



## **DERMATOLOGISTS OFFER ADVICE FROM HEAD TO TOE ON WHAT TO EXPECT WHEN YOU'RE AGING**

*Hair loss, acne, rosacea and leg veins among the more common  
medical dermatologic concerns that come with age*

**NEW YORK (Nov. 10, 2009)** – Everyone expects their bodies to change as they get older. From wrinkles and sagging skin to brittle bones and aches and pains, the [aging](#) process is inevitable. In addition, there are a number of medical dermatologic conditions that surface with age that can cause people even more stress. Fortunately, dermatologists can help diagnose and treat these conditions no matter when they strike.

Speaking today at the American Academy of Dermatology's [skin](#) academy (Academy), [dermatologist](#) Debra Jaliman, MD, FAAD, assistant clinical professor of dermatology at Mount Sinai School of Medicine in New York discussed why [hair loss](#), [acne](#), [rosacea](#) and [leg veins](#) can occur as we age and some of the latest ways to treat them.

“When we age, a number of changes take place on and beneath the surface of our skin that can affect how we look and feel,” said Dr. Jaliman. “But while we might expect to see fine lines and wrinkles as the years pass, many of us might be surprised to wake up one day with adult-onset acne, thinning hair or embarrassing spider veins. The reality is that many dermatologic conditions are more likely to affect us as we age, and the key is to address these problems early to rule out more serious medical conditions and start proper treatment.”

### **Hair Loss Can Be Treated Effectively**

While many people are genetically predisposed to [hair loss](#), it becomes increasingly common with age. In fact, Dr. Jaliman noted that everyone over age 40 has less hair than they did when they were younger – even if the hair does not appear thinner on the surface.

The most common form of hair loss that affects both men and women is androgenetic alopecia (often referred to as male-pattern hair loss or female-pattern hair loss). In both genders, a miniaturization of the hair follicles occurs – meaning the hair stays on the head for a shorter period of time due to a short growth phase. As a result, a person will develop baby fine

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hairs that do not reach their full length or diameter. In men, this results in a receding hair line or baldness on top of the scalp. However, in women, the frontal hairline is not affected but there is visible thinning over the crown and at the part.

Before starting any treatment for hair loss, Dr. Jaliman stressed that it is important for men and women to see a dermatologist for proper diagnosis and to rule out a potentially serious medical condition, such as lupus, thyroid disease or iron-deficiency anemia. Other causes of hair loss include drug reactions, birth control pills, menopause or a diet lacking in protein.

To treat hair loss, several effective therapies are available for both men and women. For men with male-pattern hair loss, effective medical therapies that are FDA-approved include finasteride, a prescription oral medication, and minoxidil 2% and 5%, topical solutions that are available over-the-counter. For women with hair loss, minoxidil 2% is the only topical medication approved by the FDA for female-pattern hair loss.

For men and women who want a permanent solution for hair loss, Dr. Jaliman said that hair transplants are a good option, as surgical hair restoration has evolved in recent years and the results are much more natural than in the past. Now, single follicular units (or one hair at a time) are implanted in thinning and bald areas rather than clusters of hair, often referred to as “plugs.” To prevent future hair loss, Dr. Jaliman suggested that hair transplant patients supplement their treatment with a medical therapy recommended by their dermatologist.

### **Adult Acne Occurs More Frequently in Women than Men**

Often mistakenly considered a condition that only affects teenagers, [acne](#) can occur at any age and is very common in adults in their 20s, 30s and 40s. While acne that occurs during the teenage years generally affects more boys than girls, adult acne occurs more frequently in women than men. In fact, studies show that [acne](#) affects more than 50 percent of women between the ages of 20-29 and more than 25 percent of women between the ages of 40-49<sup>1</sup>.

Dr. Jaliman explained that the two main causes of acne in women can be attributed to [hormones](#) (referred to as hormonal acne) and cosmetics (known as acne cosmetica). In hormonal acne, an increase in the production of androgens (the male hormones present in men and women) can over-stimulate the oil glands and hair follicles in the skin – leading to hormonally-triggered acne flares, particularly in women.

To treat hormonal acne in women, Dr. Jaliman noted that there are several oral contraceptives available – three of which have been approved by the U.S. Food and Drug Administration (FDA) for the treatment of acne. While these therapies can be very beneficial, Dr. Jaliman cautioned that a patient must be carefully screened and matched with the right therapy before starting treatment, as some birth control pills actually can cause acne in certain patients.

In addition, time-released antibiotics that are now dosed by a person's body weight can be very effective, and laser and light treatments also can help treat acne lesions and reduce future breakouts in many patients.

For women whose acne is attributed to cosmetics, Dr. Jaliman advises patients to stop using these products and switch to a different brand that has been tested as non-comedogenic (does not clog pores). "With acne cosmetica, stopping use of the cosmetics is an important first step, but a dermatologist should still extract all the clogged pores and prescribe a topical medication for long-term clearing."

In addition, a type of acne that frequently occurs in [African-Americans](#) and is caused by hair products is pomade acne. Since African-Americans tend to have dry hair, they often use conditioners and products that are very oily to help add moisture to the hair. However, these products tend to be comedogenic and can cause acne breakouts in areas where they come into contact with the skin, such as around the hairline, on the forehead and at the nape of the neck. If this occurs, Dr. Jaliman said people should stop using these products and see a dermatologist to successfully clear the acne.

### **Rosacea Can Be Managed**

[Rosacea](#) is a chronic skin condition characterized by redness, swelling and vascular abnormalities, most commonly on the face, with varying degrees of severity. While it can occur at any age, Dr. Jaliman explained that rosacea commonly occurs in adults over age 50 and is three times more likely in women. Since there are many known triggers for rosacea – alcohol, spicy foods, ultraviolet light, heat and citric acid, for example – behavioral changes can help alleviate some of the symptoms. However, Dr. Jaliman noted that in most cases medications are necessary to treat rosacea.

“In the past, topical medications for rosacea were greasy and irritating, but now a new wave of topicals has been introduced that are lightweight and easy on the skin,” said Dr. Jaliman. “These new topicals include metronidazole and azelaic acid, and both are very effective for rosacea patients.”

Since UV exposure is a common trigger for rosacea, Dr. Jaliman stressed the importance of daily [sunscreen](#) use. With the introduction of new sheer sunscreens, Dr. Jaliman said that rosacea patients are more likely to use them because they are not greasy and are less likely to further irritate inflamed skin. “I find that the [sunscreens](#) that contain physical sunblocks, such as titanium dioxide and zinc oxide, work best for rosacea patients rather than chemically based sunscreens.”

### **Leg Veins Can Develop at Any Age**

The appearance of two common types of leg veins - spider veins and varicose veins – can develop at almost any age. While they often appear over time and typically affect those who are older, Dr. Jaliman noted that even people in their 20s can get spider or varicose veins. While both types of leg veins are genetic, there are differences in who is more prone to them and how they are treated.

Spider veins, also referred to as roadmap veins, are very tiny superficial blood vessels that increase in size over time. Those who are more susceptible to spider veins include women, women who are pregnant, and people who are on their feet regularly in their jobs.

“While spider veins can be unattractive and cause embarrassment for people, they are not painful and are very treatable,” said Dr. Jaliman. “Sclerotherapy, in which a sclerosing agent is injected into clusters of spider veins with very fine needles, is the gold standard for treating spider veins and dissolves the veins permanently in most cases in only two to three treatments. Lasers also are being used to treat spider veins, and your dermatologist will recommend the best treatment depending on the size of the vessels.”

Varicose veins are larger, dilated blood vessels that can be raised above the skin’s surface and occur from a malfunction of the valve. Those with a blood relative with varicose veins are more likely to develop them and being overweight can worsen the problem by putting more pressure on the veins. Unlike spider veins, varicose veins can cause the legs to feel sore or tired. Dr. Jaliman noted that new endovascular lasers are being used successfully to treat

varicose veins. With this procedure, the small tip of the laser creates a small nick in the vein and is inserted to completely dissolve the vein.

“Endovascular lasers are highly safe and effective in treating varicose veins and only one procedure is needed to dissolve the veins,” said Dr. Jaliman. “In most cases, patients can go back to work the next day with minimal discomfort, which is quite different from invasive procedures in the past that were performed in hospitals.”

Regardless of age, Dr. Jaliman added that people who notice any unusual changes in their skin, hair or nails should see their dermatologist.

For more information about aging skin, please visit the “AgingSkinNet” section of [www.skincarephysicians.com](http://www.skincarephysicians.com), a Web site developed by dermatologists that provides patients with up-to-date information on the treatment and management of disorders of the skin, hair and nails.

Headquartered in Schaumburg, Ill., the American Academy of Dermatology (Academy), founded in 1938, is the largest, most influential, and most representative of all dermatologic associations. With a membership of more than 16,000 physicians worldwide, the Academy is committed to: advancing the diagnosis and medical, surgical and cosmetic treatment of the skin, hair and nails; advocating high standards in clinical practice, education, and research in dermatology; and supporting and enhancing patient care for a lifetime of healthier skin, hair and nails. For more information, contact the Academy at 1-888-462-DERM (3376) or [www.aad.org](http://www.aad.org).

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<sup>1</sup>Collier CN Harper JC Cantrell WC et al The prevalence of acne in adults 20 years and older. *Journal of the American Academy of Dermatology* 2008; 58: 56-59.