

DRY SKIN XEROSIS, ASTEATOSIS

What causes dry skin?

Several factors contribute to dry skin. Repeated exposure to soaps, solvents, hot water, and disinfectants are often at fault. These remove the lipid (oil) from the top layer of skin, allowing water to escape. Low relative humidity and dry, cold winds also “pull” water from the skin. For unknown reasons, certain people (particularly elderly persons) may be more prone to losing skin moisture.

TREATMENT OF DRY SKIN

Bathing

Bathe in lukewarm or cool water. Minimize soaping and scrubbing, limiting soap application to the face, feet, groin and armpits if possible. Use a mild soap such as Dove. More expensive glycerinated soaps are equally good.

Moisturizers (lubricants)

Within three minutes after every bath or shower, pat dry and apply a lubricant (moisturizer) to the entire body. It is important to apply this immediately after drying in order to trap any moisture remaining in your skin from bathing,

If the skin is still dry or itchy the rest of the day, apply moisturizing ointments creams or lotions as often as needed to maintain moist, supple skin.

Greasy or oily lubricants such as Vaseline jelly, Aquaphor, mineral oil, or “baby oil” are best, but most people do not like the greasy or oily feel. Good compromises that are more pleasant to use but still fairly effective are Eucerin cream or lotion and Nivea cream. There are a large number of other effective moisturizers. Examples include Nutraderm, Complex 15, Moisturel, Purpose Dry Skin Cream, and many others. Find a moisturizer that you like to use and will use religiously. In any case, do not pick a moisturizer labeled “for oily skin.” Pick one instead labeled “for dry skin.”

Products containing glycolic acid or lactic acid are also very effective, particularly with severely dry or scaly skin. The strongest of these, M.D. Forte, Neostrata, and others are available in our office, or LacHydrin is available by prescription. These may cause a burning sensation after application. Other products with less lactic acid include LacHydrin Five, Epilyt lotion, LactiCare, and Nutraderm 30. As your skin improves, you may be able to switch to less expensive standard moisturizers.

It is not necessary to spend large sums of money on “designer brand” moisturizing creams. These provide no advantage over inexpensive brands. Do not be misled by extravagant claims of special “skin rejuvenating” ingredients such as vitamins, collagen, elastin, or amino acids. Such products are not better than standard, inexpensive products.

Bath Oils will also help lubricate the skin. They may be added to the bath water (about a tablespoonful) or applied directly to the skin immediately after bathing (about one teaspoonful mixed in 1/4 cup of warm water can be used as a rubdown). Mineral oil can be applied directly to the skin but does not mix well in the bath water as the commercial bath oils do.

Many people find that oiled colloidal oatmeal, such as Aveeno, (no prescription required) added to bath water reduces itching and also helps to moisturize skin.

If oils are added to the tub, use a rubber bath mat to avoid slipping!

If you have significantly dry skin, do not rely exclusively on bath oils. Also, use regular moisturizing lotions, creams, or ointments as described above.

Clothing

Avoid wool or acrylic clothing in contact with the skin if these provoke itching. Cotton is usually tolerated the best. Launder with bland soaps and rinse thoroughly.

If you have developed a rash secondary to dry skin (so-called “asteatotic eczema”):

Your doctor will prescribe a topical steroid (cortisone type medication). Apply a thin layer twice per day only where there is a rash. When the rash is gone, discontinue use. However, continue the lubrication suggestions above as long as you have dry skin.