



## Women & Skin Health

**M**arsha Shapiro grew up next to the resort city of Virginia Beach, VA, so as a teenager she spent hours baking herself on the hot sand, her body slathered in baby oil, covered with just the tiniest of bikinis. But today Ms. Shapiro, 37, who lives in Atlanta, GA, gets an unpleasant reminder of those days whenever she peers in the mirror.

“Lines and wrinkles around my eyes,” she says. “Brown spots and freckles all over my body.” Does she regret those summer days of yore? “Absolutely,” she says. “I think my skin is much worse off because of that.”

She’s not alone. Because so much of what we know about the damaging effects of sun on our skin has only come about in the past 20 years or so, millions of women who spent their youths in search of the perfect tan are finding that their earlier vanity has left them with less-than-perfect skin and, in far too many instances, cancer.

“Women always ask me how they can get a healthy tan,” says Maryland dermatologist Elizabeth A. Liotta, MD. “I tell them there is no such thing. A tan is your body’s reaction to being damaged.” And, contrary to popular belief, a tan gained in a tanning bed is no less damaging. No wonder, then, that skin cancer is the most common cancer in the United States, with more than one million skin cancers diagnosed each year.<sup>1</sup> Overall, one in six Americans will develop skin cancer at some point in their lives.<sup>4</sup>

Most frightening: the most lethal form of skin cancer, called melanoma, is increasing rapidly, particularly in women. In fact, it is the most frequent cancer in women ages 25 to 29 and the second most frequent cancer behind breast cancer in women between the ages of 30 and 34.<sup>2</sup> Overall, melanoma is the most rapidly increasing cancer in the U.S., growing from 17,000 cases in 1979 to 53,600 in 2002, including 7,000 deaths. That’s a 68 percent increase.<sup>3</sup> The good news: most skin cancers are nearly 100 percent curable if discovered early and treated promptly.

The disease also knows no ethnic boundaries. For while African-American women are less likely to get the disease, they’re more likely to die from it, probably because they tend to develop more aggressive tumors that are diagnosed later.<sup>4</sup> Overall, men are more likely than women to develop skin cancer, but women under age 40 comprise the fastest growing group of skin cancer patients, with an estimated 25,200 women diagnosed with melanoma this year.<sup>1</sup>

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But skin cancer is just one of many things that can go wrong with a woman's skin. Acne, psoriasis, rosacea. . .when it comes to your skin—which, by the way, is your largest organ—what can go wrong often does.

### Acne: You're Never Too Old

The most common skin problem dermatologists see in middle-age women is, believe it or not, acne. "Adult acne in women is alive and well and I think it's really underreported," says Dr. Liotta. In fact, some women may find acne at mid-life worse than the acne they experienced as teens.

African-American, Latino and Asian women get a double whammy when it comes to perimenopausal pimples, she says. Not only do they have to cope with the zits, but once the acne disappears, inflammation leaves brown spots on their skin that may take up to six months to fade.

Don't blame hygiene or chocolate for your outbreaks. Instead, blame hormones, particularly as you move into perimenopause, that period of months or years before menopause. An increase in androgen hormones, aka "male" hormones, is to blame. Once you pass menopause, however, things should improve. "I rarely see women over 50 with acne," says Dr. Liotta.

Treating acne now, as an adult, is a bit more difficult than when you were a teenager, she notes, because your skin is probably drier. So the last things you need are products targeted to teenagers, which will only dry out your skin even more. Instead, Dr. Liotta uses milder retinoidal agents (made with vitamin A), like the prescription drug Differin (adapalene), which are less drying and come in cream form. Birth control pills can also help.

Unfortunately, she notes, you might get hassled by your insurance company if you try to get Differin covered; the drug is also used to reverse skin damage. "Insurance companies assume that if you're over 35, you don't have acne anymore, which is not true," says Dr. Liotta.

### Rosacea: Beyond W.C. Fields

Often called "adult acne," rosacea is actually an entirely separate condition from acne. It gets its name from the reddish blush that spreads across your face, triggered by everything from spicy foods to alcohol to stress. It's what gave W.C. Fields his distinctive red nose (don't worry, the form of the disease that causes the nose to redden is more prevalent in men).

An estimated 14 million Americans suffer from rosacea. The disease is diagnosed more often in women than men and most often in light-skinned women of Northern European descent. Its symptoms can be as mild as a slight redness, or can cause embarrassing bumps and pustules on the face and other parts of the body, which is why it's often compared with acne. It can also affect your eyes, causing watering and itchy eyes, and may even lead to vision loss from corneal damage.<sup>5</sup>

No one knows what causes rosacea, says Cleveland dermatologist Amy H. Kassouf, MD, with University Dermatologists, Inc., but it tends to appear in middle age. It is usually treated with topical or oral antibiotics, she says, which reduce inflammation, and topical cleansers containing sulfa-based ingredients. In the past year, new drugs have become available, like Finacea (azelaic acid), which is applied to the skin twice a day.

### Psoriasis: Beyond the Heartbreak

Helen Casaccio was 26 when she was first diagnosed with psoriasis, an inherited skin disorder that affects up to seven million Americans, men as often as women.<sup>6</sup> At the time, Ms. Casaccio, now 56, thought it would just be a minor irritation, requiring the application of some cream now and then. But in the past 30 years, as the disease progressed, she's learned that psoriasis is much more than "heartbreak," as one advertising campaign describes it. Psoriasis is a serious immune system disease that can greatly affect a person's quality of life.

The disease appears as cracked, itchy, scaly patches over the skin. They occur when skin cells, which normally take about 21 days to mature, pile up on the surface of the skin too quickly. In some people, like Ms. Casaccio, it can also result in psoriatic arthritis, basically, a form of arthritis related to psoriasis.<sup>6</sup>

Rather than hide the scales, Ms. Casaccio, who lives in suburban Philadelphia, keeps them visible whenever possible. One reason is because light therapy helps contain outbreaks. But it also gives her a chance to educate people about psoriasis when they comment on her skin.

Until recently, the primary treatments for psoriasis included corticosteroids, topical drugs such as anthralin, sunlight (this is one of the few instances where your physician will actually recommend you sit in the sun) and/or ultraviolet B phototherapy. Of course, the latter two therapies can lead to skin cancer, and many of the drugs used to treat the disease, including methotrexate and cyclosporin, also have serious side effects, including increased risk of cancer.<sup>6</sup>

More recently, pulsed dye and excimer laser therapy, which destroy the blood vessels responsible for skin inflammation from the inside out, are showing great promise as a temporary targeted therapy.<sup>6</sup> But, insurance won't cover these expensive treatments. In January 2003, the U.S. Food and Drug Administration approved the first biologic therapy for psoriasis, Amevive (alefacept), an injected medication.<sup>7</sup> Biologic therapies are medications that contain one or more chemicals derived from the body's immune system, antibodies, for example. Alefacept isn't

a wonder drug, however. It also suppresses the immune system, leaving patients open to an increased risk of infection or other problems, possibly including cancer.<sup>6</sup>

Enbrel, a biologic drug therapy initially approved for psoriatic arthritis, and Raptiva, have recently been approved for psoriatic skin disease. They also are considered promising treatments and may be less risky to use in certain circumstances than traditional drug therapy, according to Dr. Kassouf. But, biologics also are very expensive treatment options. However, for people with severe enough psoriasis, biologics are usually covered by insurance. Still, there are no guarantees that they'll work, she says. And, since all biologics are relatively new drugs, all possible side effects aren't yet known.

Ms. Casaccio treats her psoriasis with light therapy, anthralin and coal tar baths with the occasional use of topical steroids and Tazorac (tazarotene), a synthetic form of vitamin A. Just as important, she tries to avoid or reduce stress whenever possible, and avoids alcohol when her symptoms flare up.

### **Fact and Fiction of Skin Cancer**

*Sunscreen doesn't work. Tanning booths don't contribute to skin cancer. Americans don't get enough sunshine. You don't need to go any higher than a 15 SPF sunscreen.* Sound familiar? These are all common myths floating out there about the sun/sunscreen/skin cancer correlation, all false, yet all continue to circulate.

Listen to what the experts have to say, the very people who

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**Overall, men are more likely than women to develop skin cancer, but women under age 40 comprise the fastest growing group of skin cancer patients, with an estimated 25,200 women diagnosed with melanoma this year.**

## **Seeing a Dermatologist**

**If you thought you were finished with dermatologists when you outgrew your teenage acne, think again. Studies find that a physician's ability to identify potentially precancerous lesions is based on the doctor's training in that area, and no one is better trained to spot suspicious spots than a dermatologist.<sup>9</sup>**

**Different organizations have different recommendations when it comes to skin examinations. The American Academy of Dermatology recommends annual screenings, the American Cancer Society recommends skin exams every three years between ages 20 and 39, and annually after age 40, and the U.S. Preventive Services Task Force says there is insufficient evidence to recommend for or against routine skin examinations.<sup>4,10</sup> There's no controversy over the fact that the earlier skin cancers are identified, the better the outcome. So talk to your health care professional about when to be screened.**

**Finding a dermatologist is pretty simple—the American Academy of Dermatologist has a search function on its Web site ([www.aad.org](http://www.aad.org)). As with most medical specialties today, you can also find specialty dermatologists. Some, called Mohs surgeons (named after the creator of a surgical technique for removing skin cancer tumors), specialize in skin cancer surgery.**

**Dermatopathologists focus on reading dermatological slides to identify cancers and other skin problems, while pediatric dermatologists have additional training in pediatrics. Laser specialists may have received additional training in using lasers, while dermatological immunologists specialize in autoimmune diseases like psoriasis and scleroderma. Then there are cosmetic dermatologists who often limit their practice only to cosmetic procedures.**

**Your best bet is to start with a general dermatologist, however. "We see all types of patients, and do some surgery, cosmetics, laser procedures and uncomplicated pathology," says Maryland dermatologist Elizabeth A. Liotta, MD. "If we can't handle a complicated case, we'll happily refer you on."**

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**Tanning beds, booths and sunlamps radiate both UVB rays and long wave UVA rays that penetrate the skin more deeply than sunlight, making it even more vulnerable to the effects of the sun and increasing the risk of skin cancer.**

have to tell their patients that yes, that spot on their back is cancer. And yes, it's likely due to that sunburn you got back when you were 17, or 10, or 8.

"There is no healthy tan," says Dr. Liotta flatly. At least, not one that comes from the sun or tanning booths. However, a new generation of sunless tanners (creams that leave you with that coveted golden glow) have emerged and she and other dermatologists recommend them to people who simply must have that bronzed look.

As for sunscreen: "The higher the SPF number the better," she says. SPF is sun protection factor. Not only because of the increased protection higher SPF sunscreens provide, but because most people don't use nearly enough to begin with. You need to apply at least a shot glass' worth every couple of hours you're in the sun, she says. That means a six-ounce bottle of sunscreen should last just a couple of visits to the beach—not all summer.

The myth about whether or not sunscreen works comes from some studies showing that even people who used the stuff still got skin cancer. That's because early versions of sun lotion only protected against UVB rays, says Dr. Kassouf, and researchers now know that both UVB and UVA rays contribute to skin cancer. Plus, studies find that people think the higher the SPF rating, the longer they can stay out in the sun, and that's simply not true.<sup>10</sup>

There are three types of skin cancer—squamous and basal, the two most common and easily cured, and melanoma, the deadliest. UVA rays are responsible for most of the basal and squamous cell cancers, while UVB is behind most melanomas, she said. UVA

rays are also the bad guys when it comes to aging your skin. Plus, genetics play a major role. In other words, if your father was prone to skin cancer, you probably will be, too.

So make sure your sunscreen protects against both, says Dr. Kassouf. To do that, look for one of the only three ingredients that protect against UVA rays: Parsol 1789, also called avobenzone, zinc oxide, or titanium dioxide. A new protectant that provides much greater protection against UVA rays should be available in the U.S. in the near future, she says. Called mexoryl, it has an SPF of 60 and is already available in Europe.

Also recognize that sunscreen is not the be all and end all of sun protection. In fact, research conducted by scientists at Proctor & Gamble found that the majority of sunscreens on the market fail to completely protect against the full spectrum of UVA/UVB radiation in sunlight.<sup>8</sup> That's why it's so important to limit your time in the sun and wear a hat and protective clothing.

Just as important as protecting yourself, says Dr. Liotta, is protecting your kids. "Most of the sun damage you see in middle age you got as a kid," she says.

Marsha Shapiro, with three children eight and younger who spend entire days at the neighborhood pool, says she's become downright obsessive when it comes to protecting her kids from the harsh Atlanta sun. Every hour when the whistle blows for adult swim at the pool, she reapplies high SPF sunscreen. And she carries sunscreen with her everywhere: in the diaper bag, in the car, in her daughters' soccer bags.

Maybe, she hopes, when her children hit middle age, they won't look in the mirror and see the error of their ways written upon their face as she does upon hers. ✕

### Resources

#### American Academy of Dermatology

PO Box 4014  
Schaumburg, IL 60168-4014  
847-330-0230  
<http://www.aad.org>  
Provides a variety of materials on skin health and diseases for consumers.

#### American Society for Dermatologic Surgery

5550 Meadowbrook Drive  
Suite 120  
Rolling Meadows, IL 60008  
1-800-441-2737 (toll-free)  
<http://www.aboutskinsurgery.org>  
Offers a range of resources for consumers about dermatologic surgery; dermasurgeon locator available.

#### National Psoriasis Foundation

6600 SW 92nd Avenue  
Suite 300  
Portland, OR 97223-7195  
1-800-723-9166 (toll-free)  
<http://www.psoriasis.org>  
Offers support and resources to individuals with psoriasis and psoriatic arthritis.

#### National Rosacea Society

800 S. Northwest Highway  
Suite 200-W  
Barrington, IL 60010  
1-888-668-5874 (toll-free)  
<http://www.rosacea.org>  
Provides information and support to people with rosacea.

#### The Skin Cancer Foundation

245 Fifth Avenue  
Suite 1403  
New York, NY 10016  
1-800-754-6490 (toll-free)  
<http://www.skincancer.org>  
Offers wide range of information for consumers on skin cancer diagnosis, treatment and prevention.

## Lunchtime Facials

It used to be that the only way to get younger looking skin after a certain age was to put yourself under the surgeon's knife. No longer. Today women can choose from a variety of noninvasive approaches to stem time's ravages, ranging from Botox injections to laser treatments to chemical peels.

**M**ost procedures can be done in an hour or so in your dermatologist's office.

Just ask Sandra Hill. The 58-year-old school nurse from Gaithersburg, MD, recently underwent thermage, a relatively new procedure that uses radiofrequency waves to tighten skin and induce the production of collagen, a protein responsible for your skin's elasticity. As it breaks down with age, so does your face. "I had some lines in my face and some puffiness under my eyes," Ms. Hill says. "I didn't want to take time off for a face lift, and I wanted something noninvasive and with a short recovery time."

Three weeks after undergoing the \$3,000 procedure, she says she can already see a difference and she's thrilled with the results. Though most of her patients, like Ms. Hill, are satisfied with the procedure, the efficacy of thermage remains controversial, says Amy H. Kassouf, MD, of University Dermatologists, Inc., in Cleveland, OH. "Women need to know up front that at least 10 percent of patients don't respond to the treatment and it can take up to seven months to see improvements," she says. "But, it is low risk and has essentially no down time, so for someone who wants some improvement and does not want surgery, it is a reasonable procedure."

Ask cosmetic dermatologist Leslie Baumann, MD, director of cosmetic dermatology at the University of

Miami, what women should consider if they're thinking about cosmetic procedures and she tells you her favorites: Botox injections for the upper third of the face, where the drug, which is actually a poison that acts by paralyzing muscles, temporarily paralyzes the facial muscles responsible for wrinkles, then skin "fillers" on the bottom third. These include Hylaform, an FDA-approved gel made of chemically modified hyaluronic acid, a key component of connective tissue (like your skin). Injected into wrinkled areas, it adds volume, creating a smoother appearance that lasts about 12 weeks.<sup>11</sup>

Dr. Baumann warns her patients away from permanent skin fillers such as silicone or Artecoll, which she says can be dangerous and may result in lumpiness after several years. As for microdermabrasion, an exfoliant method that removes the outer layer of skin: It's a waste of money, she says. "You can get the same results with an exfoliating scrub." Dermabrasion, in which the underlayer of the skin is exfoliated, provides better results, she says, but takes 10 days to heal.

Another favorite is intense pulsed light, or IPL, which delivers intense pulses of light to the dermis, or deepest layer of the skin, helping repair collagen. The procedure also delivers short pulses of light to the top layer of the skin, erasing fine lines, brown spots and visible blood

vessels. About four to six sessions are usually required, each costing \$200 to \$400.

Of course, in addition to cosmetic procedures, women turn to creams, lotions and oils for their skin, creating a \$5.5 billion industry in the U.S.<sup>12</sup> But with thousands of products priced from a couple of dollars to hundreds of dollars, choosing the right one can be overwhelming. In fact, a survey by the American Academy of Dermatology found that 94 percent of women are confused by the myriad of anti-aging treatments available both over-the-counter and by prescription.<sup>13</sup>

Bottom line, says Dr. Baumann, you should never spend more than \$30 for a face-care product. Also, drugstore lines, in most cases, are actually better for you than fancy cosmetic products.

Dr. Kassouf likes products that contain vitamin A, or retinoids, for their anti-aging effects. Because retinoids can irritate your skin, she recommends starting with the lowest level (available in over-the-counter products) and working your way up to higher levels in prescription medications as necessary. She's also keen on products that contain green tea. But you don't have to buy an expensive product containing the antioxidant. Just apply cooled tea directly to your face and drink it regularly. Both seem to limit both the kind of sun damage you get from daily living, says Dr. Kassouf.

"There is no one answer for everyone," notes Dr. Baumann. "It's best to have a dermatologist evaluate your skin and provide specific recommendations." ✕

Smoking prematurely ages skin by disrupting your body's natural process of breaking down old skin and replacing it with fresh skin. Smoking also triples your risk of squamous cell skin cancer, not to mention numerous other cancers.

## Your Skin Through the Ages

From the silky smoothness of a baby's skin to the deep wrinkles of an 80-year-old, perhaps nothing reflects the movement of time so well as our skin. Here is a look at a woman's skin through the ages.

**I**n **fancy and childhood.** These are the golden years of a female's skin and should be treated as such. By and large, children's skin is the healthiest health care professionals see.<sup>14</sup> But this is also the time when the greatest damage—albeit unseen—may occur. That's why it's so important to protect children from the sun with the appropriate clothing, hats and sunscreen, as well as keep them out of the sun during its most intense hours, usually 10 a.m. to 4 p.m. in most parts of the country.

● **Teenage years.** This is acne time, triggered by an increase in androgen production that results in increased oil production. A more serious problem in teenage girls, however, is their quest for a tan. Just four in 10 adolescent girls wear sunscreen, while only a third say they limit their sun exposure.<sup>15</sup>

Teenage girls also flock to tanning booths, with nearly one in four 15-year olds and older saying they use tanning beds.<sup>15</sup> The devices are just as dangerous as the sun, if not more. Just 15 to 30 minutes in a tanning salon is the equivalent of an entire day at the beach. Additionally, tanning beds, booths and sunlamps radiate both UVB rays and long wave UVA rays that penetrate the skin more deeply than sunlight, making it even more vulnerable to the effects of the sun

and increasing the risk of skin cancer.<sup>16</sup>

● **Twenties and 30s.** You've still got glowing skin, but the aging process is beginning to show. Little by little, your skin begins losing collagen, elastin—the tissues that keep the skin supple—and hyaluronic acid. Now is the time to begin a skin care regimen if you haven't already. Wash your face regularly with a mild cleanser and apply moisturizer with sunscreen religiously.

● **Pregnancy.** About 90 percent of pregnant women develop hyperpigmentation, an overproduction of melanin that produces dark spots. About 70 percent develop melasma or chloasma, dark spots on their face and arms known as the “mask of pregnancy.” Both disappear in the months following birth. Additionally, about 90 percent develop stretch marks during late pregnancy as the underlying layers of their skin stretch. Using lotions or creams containing alpha hydroxy acids can help prevent these marks, which never disappear. Pregnancy can also affect existing skin conditions.<sup>17</sup> Your acne and eczema may get worse while pregnant, while psoriasis may improve.<sup>18</sup>

● **Perimenopause and menopause.** As you move into the years just before and after menopause, expect to see not only the age-related changes in your skin already discussed, but

more facial hair, as well, due to hormonal changes and increases in androgen hormones. African-American women and women of Mediterranean and Arab descent are more likely to have this problem, says Maryland dermatologist Elizabeth A. Liotta, MD. Women may also notice larger pores, the result of collagen breakdown. Although the use of hormone therapy has its pros and cons, women who take supplemental estrogen generally find their skin feels smoother and less dry, says Cleveland dermatologist Amy H. Kassouf, MD, of University Dermatologists, Inc.

● **Elderly skin.** Many elderly people develop skin lesions or growths. Most are harmless age spots, but some may be precursors to skin cancer. Older people are also more susceptible to certain skin diseases, such as shingles (herpes zoster), varicose veins, leg ulcers and seborrheic dermatitis, a skin rash. Another common skin problem includes itching.<sup>19</sup> Medications—prednisone and other steroids, as well as blood thinners—and sun damage can cause the thin, fragile skin many older women struggle to protect. Their skin is easily cut or bruised, often without the woman remembering how or when she was injured. Sun protection and emollients, especially those that contain lactic acid, and even physical protection, can help safeguard older women's skin, suggests Dr. Kassouf. “I have some patients who wear shin guards because the risk of minor trauma is so great.” ✕

## Common Questions About Skin Health

**Q** I've heard that we don't get enough vitamin D, so we should get more time in the sun. Then I hear that the sun is bad for you. What's the truth?

**A** Vitamin D is a hormone that the body makes when it's exposed to sunlight on the skin. Until modern times, this was the only way to get vitamin D. But today, vitamin D is added to all dairy products, as well as other foods. Plus, even the best sunscreen doesn't block all sunshine, and studies find that even patients who have used maximum UV protection over several years had normal vitamin D levels despite virtually no UV exposure. Additionally, simply walking to and from buildings, driving in your car and sitting near windows will give you all the exposure you need to insure you have adequate vitamin D levels.

– Amy H. Kassouf, MD  
University Dermatologists, Inc.  
Cleveland, OH

**Q** How much does stress affect my skin?

**A** A great deal. The body's way of communicating what's going on internally often expresses itself on the outside. For instance, studies find that stress triggers 62 percent of psoriasis episodes, with the flare occurring within days of the emotional upset. For hyperhidrosis, a skin condition in which you sweat excessively, 100 percent of episodes are related to stress, occurring within seconds of the trigger. And for women with rosacea, 94 percent of episodes have an emotional trigger.

There are very strong mind/body connections between emotions and the health of our skin. The connection is likely

related to the immune system and the way it reacts to acute, chronic and muted stress. Short bursts of stress can actually improve your skin, but chronic or blunted stress (when you're exposed to so much stress your system just shuts down), have more negative effects.

So it's important that you learn to recognize the stressors in your life and how you react to them. Relaxation techniques, biofeedback and breathing training can all help you cope better with life stresses and reduce the severity of your skin condition.

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## What's Good for You is Good for Your Face

Ever noticed how whatever is going on in our life seems to show on our face? If we're stressed, we can expect acne and dark circles under our eyes. If we're dehydrated, our skin looks dry and flaky. If we're sick, our face appears pale. Eat or drink too much and we wake up with puffy skin. But get a stretch of feeling great, exercising, eating right, and we positively glow with health.

**T**here's a reason for that. Our skin is our body's largest organ—an average of 21 square feet, to be exact. Whatever goes on in the inside shows up on the outside.

Take smoking, for instance. Studies find that smoking prematurely ages skin by disrupting your body's natural process of breaking down old skin and replacing it with fresh skin.<sup>20,21</sup> Smoking also triples your risk of squamous cell skin cancer (not to mention numerous other cancers).<sup>22</sup>

As you've already read, stress can also negatively affect your face (and the rest of the body). But the opposite is also true. What you eat and how you live your life can lead to smoother, healthier skin. Overall, your best bet for your skin is also what's best for overall health: a low-fat, high-fiber diet filled with fruits, vegetables and whole grains, plenty of water, regular exercise and enough sleep every night (not just on week-ends). More specifically, here's what the science shows:

● **Fats.** Several studies find that the amount of poly- and mono-unsaturated fats, particularly

omega-3 fatty acids, you get in your diet may affect the amount of sun and aging damage your skin experiences.<sup>23</sup> The best source of omega-3s? Cold-water fish, such as salmon, mackerel and tuna. For healthy mono fats, I recommend olive oil and nuts.

● **Tea.** To understand the effect of green tea on skin health, you first need to understand what causes aging. We now know that skin aging is mainly the result of free radical damage to cell walls and other cell structures. Sun exposure and cigarette smoking contribute to the production of these free radicals. Antioxidants, on the other hand, are molecules that neutralize these free radicals. One good source is any type of tea. One study, for instance, found that the more black tea people drank (particularly tea with lemon) the less likely they were to develop squamous cell skin cancer.<sup>24</sup>

● **Fruits, vegetables and fish.** You know these foods are good for you for any number of reasons. But did you know they may prevent wrinkling? When researchers from Monash University in Australia studied the diets of

453 people aged 70 and older from Australia, Greece and Sweden to see if there was any correlation between what they ate and the amount of wrinkles on their skin, they found those who ate the most fruits, vegetables and fish had the least amount of wrinkles. Conversely, the researchers found, foods high in saturated fat, including meat, butter and full-fat dairy, as well as soft drinks, cakes and pastries, and potatoes, increased the likelihood of skin wrinkling.<sup>25</sup>

● **Exercise.** Regular exercise maintains healthy circulation and blood flow throughout your body, including your skin. If you're exercising outdoors, though, remember to wear a sunscreen on your face that protects against UVA and UVB rays, or a moisturizer with sunscreen protection.

● **Vitamins.** Although it's always best to get what you need from food, several studies attest to the skin-protecting effects of supplements containing the antioxidant vitamins E and C.<sup>26</sup>

● **Other nutrients.** Other studies suggest that consumption of borage oil (high in omega-3 fatty acids), garlic and ginkgo biloba may also protect skin from the detrimental effects of sunlight and free radicals.<sup>26</sup> ✕



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### 10 Foods to Eat for Your Face

- |                         |                           |
|-------------------------|---------------------------|
| 1. Salmon               | 6. Blueberries            |
| 2. Green Tea            | 7. Flaxseeds              |
| 3. Olive oil and olives | 8. Non-fat dairy products |
| 4. Sardines             | 9. Canola oil             |
| 5. Brazil nuts          | 10. Avocados              |

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