in an old growth. Ask your doctor how often you should have a clinical skin exam to check for signs of skin cancer. (See pages 53 and 54 of the Cancer chapter for more information.)

- Ask your doctor if the medicines you are taking can affect your skin. For instance, blood thinners and aspirin can cause you to bruise more easily. Some antibiotics and vitamins make skin sunburn more easily.

Age Spots

Years of sun exposure can cause flat, brown spots called “liver” or age spots to appear on your face, hands, arms, back, and feet. They are not harmful. But if the look of age spots bothers you, ask your doctor about skin-lightening creams, laser therapy, and cryotherapy (freezing). Use sunscreen to prevent more age spots.

Skin and hair: Clues to overall health

Healthy skin and hair are signs of good overall health. Some skin and hair changes can signal a health problem. For instance, a “butterfly” rash on your face can be a sign of lupus. Distinct rashes appear with some viruses, such as the measles and chicken pox. An allergic reaction can cause hives, redness, and itching. Diabetes and thyroid disease can cause hair loss. Knowing how your skin and hair normally look and feel will help you notice changes to ask your doctor about.
Nail Health
Healthy fingernails and toenails are smooth, with an even color. Keep your nails clean, dry, and trimmed to prevent ingrown nails. If you wear artificial (fake) nails, check around the base and sides of the nails for redness, pain, and infection. Bacteria and fungus can grow between the artificial nail and your natural nail. Tell your doctor if you notice nail changes, which also could be the result of health problems, such as diabetes or heart disease.

Common skin complaints
Sensitive skin
Women with sensitive skin may have itching, burning, stinging, or tightness after using products such as soaps or makeup. Women of color are more prone to sensitive skin. Look for products made for sensitive skin. Talk with your doctor if these products don’t help.

Pimples (acne)
Pimples form when hair follicles under your skin clog up. Although most common in the teen years, many women get pimples into their 50s. Acne also is common during pregnancy and menopause, when hormones are changing. Medicines, such as birth control pills, can also lead to breakouts.

The cause of acne is unclear. We do know that dirt, stress, and foods do not cause acne. But stress and certain foods, such as chocolate or greasy foods, can make acne worse. Acne also appears to run in some families.

To care for acne, use mild soaps, avoid touching your skin, and wear oil-free makeup. Your doctor may also suggest an acne medicine. If so, ask about the side effects. Do not take isotretinoin (eye-soh-trih-TIN-oh-in) (Accutane®) if you are pregnant or trying to get pregnant—it can hurt your baby.

Dry skin
Skin can dry out and become rough, scaly, and itchy for a number of reasons. Dry skin (xerosis, zih-ROH-suhss) can be caused by:

- dry air
- overuse of soaps, antiperspirants, and perfumes
• not drinking enough water
• stress
• smoking
• the sun

Doctors report a higher rate of dry skin in African Americans. Try the skin care routine on pages 305 and 306. If dry skin does not improve, talk to your doctor. Sometimes, dry skin signals a health problem, such as diabetes or kidney disease.

**Cellulite**

Cellulite is fat that collects just below the surface of your skin, giving it a dimpled look. Women of all sizes can get it. Once formed, you cannot get rid of cellulite. No amount of weight loss, exercise, or massage reduces cellulite. Spa wraps, creams, and vitamins also do not help. Liposuction can make it look even worse. To prevent cellulite, try eating well, being active, and not smoking.

**Stretch marks**

Rapid growth and weight gain, such as with puberty and pregnancy, can stretch your skin, leaving pink, red, or brown streaks on your breasts, stomach, hips, buttocks, or thighs. Medicines, such as cortisones, and health problems, like diabetes or Cushing’s syndrome, also can cause stretch marks. Creams that claim to prevent stretch marks are of little value. Yet stretch marks often fade over time.

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**Skin and Scalp Conditions**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Symptoms</th>
<th>Possible treatments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Athlete’s foot</strong></td>
<td>• Red, itchy, and cracked skin on the toes &lt;br&gt; • Thick, yellow, and crumbly toenails</td>
<td>• Antifungal cream &lt;br&gt; • Wash feet daily, wear clean socks, and do not walk barefoot</td>
</tr>
<tr>
<td><strong>BURNS</strong></td>
<td>• Swelling, blistering, and scarring &lt;br&gt; • Damage to outer layer of skin, which can extend into body tissues &lt;br&gt; • If serious, shock and even death</td>
<td>• Antibiotics &lt;br&gt; • Hospital care may be needed &lt;br&gt; • Deep burns with tissue damage may require skin grafts</td>
</tr>
<tr>
<td><strong>Cellulitis</strong></td>
<td>• Hot, painful, or tender skin &lt;br&gt; • Tight, glossy look to skin &lt;br&gt; • Sudden rash on face or legs</td>
<td>• Antibiotic cream &lt;br&gt; • Clean area with soap and water &lt;br&gt; • Call your doctor if symptoms worsen</td>
</tr>
<tr>
<td><strong>Cold sores</strong></td>
<td>• Tingling, itching, or burning on mouth, gums, or lips &lt;br&gt; Small, painful blisters filled with fluid &lt;br&gt; <em>May spread by kissing or touching, or sharing razors, towels, or dishes</em></td>
<td>• Medicine to rub on sores &lt;br&gt; • Medicine taken by mouth &lt;br&gt; • Wash sores with soap and water &lt;br&gt; • Ice sores to reduce pain &lt;br&gt; • Without treatment, sores usually heal in 2 weeks</td>
</tr>
<tr>
<td><strong>Corns and calluses</strong></td>
<td>• Thick and hardened skin, which may be flaky and dry &lt;br&gt; • Usually on hands or feet</td>
<td>• Wear shoes that fit &lt;br&gt; • Wear gloves during weight lifting, gardening, and other activities that cause pressure &lt;br&gt; • Use a pumice stone to gently rub off dead skin</td>
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</table>
# Skin and Scalp Conditions

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</tr>
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<tr>
<td>Dandruff</td>
<td>• Itchy, scaly scalp &lt;br&gt; • Flakes of dead skin on scalp and shoulders</td>
<td>• Over-the-counter and prescription shampoos&lt;br&gt; • Manage stress&lt;br&gt; • Don’t use styling products</td>
</tr>
<tr>
<td>Eczema (EG-zuh-muh)</td>
<td>• Dry and itchy skin &lt;br&gt; • Rashes on the face, inside the elbows, behind the knees, and on the hands and feet &lt;br&gt; • Sometimes, redness, swelling, cracking, crusting, and sores that seep clear fluid</td>
<td>• Special skin care routine&lt;br&gt; • Avoid triggers, like perfumes, smoke, and stress&lt;br&gt; • Medicine&lt;br&gt; • Light treatment</td>
</tr>
<tr>
<td>Head lice</td>
<td>• Itchy scalp or tickling feeling in your hair &lt;br&gt; Spreads through head-to-head contact and by touching personal items like hats, scarves, and combs</td>
<td>• Medicine applied to the scalp&lt;br&gt; • Wash clothing, combs, bedding, and other personal items</td>
</tr>
<tr>
<td>Impetigo (im-puh-TEE-goh)</td>
<td>• Tiny, itchy blisters on face, arms, or legs &lt;br&gt; • Thick, light-brown scabs &lt;br&gt; May spread through personal contact, or by sharing towels, razors, or clothing</td>
<td>• Antibacterial cream&lt;br&gt; • Medicines taken by mouth&lt;br&gt; • Wash with antibacterial soap several times a day, gently remove scabs&lt;br&gt; • Use clean washcloth and towel each time you wash</td>
</tr>
<tr>
<td>Pigment disorders</td>
<td>• Skin with too much or too little pigment (color) &lt;br&gt; • Usually on elbows, knuckles, and knees &lt;br&gt; • Bronze color on soles and palms</td>
<td>• Creams to lighten the skin&lt;br&gt; • Cosmetics to mask area&lt;br&gt; • Avoid direct sun and use sunscreen</td>
</tr>
<tr>
<td>Psoriasis (suh-REYE-uh-suhs)</td>
<td>• Thick red patches, covered with scales, usually appearing on head, elbows, and knees &lt;br&gt; • Itching and pain, which can make it hard to sleep, walk, and care for yourself</td>
<td>• Medicine&lt;br&gt; • Light treatment</td>
</tr>
<tr>
<td>Rosacea (roh-ZAY-shuh)</td>
<td>• Redness and flushness on the face, mainly in adults with fair skin &lt;br&gt; • Small red lines under the skin, bumps on the skin, and inflamed eyes</td>
<td>• Green-tinted makeup to hide redness&lt;br&gt; • Medicines&lt;br&gt; • Laser surgery</td>
</tr>
<tr>
<td>Scabies</td>
<td>• Mark that looks like a pencil line &lt;br&gt; • Itchy bites or sores on hands and feet &lt;br&gt; • Pimples on your abdomen &lt;br&gt; May spread by sharing clothing and bedding</td>
<td>• Creams to rub on infected area&lt;br&gt; • Medicines taken by mouth&lt;br&gt; • Cool baths and calamine lotion&lt;br&gt; • Wash clothing and bedding to reduce spreading</td>
</tr>
</tbody>
</table>
Skin and Scalp Conditions

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</tr>
</thead>
<tbody>
<tr>
<td>Shingles</td>
<td>Painful skin rash caused by the chicken pox virus</td>
<td>• Rash of raised dots or red blisters&lt;br&gt;• Small fluid-filled blisters with scabs&lt;br&gt;• Shooting pain on one side of your body&lt;br&gt;Most people 60 and older should get the one-time-only herpes zoster vaccine, which can prevent shingles. Ask your doctor if you can get it.</td>
</tr>
<tr>
<td>Vitiligo (vit-ih-E-go)</td>
<td>An autoimmune disease (See page 84 of the Autoimmune Diseases chapter for more information.)</td>
<td>• White patches on areas exposed to the sun, or on armpits, genitals, and rectum&lt;br&gt;• Hair turns gray early&lt;br&gt;• Loss of color inside your mouth</td>
</tr>
</tbody>
</table>

Caring for your hair

Your hair is one of the first things that others notice about you. The shape and structure of your hair depend on your race. For instance, African hair is typically flat with tight curls. Asian hair is typically round and thick. Caucasian hair may be fine and straight or thick and wavy. Natural oils from hair glands also affect the look and feel of your hair.

Basic hair care involves a healthy lifestyle and proper care. Wash oily hair daily and limit how much you touch your hair. For dry hair, keep blow-drying time short and avoid overstyling, which can lead to dryness and breakage. Protecting your hair from wind, sun, and chlorine in water also will help to keep it from drying out and breaking.
If you color or relax your hair, carefully read the product label. Hair dyes and relaxers can harm both your skin and hair. Talk with your doctor if your skin or scalp swells or gets itchy after using any hair product. Even natural products, such as henna dye, can cause an allergic reaction.

**Hair disorders**
Living with a hair disorder can be hard, especially in a culture that views hair as a feature of beauty. To cope, try to value yourself for who you are—not by how you look. Also, play up your best features, which can boost self-esteem. Many women with hair disorders also find that talking to others with the same problem is helpful.

**Hair loss**
It’s normal to shed about 100 hairs each day as old hairs are replaced by new ones. But some women have hair loss—called alopecia (AL-uh-PEE-shuh). Hair loss can happen for many reasons:

- Female-pattern baldness causes hair to thin, but rarely leads to total baldness. It tends to run in families.
- Alopecia areata (AR-ee-AYT-uh) is an autoimmune disease that causes patchy hair loss on the scalp, face, or other areas of your body.
- Hormone changes during and after pregnancy.
- Underlying health problems, such as polycystic ovary syndrome (PCOS) or thyroid disease.
- Certain medicines, such as birth control pills or those to treat cancer, arthritis, depression, or heart problems.
- Extreme stress, such as from a major illness.
- Hairstyles that twist or pull hair.

Whether or not hair will grow back depends on the cause of hair loss. Some medicines can help speed up the growth of new hair. If hair loss is permanent, you can try hair weaving or changing your hairstyle. Or talk with your doctor about other options, such as a hair transplant.

**Hirsutism**
When dark, thick hair grows on a woman’s face, chest, belly, or back, the condition is called hirsutism (HUR-suh-TIZ-uhm). Health problems and family genes can cause high levels of male hormones, which can result in hirsutism. If you are overweight, try losing weight, which reduces male hormone levels. Consider methods for removal of unwanted hair. (See page 312 for more information.) Also, ask your doctor about medicines to slow or reduce hair growth.

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**Polycystic Ovary Syndrome (PCOS)**

Women with polycystic ovary syndrome (PCOS) make too many male hormones. This can cause male-pattern balding or thinning hair and/or hirsutism. (See page 159 of the Reproductive Health chapter for more information on PCOS.)
**Trichotillomania**

People with trichotillomania (TRIH-koh-TIL-uh-MAY-nee-uh) have a strong urge to pull out their hair, which leads to visible hair loss. Some people with this hair-pulling disorder also pluck their eyebrows, eyelashes, and body hair. Hair pulling gives people with this disorder a sense of relief or pleasure. But it also is a source of distress and shame. Behavioral therapy and medicines can help a person stop hair pulling.

**Cosmetic practices**

**Makeup**

Good skin care is the foundation of beauty. But many women enjoy using makeup (cosmetics) too. If you use makeup, follow these tips:

- Read the labels for product content and safety information.
- Wash your hands before applying makeup.
- Throw out products if the color changes or they get an odor.
- Throw out mascara after 3 months.
- Keep product containers tightly closed when not in use.
- Don’t share your makeup.
- Call your doctor if a product causes skin changes like itching and rash—you may be having an allergic reaction.

**Tattoos and permanent makeup**

Tattoos are colored inks inserted under your skin. Permanent makeup is a tattoo made to look like eyebrow, lip, and eye liner. If you like tattoos, keep these health risks in mind: Needles that are not properly cleaned can pass infections—even HIV—from person to person. Allergic reactions to tattoo ink are rare but can happen. Also, poorly applied tattoos can be costly to remove. Temporary tattoos and other skin-staining products, including henna dyes, can cause allergic reactions. Henna is approved by the U.S. Food and Drug Administration (FDA) only for use as a hair dye.

**Hair removal**

Cultural norms often affect a woman’s choice to remove body hair. Many women shave their legs and underarms. Wet hair first, then shave in the direction that your hair grows. Chemicals called depilatories dissolve unwanted hair. Depilatories can irritate, so always test on a small area of skin before using. Never use chemicals around your eyes or on broken skin. For laser, epilator (electrolysis), waxing, sugaring, or threading treatments, find a licensed technician. Serious side effects of hair removal can include swelling, blistering, scarring, and infection.
Cosmetic Procedures and Surgery

Some women choose to have cosmetic procedures to improve appearance and self-esteem. But the decision to have a cosmetic procedure should not be made lightly. If you are thinking about having a cosmetic procedure, ask your doctor:

- How is the procedure done?
- Am I a good candidate for the procedure?
- How does my health history affect my risk of problems?
- What results and side effects can I expect?
- What are the risks?
- When can I restart normal activities?
- How much will the procedure cost? (Cosmetic procedures usually are not covered by insurance.)
- What is your training and experience?
- Can you provide references from patients you have treated?

Body piercing

Before piercing—poking a hole and inserting jewelry in—any part of your body, learn about the health risks. Piercings in your tongue, cheeks, and lips may cause gum disease. Infection is common in mouth and nose piercings, so talk with your doctor about signs of infection as well as allergies. Also ask if your shots, especially hepatitis and tetanus, are up to date. And make sure the shop follows safety and sanitary steps as set by the law.

Beauty tips to live by

Skin or hair care products claiming to reduce wrinkles or enhance shine are tempting to try. But keep in mind, the best beauty tips are free and up to you to follow. Living a healthy lifestyle and practicing sun safety can have you radiating beauty from both outside and within.
One Woman’s Story

My first bald spots appeared when I was 22 years old. A dermatologist gave me several cortisone shots, but he never said that I had a condition. He attributed my hair loss to stress. The shots worked; my hair grew back and I went on with my life. He didn’t say it, but I left his office with the impression that I was “cured.” I wasn’t. I had to go back for more cortisone shots, but he still didn’t give me a name for what I had. The bald spots would happen more frequently and take longer to fill in, if they filled in at all. I would get some regrowth, but it was sparse, thin, very fine, and sometimes gray. It also did not stay. I finally went to another dermatologist who told me I probably had alopecia areata and that it was not serious.

Alopecia is an autoimmune disorder that causes hair follicles to become inactive. While alopecia is physically benign, the psychological effects can be devastating and debilitating. It can strike swiftly and without warning; or it can happen over a period of years, changing constantly. Over the years, I have seen several dermatologists who used different treatments with little success. Then I met a doctor who told me, “It’s only hair. Get over it.” His comment sent me into a deeper depression.

Then I met a compassionate, but honest, dermatologist. After she took my history and waited for me to stop crying, she explained alopecia to me in a way that I could understand. She explained that the pattern of hair loss indicates the probability of regrowth. Since my hair loss began around the perimeter of my head and was worse in the back of my head, the probability of it growing back was very slim. Even though this was not good news, it made sense. It gave me something to work with, allowed me to move on.

I used to think, “Why did this have to happen to me?” The answer is “Why not?” Once I stopped whining and started to count my blessings, alopecia did not seem that bad in the larger scheme of things. I’m not saying I would not like to have my hair, eyebrows, and eyelashes back. I am saying that I’m still all right without them.

Don’t let alopecia stop your life. Go to a support group. It gets easier knowing you are not alone. I don’t intend to get over it, but I do intend to deal with it and support other alopecians.

cassandra
Columbia, Maryland
For More Information...

Office on Women's Health, HHS
200 Independence Ave SW, Room 712E
Washington, DC 20201
Web site: www.womenshealth.gov/faq/cosmetics.htm
www.womenshealth.gov/faq/varicose.htm
Phone number: (800) 994-9662, (888) 220-5446 TDD

National Institute of Arthritis and Musculoskeletal and Skin Diseases Information Clearinghouse, NIH
1 AMS Circle
Bethesda, MD 20892-3675
Web site: www.niams.nih.gov
Phone number: (877) 226-4267, (301) 565–2966 TTY

Office of Women’s Health, FDA
5600 Fishers Ln
Rockville, MD 20857
Web site: www.fda.gov/womens
Phone number: (888) 463-6332

American Academy of Dermatology
PO Box 4014
Schaumburg, IL 60618-4014
Web site: www.aad.org/public
www.skincarephysicians.com
Phone number: (888) 462-3376

American Academy of Family Physicians
PO Box 11210
Shawnee Mission, KS 66207-1210
Web site: www.familydoctor.org

American Society for Dermatologic Surgery
5550 Meadowbrook Dr, Suite 120
Rolling Meadows, IL 60008
Web site: www.asds.net

American Society of Plastic Surgeons
444 E Algonquin Rd
Arlington Heights, IL 60005
Web site: www.plasticsurgery.org

National Eczema Association
4460 Redwood Highway, Suite 16D
San Rafael, CA 94903-1953
Web site: www.nationaleczema.org
Phone number: (800) 818-7546

National Psoriasis Foundation
6600 SW 92nd Ave, Suite 300
Portland, OR 97223-7195
Web site: www.psoriasis.org
Phone number: (800) 723-9166

National Rosacea Society
800 S Northwest Highway, Suite 200
Barrington, IL 60010
Web site: www.rosacea.org
Phone number: (888) 662-5874

Phoenix Society for Burn Survivors
1835 R W Berends Dr SW
Grand Rapids, MI 49519-4955
Web site: www.phoenix-society.org