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# Dermatology Update

by Dr. Debra Price

## Questions and Answers

### Repair for damaged hair

*I have dull, fly away hair. Are there any hair products you recommend to improve the appearance of my hair? Is there anything that can be done to repair split ends?*

The use of conditioners can enhance hair shine, minimize static electricity and repair split ends. Conditioners containing polymer film forming agents can increase hair shine, those containing quaternary ammonium can minimize static electricity and those containing hydrolyzed proteins can repair split ends and strengthen hair.

### Protect the hair

*Is there any value to protecting the hair from the sun?*

Yes, ultraviolet exposure can weaken hair leaving it dry, rough and brittle. Also individuals who lighten their natural hair color may notice that ultraviolet light can change the color of processed hair. To protect your hair from the damaging effect of sun exposure, look for a leave-in conditioner that contains zinc. Additionally consider wearing a hat, that does not contain open spaces that can allow inadvertent sun exposure.

### Rosacea flares

*I suffer from rosacea and feel my condition flares when I am under stress. What are your thoughts on the association of stress and rosacea flares and do you have recommendations to lessen my rosacea flares.*



*Lip desquamation (scaling) can occur in patients who use long-wear lipsticks and have sensitive skin. The condition improves with the use of a mild topical steroid.*

The majority of rosacea patients feel that emotional stress causes or contributes to flares of their condition. Stress management is an important part of any rosacea therapy. I suggest you consider beginning a regular exercise program and learn relaxation breathing techniques, yoga exercises or meditation.

### At-risk for melanoma?

*If I still tan with the use of an SPF 15 sunscreen, but am careful not to burn in the sun, am I at risk for melanoma and do I have to get my skin checked?*

Yes! A SPF 15 sunscreen should allow you to stay in the sun 15 times longer without burning. It does not guarantee total sun protection and

the sun protection factor does not address ultraviolet A exposure. Furthermore, the SPF rating assumes that one has applied a sufficient amount of sunscreen (one ounce for full coverage) and reapplies it every few hours. While sunburns are a known risk factor for melanoma, chronic sun exposure and tanning are also risk factors for skin cancer. There is no such thing as a safe tan.

### Healthy moles

*How can you tell a good mole from a bad mole?*

A benign mole is evenly pigmented and bordered, symmetric and asymptomatic. When a mole

*continues*

becomes irregular in color or border, bleeds, itches or otherwise changes, it should be evaluated by a dermatologist.

**Antioxidants and the sun**

*If you have got a lot of sun damage, what is the best antioxidant regimen to take orally?*

There is no antioxidant regimen that has been proven to prevent sun damage or skin cancer. The best protection against sun damage is midday sun avoidance, sun protective clothing and daily use of a broad spectrum sunscreen.

**Oral sun protection**

*Do vitamins protect you from the sun?*

Unfortunately, there is no magic pill to protect you from sun exposure. However, some topical vitamins may prevent and reverse some damage created by sun exposure. Niacinamide, the active form of vitamin B<sub>3</sub>, has been shown to stimu-

late collagen production, and prevent the generation of oxygen free radicals. Niacinamide has been shown to improve skin texture, blotchiness and lines. Retinoids, such as Retin-A, Differin and Tazorac improve photodamaged skin and certain topical vitamin C formulations may lessen sunburn and other adverse effects of sun exposure. Of course the best defense is a good offense. Minimizing sun exposure is the best protection against photoaging and skin cancer.

**Causes of dry lips**

*I suffer from chronically dry lips. My dermatologist has suggested that it may be caused by my lipstick. I obviously want to continue to wear lipstick. What do you recommend?*

Lip desquamation (scaling) can occur in patients who use long-wear lipsticks and have sensitive skin. The condition improves with the use of a mild topical steroid but

will recur with repeated use of long-wear lipsticks and lip stains. I suggest you switch to traditional lipstick. Other potential etiologies for irritated, dry lips include toothpaste or even actinic cheilitis (sun damage). The latter, occurs on the lower lip only and should be easily identified by your dermatologist. ■

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