

winterize YOUR SKIN

The weather outside may be cold and dreary, but with just a few seasonal adjustments you can keep your skin looking great. *By Jeannette Moninger*



Freezing temperatures, low humidity and furnace-blasted air leave most of us with dry, red, itchy skin. But if your standard regimen of slathering on moisturizer is no longer doing the trick, you may be dealing with something more serious that deserves a little extra attention.

THE PROBLEM »

Ruddy nose and cheeks make you feel a bit like Mrs. Claus.

THE DIAGNOSIS »

Rosacea causes small blood vessels to swell and become more visible, giving the face a red glow. In addition, pimply bumps resembling adult acne often appear on the nose and cheeks, says Robert Brodell, M.D., associate clinical professor of dermatology at Case Western Reserve University in Cleveland. You're more susceptible to rosacea if it runs in your family or if you have light skin, blue eyes and blond hair.

WINTERPROOFING »

The inflammation of rosacea can be treated with prescription topical antibiotic or retinoid creams, oral antibiotics and laser therapies. When heading outdoors, be sure to protect your face with a soft scarf. Also watch what you eat and drink. "Spicy foods, alcohol and hot beverages increase blood flow to the skin's surface, making you appear redder," says Linda Stein Gold, M.D., head of dermatology research at Henry Ford Hospital in Detroit. Green- or yellow-tinted foundations can help conceal the unwanted redness.

THE PROBLEM »

Red patches of skin are covered with silvery scales.

THE DIAGNOSIS »

Psoriasis affects an estimated 7.5 million Americans. This inherited autoimmune disease causes itchy, dry, sometimes painful patches to build up on elbows, knees, scalp and lower back. And the disease often goes beyond skin-deep: Those with severe psoriasis are at least 24% more likely to have a heart attack due to artery-clogging inflammation brought on by an overreactive immune system.

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Flare-ups generally occur in the colder months when there's a decrease in exposure to the sun's UVB rays, which help slow down skin-cell growth. Phototherapy





FC tip

During the colder months it's best to go with an oil-based moisturizer (which creates a protective layer) rather than a water-based one.



treatments at a dermatologist's office or prescription home-light units (usually covered by insurance) are your best UVB options. (Skip tanning beds—they mostly emit harmful UVA rays.) Light therapies are most effective when combined with medications like retinoids, methotrexate (a chemo drug) or cyclosporine (an immunosuppressant). Topical corticosteroid, retinoid and vitamin D₃ creams alleviate mild symptoms.

Stress can also aggravate the condition, so try to up your inner calm. "Relaxation techniques like yoga and biofeedback—and even anti-anxiety medications—can reduce stress-induced psoriasis outbreaks," says Alan Menter, M.D., chair of the psoriasis research unit at Baylor Research Institute in Dallas.

THE PROBLEM »

Dry, cracked, itchy spots, often on the hands.

THE DIAGNOSIS »

Eczema is a condition that encompasses myriad skin problems and often affects people with allergies and asthma. Adults typically get a form of eczema called hand dermatitis, and like other skin conditions, it worsens when temperatures and humidity levels drop.

WINTERPROOFING »

Before you brave the cold, apply an oil-based moisturizer to your hands (and face and ears, if necessary) and wear gloves. It's also a good idea to counteract dryness at home with a humidifier. Since scratching causes eczema-prone areas to thicken and turn

leathery, ask your doctor about prescription oral antibiotics, antihistamines, steroids or topical corticosteroid creams.

THE PROBLEM »

Sandpapery, hard bumps that seem to pop up overnight.

THE DIAGNOSIS »

Actinic keratoses (AKs) are one of the most common reasons people see dermatologists. Sometimes called sun or solar spots, AKs are precursors to skin cancer and are typically found on areas that get a lot of sun exposure, like the face, lips, ears, back of hands, forearms and scalp. "You may feel the bumps before you see them," says Dr. Brodell. Their color, size and shape vary: Lesions can be skin-colored or red, yellow or brown. Some grow so rapidly that they form a horn shape and can range in size from a pinhead to an eraser. Those who are fair-skinned, blue-eyed and over age 39 are most susceptible.

WINTERPROOFING »

It's tempting to forgo daily sunscreen now that the sun seems less intense, but snow and ice reflect 80% of the sun's damaging rays. "Regardless of the weather, you should apply broad-spectrum sunscreen to exposed skin every day, including a lip balm or lipstick with SPF," says Dr. Stein Gold. Sunscreen is especially important if you're going to be outside shoveling, sledding or engaging in winter sports like skiing. Since doctors can't determine whether a lesion will actually become cancerous, all AKs need to be removed through freezing, surgery, scraping or topical creams. Other treatment options include chemical peels, microdermabrasion and laser or light therapies. ●



ZIT ZAPPERS

Crow's-feet and pimples shouldn't go together, yet 25% of women in their 40s deal with both. Blame hormones for throwing your oil glands into hyperdrive and creating an overabundance of acne-causing bacteria. Lack of sun in the winter also is a problem since UVB rays have an anti-inflammatory effect on skin. Gentle cleansers like Cetaphil or Dove, and OTC products containing benzoyl peroxide or salicylic acid work well for mild to moderate acne, but many women require a prescription-strength treatment. Talk to your doctor about the options below. But be patient: It may take up to 8 weeks to see an improvement.

Topical antibiotics → Often used in combination with prescription-strength benzoyl peroxide, these creams banish blemish-causing bacteria.

Retinoids → Derived from vitamin A, retinoids keep hair follicles from getting plugged by stimulating skin-cell turnover.

Oral antibiotics → Studies show taking an oral antibiotic for a few months (and then stopping), along with continued use of a topical antibiotic or retinoid cream, greatly reduces acne inflammation.

Oral isotretinoin → Accutane has been gone since 2009, but generic versions are equally effective at treating severe nodular acne.

Oral contraceptives → Three combination estrogen-progestin birth control pills are FDA-approved to treat acne: Yaz, Ortho Tri-Cyclen and Estrostep.

Laser or light therapy → These target the oil glands deep beneath the skin, decreasing the production of oil, without leaving scars.

Photopneumatic therapy → This combination treatment includes a vacuum suction that lifts dead skin cells from pores, bringing oil glands closer to the surface so that the bacteria can then be killed by a laser.

Steroid shots → Injections clear out nodules and cysts (large, painful lumps under the skin) within four days (versus weeks).

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If you suspect you may have one of these skin conditions, visit familycircle.com/winterskin to see what they look like.