

# How to take care of your patients with sensitive skin?

SKIN SENSITIVITY

FOCUS

Sensitive skin is generally defined as abnormal subclinical sensory responses to drugs, cosmetics and toiletries in the absence of visible signs of irritation. Common associated complaints include itching, burning, stinging, and tightness. Clinical experience suggests a much higher proportion of the population experiences sensitive skin.<sup>1</sup>

40–50% of women and 30% of men in the US, Europe, and Japan have reported that they have sensitive facial skin, this may be an underestimate.<sup>1</sup>

An atopic diathesis (AD, respiratory allergies) presents in 50% of women with sensitive skin

which is twice as high as the prevalence of atopy in the general population.<sup>2</sup>

Skin sensitivity and atopy are different diagnoses; however, there does seem to be a relationship between the two, with the atopic patient expected to experience more sensitivities. The underlying mechanism of sensitive skin is still poorly understood, although factors such as a defective skin barrier and increased vascular reactivity are considered as possibly involved.<sup>3</sup>



## How to manage the sensitive skin?

Suitable cleansers for sensitive skin provide cleansing benefits without compromising the barrier integrity. Therapeutic moisturizers are also indicated as an important adjunct to alleviate dryness of the skin and restore skin barrier function.<sup>3</sup>

Cleansing agents can expose the skin to irritants, such as surfactants, and can induce skin dryness and potential injury to the skin barrier but water alone is not recommended for cleansing. However, there were no discontinuations among patients using the non-soap cleansing lotion, which was also rated as causing the least irritation.<sup>4</sup>

Young adults	Mature skin
<b>Cleanse</b> <ul style="list-style-type: none"> <li>Cleansing lotion for women</li> <li>Cleansing bar for men (for best compliance)</li> </ul>	<b>Cleanse</b> <ul style="list-style-type: none"> <li>Cleansing lotion</li> </ul>
<b>Moisturize</b> <ul style="list-style-type: none"> <li>Morning: Moisturizing cream/lotion depending on environment and patient preference</li> <li>Evening: Heavy moisturizer</li> </ul>	<b>Moisturize</b> <ul style="list-style-type: none"> <li>Morning: Cream moisturizer with heavy moisturizer around eyes</li> <li>Evening: Heavy moisturizer</li> </ul>
<b>Sun protection</b> <ul style="list-style-type: none"> <li>Moisturizer with SPF 15</li> </ul>	<b>Sun protection</b> <ul style="list-style-type: none"> <li>High protection sunscreen</li> </ul>

Table: Cleansing and moisturizing for the patient with sensitive skin.<sup>3</sup>

In a study of skin irritation of six cleansing agents designed for sensitive skin, 60 patients used a bar and a lipid-free liquid cleanser in a paired-comparison design. Among users of the bar soaps, 41% of patients discontinued because of facial erythema.<sup>4</sup>

**For sun protection**, skin should be protected by a broad-spectrum sunscreen, a hat, and sun avoidance. Barrier protection such as cosmetics and sunscreens should contain silicones (dimethicone, cyclomethicone).<sup>3</sup>

**Regarding cosmetic foundations**, if used, they should be lightweight, with an integrated broad-spectrum sunscreen. Heavy cosmetics that are hard to remove should be avoided. Finally, green-tinted makeup and sunscreen can be used to disguise reddened areas.<sup>3</sup>

Therapeutic moisturizers are important adjuncts and augmenters of treatment, as they improve skin hydration, reduce susceptibility to irritation and restore integrity of the stratum corneum.<sup>6</sup>

## Sensitive skin

## What's to be done in practice currently?

- **Climatic conditions can influence treatment choices:** creams are used instead of greasy ointments in hot humid conditions. Patients are not eager to apply greasy ointments in hot, humid conditions and are generally not prone to using very thick moisturizers during the day.
- **Moisturizers may be recommended at night for certain patients with AD**, with use of special cleansers and bath oil in the daytime.<sup>3</sup>
- **Lifestyle considerations must also be taken into account.** There is a need for patients to understand that the use of moisturizers is an important part of treatment and that they accomplish more than just providing symptomatic relief.<sup>3</sup>

Dermatologists should advise patients on the use of moisturizers and cleansers, as well as irritants to avoid. Patient education is vital in improving compliance and overcoming patient tendencies to over-clean, and patients need to be aware that special cleansers and moisturizers form an integral part of their treatment.<sup>3</sup>



### Bibliography

- 1 - Kligman AM, Sadiq I, Zhen Y, et al. Experimental studies on the nature of sensitive skin. *Skin Res Technol* 2006; 12 (4): 217-22
- 2 - Willis CM, Shaw S, De Lacharriere O, et al. Sensitive skin: an epidemiological study. *Br J Dermatol* 2001; 145 (2): 258-63
- 3 - Gentle cleansing and moisturizing for patients with atopic dermatitis and sensitive skin. Cheong WK. *Am J Clin Dermatol*. 2009;10 Suppl 1:13-7
- 4 - Mills OH, Berger RS, Baker MD. A controlled comparison of skin cleansers in photoaged skin. *J Geriatr Dermatol* 1993; 1: 173-9
- 5 - Berson D. Recommendation of moisturizers and cleansers: a study of unmet needs among dermatology patients. *Cutis* 2005; 76 (6 Suppl.): 3-6
- 6 - Guidelines for the management of atopic eczema. Primary Care Dermatology Society 2000 [online]. Available from URL: [View the link to abstract](#)