Health Basics A-Z

Skin Health

As the largest human organ, the skin is the strong and flexible wrapping that covers and protects everything inside the body from invasion of foreign intruders and infections. Besides providing protection, the skin maintains body temperature, stores energy and allows us to indulge our sense of touch. Skin gets its protective properties from its three-layer defense system: the epidermis (the outermost layer), the dermis and, below both, a fatty layer. Each is assigned a specific job to safeguard the body.

Skin Basics

The darker a person's skin is, the higher its melanin content. Melanin is a pigment produced by cells in the epidermal layer. The pigment is what gives darker skin its color. Melanin's main function, however, is to filter out sunlight's ultraviolet (UV) rays. UV rays can damage DNA, harm the skin and even cause cancer. What's important to know, though, is that even though the increased melanin content in darker skin makes it less susceptible to sunburn, photoaging and skin cancer, people of color have higher mortality rates than whites for several kinds of skin cancers. The reason? Detecting skin cancer late or misdiagnosing the condition.

It's important to stress here that although some Latinos have darker skin does not mean that they can bask in sunlight and scorn sun protection. In fact, two of the three types of skin cancer are most likely to develop in people of color.

The three types of skin cancers (in order of the danger they pose to people of color) are malignant melanomas, squamous cell carcinomas and basal cell carcinomas. Malignant melanomas are caused by overexposure to sunlight and other forms of UV rays (for example, artificial light).

Squamous cell carcinomas can occur anywhere on the body. However, they are most common on skin exposed to sunlight. In addition, skin that remains unprotected with sunscreen, such as the ears and lips, is especially vulnerable to attack.

Basal cell carcinomas (BCCs) arise in the skin's basal cells, which line the deepest layer of the epidermis, and are usually caused by a combination of cumulative and intense, occasional sun exposure.

But, returning to basics, in addition to containing cancer-fighting melanin, black skin has more numerous and larger oil glands, and the hair follicles tend to be larger. As a result, black skin tends to more oily, although it is less acne-prone.

Common Skin Problems

Acne keloidalis nuchae (AKN) are hard-to-get-rid-of bumps most often located on the back of the neck. The culprits are usually ingrown hairs resulting from close shaves. The bumps are also caused by at-home shape-ups or barbershop visits that leave nicks or cuts from a razor.

Acne rosacea is not typically associated with dark skin, but the chronic skin disorder does occur in people of color, especially those of mixed heritage. The condition's main feature is a reddening of the facial skin, which can look very different depending on skin tone. The condition often goes undiagnosed or misdiagnosed in people of color.

What causes rosacea is also unclear, but researchers believe it may be triggered by an infectious microorganism or by over-reactive blood vessels or blood vessels lacking tissue support. Rosacea is worsened by spicy foods, hot drinks, alcohol, sun exposure and a hot climate.

Cosmetic-induced pigmentation problems are discolorations caused by cosmetic procedures, such as chemical peels and microdermabrasion (a smoothing and refining process). These resurfacing procedures treat common superficial skin problems such as acne, stretch marks, facial aging and scarring.

Drug-induced pigmentation problems are sometimes caused by medications taken for ailments such as hypertension, diabetes and heart disease-conditions that particularly affect African Americans and Latinos. In addition, dark patches on the skin (hyperpigmentation) may be caused by photosensitivity (reaction to sunlight) or by allergic reactions to common meds.

Eczema causes disfiguring skin discolorations resulting in both hyperpigmentation and hypopigmentation (pigment loss). The disease is difficult to diagnose in people of color because it may appear differently than it does in whites.

Also, eczema may accompany asthma and hay fever. When it does, it is called atopic dermatitis. The condition appears during childhood or adolescence and continues through adulthood. It is characterized by flare-ups, ranging from mild skin irritation to severe rashes caused by temperature extremes, stress, excessively dry skin, irritants and allergies.

Hyperkeratosis (thickened skin) is a gender-related disease occurring in women of color. It's caused when excessive keratin, a protein, thickens the skin's outer layer. The condition may appear anywhere, but it usually targets the elbows and knees, palms and soles (especially the

heels), back of the arms, front of the thighs and inside the knees.

Also, ichthyosis, an inherited form of keratosis, results in dry, scaly skin.

Keloids are abnormally large scars that form at the site of skin injuries or trauma. Although they appear in all races, keloids most often affects people of color, especially those with a family history of the condition. Keloids may be found anywhere on the body, but prime locations include the chest, back, arms and earlobes.

Melasma is a skin pigmentation disorder caused by dysfunctional melanin-producing cells. It causes irregular brown or grayish-brown marks, usually on facial skin-particularly on or near the nose, cheeks, forehead, upper lip and chin. Melasma discolorations also may occur on other body parts, such as the forearms and neck.

Post-inflammatory hyperpigmentation (PIH) occurs when melanin-producing cells (melanocytes) make too much pigment, often as a result of skin injuries such as scratches, burns, cuts, bruises, rashes, acne, sunburns, surgery or cosmetic procedures. If the excess melanin is produced in the skin's upper layer (the epidermis), the pigmentation color is a darker shade of brown. If the extra melanin is produced in the skin's lower layer (the dermis), skin exhibits a gray or blue discoloration. These discolored areas may be the size of small spots, or they may spread over larger areas in patches.

Pseudofolliculitis barbae (PFB), or ingrown hairs, is an unsightly skin condition caused by cutting hair on the head and shaving facial hair close to skin. The hair of darker-complexioned men of African-American or Latino descent grows almost parallel to the skin's surface, and it's tightly curled. As a result, when hair is cut, the remaining barb-like follicles often puncture the skin and become ingrown. The results are dark marks and bumps (razor bumps) on the cheeks, chin, jawline, neck, head and groin area. In some cases, the hair follicles may become inflamed because of infection, occlusion (absorption of foreign substances), irritation and specific skin diseases.

Psoriasis is a chronic, recurring inflammatory disease of the skin and joints that causes red scaly patches on the skin. These patches are areas of inflammation and excessive skin production. The condition is not confined to those with darker skin, but skin color does affect how pronounced these scaly patches appear.

Seborrheic dermatitis is a common condition that that mainly affects the scalp but also oily areas of the body, such as the face, sides of the nose, eyebrows, ears, eyelids and chest. This condition usually causes scaly patches, red skin and stubborn dandruff. And when the condition goes untreated, the area of skin involved may become lighter or darker than the normal skin tone.

The cause of the condition is uncertain, but some doctors believe that a yeast infection of the skin triggers the body to mount an immune response. Seborrheic dermatitis is often confused with other skin disorders, such as eczema, tinea versicolor (a fungal infection) and psoriasis. In African-American and Latino children, the disorder may be mistaken for ringworm (tinea capitis).

Skin pigmentation conditions are problematic for darker-skinned people in particular because of the very thing that provides sun protection--melanin. This pigment also makes people of color highly susceptible to skin discoloration problems, such as post-inflammatory hyperpigmentation (PIH), drug-induced pigmentation, cosmetic-induced pigmentation, melasma and vitiligo.

Vitiligo is a skin disorder characterized by white patches on the skin, in the hair and on the lips and genitals. Although vitiligo occurs in all racial and ethnic groups, it is significantly more noticeable on darker-skinned people. What causes vitiligo is unclear, but doctors believe the disorder may be related to family history, a disorder in which your immune system attacks and destroys the melanocytes in the skin, or a trigger event, such as sunburn, stress or exposure to industrial chemicals.

Quick Tips
How to lavish love on your skin.

* Develop a basic skin care regimen

Daily maintenance, repair and prevention are crucial to healthy, flawless skin. Consistently clean, tone, moisturize and exfoliate your skin.

* Drink lots of water
Water is an essential component of your blood. It’s blood that feeds your skin cells with nourishing oxygen. Make sure to drink enough pure, clean water each day.

* Educate yourself about your skin
Know how to properly care for your skin, including what conditions people with black skin are more susceptible to developing and what products, cosmetics, medications and procedures are appropriate and safe for your skin.

* Take sun protection precautions
Sun protection isn’t limited to sunscreen. It also includes the following:

- Limit how much time you spend in sunlight, especially when the sun is highest overhead
- Apply sunscreen if you are going to be exposed to sunlight
- Cover up to shield your skin from sunlight’s UV rays
- Wear sunglasses or other protective eyewear
- Check meds to ensure they don’t increase your skin’s sensitivity to UV rays
- Use appropriate treatments for sunburns should they occur

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