

THE LONDON DERMATOLOGIST'S:

Top Ten Winter Skin Care Tips

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Moisturise More

It might be sleeting outside, but winter is drying on the skin. This is because of a phenomenon dermatologists call trans-epidermal water loss, in other words, how much water your skin loses from its surface by evaporation. This is controlled by a number of factors:

Firstly an individual's natural skin structure which is controlled by their genes. It's a little like a waterproof jacket. Some of us are lucky to have Gore-Tex-like skin with good barrier function, but some people have skin which is genetically slightly more 'leaky', perhaps because they are missing a key protein that holds the skin cells tightly together. If you have naturally more leaky skin, it will lose more water and you will be naturally more prone to dry skin.

Secondly, natural skin oils, or sebum. Your skin's sebum glands make water-resistant oils which coat the surface and help keep the skin soft and hydrated, reducing the evaporation. As we get older our skin's natural oil production reduces, making us more prone to dryness.



Thirdly, outside humidity makes a big difference to skin water loss. The less water there is in the air, the more evaporation there is from the surface of the skin. In winter we spend longer inside, where the central heating is on, the air is dry and the skin loses more water. A little like a drying river bed, as the skin loses water in the dry air it cracks.

The one sure way of making dry-prone skin worse in the winter is to use soap. Soaps and shower gels may be natural, may feel soft and smell attractive, but anything that lathers on the skin works as a detergent. And detergents, like Fairy Liquid on greasy pans, are great at doing one thing: taking oil away. This is exactly the wrong thing for dry-prone skin.

So instead, put away your shower gels and wash with a moisturising cream, like CetraBen or Aveeno, which will clean your skin and leave it soft. Make sure showers are not too hot and if possible spend no longer than a few minutes under the water. A hot powerful jet of water blasting on the skin for 20 minutes also washes a lot of the natural oils away. If your skin still has a tendency to dry then put plenty more moisturiser on after the shower and leave it on to settle in.



Look after your hands

Our hands are very susceptible to dryness in the winter. Dry air, central heating, exposure to temperature changes and most importantly, contact with irritating soaps and hand washes cause a condition called irritant dermatitis. This leads to skin scale and redness over the knuckles, exaggeration of the lines and wrinkles on the hands and painful cracking of the tips of the fingers.

People who had eczema when younger are more prone. Young parents are also more likely to experience this, because of regular handwashing during childcare. Hairdressers, doctors, nurses and other jobs where regular hand washing is important are also more likely to have trouble. The solutions are simple, but need careful attention.

Soap is your enemy, not your friend. Keep your hands supple by washing with a moisturising cream, or at the very least put moisturiser on after you wash. *Dermol cream* is a good choice because it contains an antibacterial that will kill germs on the hands as it moisturises.



Use a good night cream, perhaps one containing urea, which improves skin hydration. My favourites are *Calmurid* and *Neutrogena*. If your hands get really dry and you need a great rescue treatment then buy some white cotton gloves from a pharmacy or online and slather your hands with these moisturisers overnight then sleep with the gloves on top.

Other tips for those with troublesome hands include minimising contact with water during food preparation such as when cleaning vegetables or washing up. When you are outside wear gloves to protect the skin, which keeps them warm and hydrated.

Some people experience real problems with cold painful fingers in the winter, a condition doctors call Raynaud's phenomenon. Sufferers find that on a cold day their circulation to the fingers, and sometimes toes, shuts down. The extremities get icy cold, go white and numb. The tips of the fingers may even go slightly blue. On returning to a warm environment the fingers go red and become painful. If you have these symptoms you should discuss it with your doctor.



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Foot Care

Like the hands, the feet can also suffer in the winter months, and often the most affected is the heel. The skin on the feet is very specialised and different from elsewhere. After all, it needs to be thicker and tougher to take the weight of the whole person be they standing, walking or playing tennis.

Heel skin is often very thick and can dry and crack in an unsightly way, or even begin to cause pain. This is particularly common in older women. The answer is moisturiser with a high level of urea. My favorite is *CCS Heel Balm* which contains 20% urea and works a treat. For very stubborn heel cracking use this liberally under cotton socks at night and for an emergency rescue treatment apply it then cover with Clingfilm for a night or two. This pushes all the moisturiser into the skin and works beautifully.



4

Control Facial Flushing

We all flush, but some of us much, much more than others. A flush is caused by the body's nervous system diverting more blood to the surface which makes the skin appear red and feel warm. It's quite normal to flush when exercising or when overheating and normally flushes last a few minutes.

For some people, though, flushes can become a major problem which seriously affects their lives. For these people, who have a common skin condition called rosacea, flushes come on very easily, perhaps after a cup of tea or under a little emotional pressure for example at a work meeting. The flushes last much longer, perhaps a couple of hours and can be unsightly, uncomfortable and significantly affect confidence.

People with rosacea often find winter a difficult time. The constant moving from a hot, heated environment to the cold air outside and then back in again causes shifts in skin blood flow that can cause flushing that persists for over an hour.



Simple care to keep the face warm when outside using appropriate clothing and scarves may be helpful. The good news is that excellent treatments for facial redness and flushing are available.

Most effective are light treatments such as intense pulsed light (IPL) or pulse-dye laser. In trained hands and using the correct energies, this treatment can hugely improve flushing symptoms with benefits lasting several years after a course of treatment. Topical anti-flushing treatments and sometimes oral medication can also be very helpful.

Seeing a dermatologist with experience in these specific treatments is advisable. High street boutiques advertising IPL are very variable in quality, are unregulated, may give inappropriate advice and will not have access to a dermatologist who can advise on the full range of treatments that are available.

A close-up photograph of a person's head tilted back, with their hands lathering shampoo into their dark, curly hair. The hair is covered in a thick, white foam. The background is blurred, showing what appears to be a bathroom setting.

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Manage Hair Dryness and Dandruff

Our hair and scalps can suffer in the winter. Hair tends to be drier and may frizz more. Scalps may become uncomfortable, red, itchy and dandruff can begin to appear like unwelcome snowflakes.

Only shampoo as much as your scalp needs to control excess oil. If you have dry hair wash less regularly, if oily, or if dandruff appears you may need to wash every day. Remember to massage shampoo into the scalp, not the full length of the hair, which may make it dull. Use a conditioner after every shampoo, using it on the full length of the hair.

Conditioners can significantly improve the appearance of dry or weathered hair by improving hair strength, reducing static electricity, improving shine, and offering some protection from ultraviolet rays as well as by reducing the tendency for the scalp to dry.



A 2-in-1 shampoo and conditioner may provide the same benefits at less cost. If dandruff begins to appear then try a specially-formulated anti-dandruff shampoo containing zinc pyrithone or selenium sulfide plus a conditioner.

A hair oil containing coconut oil may be useful. If dandruff continues to be a problem then obtain a ketoconazole shampoo, such as *Nizoral* from your pharmacist. This excellent anti-dandruff shampoo should be used 2-3 times a week, leaving the lather on for 3-5 minutes before rinsing.

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Manage 'Seb Derm'

Have you ever noticed a patch or dryness, redness or slight flakiness between your eyebrows, on the sides of your nose or inside your ears? Does it come on in winter? Then you may have had seborrhoeic (pronounced seb-or-ray-ik) dermatitis or 'seb derm' for short. It affects about one in twenty of us. Most people will have a dry and slightly itchy scalp, with dandruff and loose white scale.

The main cause of seb derm and dandruff is a reaction to the *Malassezia* yeast. The yeast is what dermatologists describe as a being 'skin commensal' meaning it actually lives normally and harmlessly on the skin of most people. But in certain people, who probably are genetically prone, their immune system reacts to the yeast and causes inflammation, giving the characteristic rash.



Seb derm can't be totally cured, but often symptoms can be controlled almost completely. Once-daily use of a facial moisturiser, and use of a hair conditioner after shampooing may be very helpful. Organic alternatives containing tea tree oil and essential oils can also be tried. Changing diet does not usually help.

The most effective treatment is a shampoo containing the yeast-busting medication ketoconazole (for example *Nizoral*) as just described. Try 1% hydrocortisone cream from the pharmacist twice a day for a week. If your symptoms still persist see your doctor or a dermatologist.



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Don't Forget UV Protection

Winter is a time when the nights are long, and in its depths, kids leave school in mid-afternoon in the dark. This is not a time when we should worry about the sun, right? Well, that is generally correct.

UV light is the main preventable cause of skin cancer, and of skin aging. But even most dermatologists, and that includes me, would not recommend using sunblock all year round. For high-risk people such as those who are already sun-damaged, very fair or who have been unlucky enough to have had a skin cancer, I would recommend a high-factor, broad-spectrum sunblock every day from April to October, but in the winter this is not required.

But be very careful in strong winter holiday sun, because at this time your skin is likely to be pale and much more likely to burn. Aim to come back from a winter break with your skin as close as possible to the colour you were when you went. Do not seek to tan and definitely, don't burn. Be especially careful on winter sports holidays where UV levels from reflected snow and altitude are vast and burning is really easy.



8

Remember Skin Surveillance

Skin surveillance means getting to know your skin, keeping an eye, and picking up important changes that might be early skin cancers yourself before they become advanced.

The best way to do this is to examine yourself naked in a full-length mirror approximately every 2-3 months, or by asking your partner to help you. If you have lots of moles then taking pictures of areas such as your back and legs can be useful as a baseline. What are you looking out for? Quite simply any new black or brown mole that is changing significantly in size, shape or colour especially if it is very dark, stands out from your other moles (we call this the 'ugly ducking sign'), or looks irregular with several colours.



Remember most moles like this will be harmless, but it is vital if you are not sure to see a doctor or a dermatologist who will be able to advise you better. Almost all skin cancer is curable if it is caught early.

Remember that most skin cancers actually occur on the head and neck. These tend to be skin-coloured or red, firm lumps which begin to crust and bleed.

What does this have to do with winter? Well, dermatologists see most skin cancer referrals in the summer, simply because people wear fewer clothes and tend to notice more of their moles. If people took more care to check themselves at other times of year there would be less delay in getting the care they need, meaning skin cancers could be picked up earlier.



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Look After Those Lips

Our lips often suffer first when the weather turns cold. These delicate structures covered with thin mucosa lack the waterproofing outer layer that skin has, and are devoid of oil producing sebaceous glands. As a result, they are sensitive to water loss, especially in the dry cold air, and can become cracked and sore.

They can also become very irritated by being picked or licked. Saliva contains chemicals which will further aggravate sore lips. With time lips can become inflamed, a condition called cheilitis. The key to avoiding all this is to use lip balms to provide a waterproofing seal that holds water back inside.

Often very simple balms work well, containing for example petrolatum, beeswax or shea butter. Avoid anything that causes tingling or stinging of the lips after applied, such as menthol, peppermint or other flavours or fragrances, as these may aggravate.



If you are in the mountains remember it is vital to use lip balms with added UV protection. Try a number of products until you find one that is comfortable for you. The key to prevention is regular use of the balm (every 2-3 hours) and to avoid licking and picking.

My favourite products are simple good old Vaseline, which is petrolatum can work wonders if used regularly, providing a great rehydrating seal.

Elizabeth Arden 8-hour Cream Nourishing Lip Balm which contains petrolatum, Shea butter and lanolin as well as some UV filters.

Burt's Bees is often popular with my patients and contain good occlusive agents such as beeswax coconut oil and lanolin, but the presence of peppermint may be irritating for some people.



10

Take Vitamin D

Vitamin D is vital to keep our bones healthy by preventing bone thinning and has many other benefits including boosting the immune system and preventing infection. It is obtained in two ways: mainly from the skin but also from certain foods. But there is a problem. Many of us are walking around with levels of vitamin D that are inadequate or insufficient, and this problem gets a lot worse in the winter because of the lack of sunlight. So what should we do?

The answer is really simple: Replace vitamin D with diet and oral supplements. This can be done naturally with foods that are high in vitamin D such as liver and fish or with fish oils or fish oil capsules. But probably the most reliable way is to take vitamin D capsules at a dose of 1000 international units a day, or if you are properly deficient, which can be checked with a simple blood test, 20,000 international units (one capsule) once a week.

Health Education England now recommends every single adult in the UK should take 1000 international units of vitamin D from October to March when skin production is really low.

Do you need specialist advice?

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