

## Melasma

Melasma, also known as the “mask of pregnancy,” is light to dark brown, irregular, patchy pigmentation of the face. It is slow to develop and most commonly affects women with darker skin types. There are different types of Melasma: superficial type (epidermal), deeper type (dermal), or a mixed type. We may check your face with a special light or Visia Complexion Analysis to try to determine the depth and degree of your Melasma. This will help us to choose the right treatment for you.

### Causes of Melasma

1. Genetic predisposition
2. Pregnancy
3. Birth control pills, patch, or injection
4. Inflammation of the skin
5. Hormone replacement therapy
6. Progesterone

### Things that Worsen the Condition

1. Ultraviolet (UV) light
2. Visible light
3. Sunlight
4. Skin rash or inflammation/irritation
5. Heat

### Is there treatment for Melasma?

Most patients can be helped. One must keep in mind that it often takes years to develop Melasma and it will be an ongoing process to lighten the brown pigmentation. Treatment of Melasma involves a balance of being aggressive enough to lighten the pigmentation without causing irritation (which can promote further pigmentation).

### Current Treatments

The treatment of Melasma involves a combination of depigmenting (bleaching/lightening) agents, Glycolic Acid, TCA and Jessner’s Peel treatments, topical Vitamin-A (retinoids), topical Vitamin-C, sunscreen SPF 40+, and patience.

#### 1. *Sun Avoidance:*

Wearing sunscreen every day is extremely important. The sunscreen needs to be Broad-Spectrum (UVA/UVB) which means it must contain one of several ingredients: Zinc Oxide and/or Titanium Dioxide. These ingredients help to block the burning and cancer causing rays (UVB) as well as the rays that lead to skin aging and tanning (UVA). The sunscreen must contain a high Sun Protective Factor (SPF) of at least 40 or higher to be effective. Sunscreen should be reapplied every two hours if it has been washed off due to exposure to water or perspiration.

- a.) *Protective Clothing:* Wide-brimmed hats (4-inch brim or wider) and wearing long-sleeved shirts and pants are recommended. Protective sunglasses are also advised.
- b.) *Car Window Tinting:* Placing UVA and UVB tint on car windows is also helpful.

*Please see reverse side of page.*

## 2. *Depigmenting/ Bleaching Agents*

The active ingredients in the primary bleaching agents we use are:

- Hydroquinone: Glytone® Skin Bleaching Cream or Gel, Clinicians Complex® 6% Skin Bleaching Cream, and Groot's cream. **When using Hydroquinone, it is recommended not to exceed 6 months of use.** Patients should discontinue Hydroquinone for two months before resuming use of the medication again.
- Non-Hydroquinone: SkinMedica® Lytera 2.0, iS Clinical® Pro-Heal Serum, and Finacea (this medication may need to be used daily or twice daily for months for optimal results).

3. **Retinoids** (Tretinoin/Retin-A, Renova®, Differin®, Tazorac®): These medications are all examples of Vitamin A creams which are helpful to exfoliate the uppermost skin layer and even out skin pigment to promote a more even skin tone and color. These products can irritate the skin and should be used carefully. Occasionally, they will be formulated with cortisone cream to diminish redness; they should be used carefully to minimize any adverse skin reaction. Nightly use or at least 2 to 4 times weekly is encouraged.

4. **Glycolic Acids** (in the forms of peels, cleansers, lotions, and creams (Glytone® products): These products provide natural, gentle skin exfoliation to aid removal of surface pigment and to speed delivery of medication into the skin.

5. **Combination Products**: Many products exist that have a combination of active medications in them. We can prescribe special compounds at the pharmacy or compounding pharmacy that have various combinations of Glycolic Acid, high potency Hydroquinone, Retinoids, Vitamin C, and Cortisone to help provide a more rapid clearing of the pigmentation. We occasionally have a special cream compounded called "Groots" cream which is a combination of 8% Hydroquinone, a Retinoid, Vitamin-C, Kojic Acid, and Cortisone in the formulation.

6. **Freshening Peels**: There are a wide variety of gentle, superficial, in-office skin freshening peels to exfoliate the upper skin layer and accelerate removal of pigment, improving the evenness of skin color and tone. The peels are done in a series of 2 to 6 at several week intervals, in office, with minimal to no recovery time. The peel solution is selected according to your needs and skin sensitivities and can be mild or strong using such solutions as Glycolic Acid, Salicylic Acid, Jessner's and TCA. Our experienced staff will select a program suited to your needs.

7. **Laser**: There are occasional cases where a Laser may be recommended, or at least a test area may be recommended, to see how your skin might respond. These tests are done in only the most resistant cases. Several wavelengths of light may be used including a green Light (Q-switched Nd:YAG), red light (Q-switched Alexandrite), or Infrared lights (Q-switched 1064nm).

Treatment of Melasma can be very frustrating. Patience and diligent adherence to your prescribed program is required. Recurrence of Melasma after successful treatment can happen. Therefore, a patient must be vigilant about using treatments exactly as directed, as well as avoiding sun exposure. Using a sunscreen of SPF 40 or higher is strongly recommended.

To schedule a consultation or for more information, please contact us at **520.795.7729**.

Please visit our website at **[www.pimaderm.com](http://www.pimaderm.com)**.