



Dermatology Patient Education

Melasma

Melasma is a common skin condition. It causes brown to gray-brown patches on the forehead, upper cheeks, nose, upper lip, and sometimes neck and forearms. These patches often develop slowly and can last for many years.

WHO GETS MELASMA?

Melasma most often occurs in women. Only 10% of people who get melasma are men.

Some people are more likely than others to get melasma. They include:

- People with darker skin tones, including those of Latin/Hispanic, Asian, Indian, Middle Eastern, Mediterranean, North African, and African-American descent
 - People with skin of color are more prone to melasma because they have more active color-making cells in the skin (melanocytes) than those with light skin. Thus, they produce more pigment.
- Those living in areas of intense sun exposure
- People who have a blood relative who had melasma

WHAT CAUSES MELASMA?

The cause of melasma is not yet clear. It likely occurs when the melanocytes produce too much pigment (color).

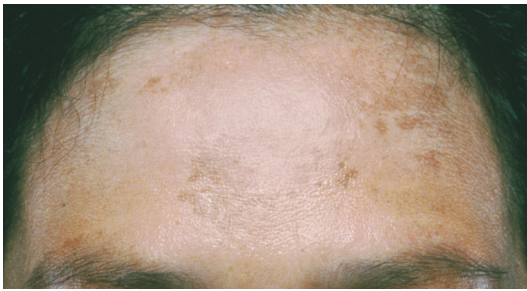
Common melasma triggers for women include:

- Sun exposure
 - Sun exposure can trigger melasma because ultraviolet (UV) light from the sun stimulates the melanocytes. Sun exposure triggers melasma, so it often worsens in the summer and improves during winter. Sun exposure is the main reason why many people with melasma get it again and again.
- Pregnancy or use of birth control pills
 - For women, hormones seem to trigger melasma. Melasma during pregnancy (often called chloasma or “the mask of pregnancy”) may result from an increase in hormone production. Melasma often occurs well past pregnancy and even if you are not taking birth control pills.
- Cosmetics or other skin care products
 - Choose gentle skin care products that do not sting or burn your skin. Irritating the skin may trigger an increase in melanocyte activity in people of all skin tones.
- Phototoxic medicines (drugs that make the skin more sensitive to sun damage, such as anti-seizure medication)
- Stress

The main risk factors in men seem to be sun exposure and a family history of melasma.

HOW DO DERMATOLOGISTS DIAGNOSE MELASMA?

Dermatologists typically diagnose melasma by looking at your skin or with a special lamp. In rare cases, other skin problems look like melasma. Your dermatologist may need to do a skin biopsy. A skin biopsy involves your dermatologist removing a small bit of skin, which is examined under a microscope, to rule out other skin conditions.



Melasma on forehead

HOW DO DERMATOLOGISTS TREAT MELASMA?

Sometimes melasma fades on its own. This is especially true after the trigger is gone, such as after a pregnancy, stopping birth control pills or eliminating sun exposure. Some patients, though, have it for years or even a lifetime.

If your melasma does not go away, you should talk with your dermatologist about treatment options. It may take a few months of treatment to see improvement.

Even with treatment, your skin discoloration caused by melasma may not go away completely. Depending on how much pigment you have and how sensitive your skin is, you may need more than one treatment to see a good result. It may take a few months to see improvement. Also, the treatment's effectiveness is different for each patient.

Complications can also occur when procedures are not tailored to the patient's skin type or are not performed by a dermatologist. It is important to carefully follow your dermatologist's directions during treatment to ensure the most benefit. This also will help avoid skin irritation and other side effects.

Sun Protection

Your dermatologist will recommend daily sunscreen use as the foundation of your melasma treatment. This is the most important part of treatment because the sun's UV rays can damage the skin even through clouds and windows, causing increased pigmentation.

When selecting a sunscreen, look for one that offers broad-spectrum protection (protects against UVA and UVB rays). It should have an SPF (sun protection factor) of 30 or more. It's also helpful to choose products that contain zinc oxide or titanium oxide. These ingredients physically block the sun's rays.

After your melasma clears, continue to wear sunscreen each day. This can prevent the melasma from returning. Reapplication every few hours is recommended.

Skin-Lightening Agents

Hydroquinone is the most common skin-lightening treatment and over-the-counter and prescription formulations are available. This treatment can take between 5 to 7 weeks for you to see improvement in your skin. Treatment often continues for at least 3 months.

Your dermatologist may have you combine skin-lightening products to enhance the lightening effect. For instance, your dermatologist may prescribe hydroquinone and a cream containing tretinoin, corticosteroids, or glycolic acid.

Chemical Peels

Chemical peeling involves applying chemicals to the skin to remove (exfoliate) dead skin cells. Chemical peels are best done in your dermatologist's office, where the strength of the peel can be adapted to your specific skin type. Stronger peeling agents tend to be more effective than lighter-strength peels. However, the stronger peels may also carry the risk of side effects. These include burning, excess skin peeling, scarring, and even worsening of the skin discoloration. There are over-the-counter peel products. Talk with your dermatologist before selecting one of these products.

Microdermabrasion

Microdermabrasion is a gentle, non-invasive skin resurfacing treatment. It uses rough, but very fine crystals to buff away the outermost layer of the skin. Then a vacuum-like device removes the skin that has been buffed away.

You should talk with your dermatologist before getting this treatment at a spa or using an at-home microdermabrasion kit. Complications with your melasma can result if the abrasion is too aggressive for your skin.

Laser Skin Rejuvenation

Lasers may be an option when the most common treatments do not work. Certain lasers are more effective than others in treating melasma. Sometimes two lasers are used to treat melasma: one to destroy melanocytes and the other to remove the pigment left behind. Laser skin rejuvenation is best performed in your dermatologists' office to prevent complications, such as burns.

HOW DO I MAINTAIN CLEAR SKIN ONCE MY MELASMA HAS FADED?

Though treatments are effective, they do not always cure melasma. Even if your melasma clears, you may need to keep treating your skin to sustain results. Your dermatologist may call this maintenance therapy. Maintenance therapy can prevent melasma from returning. The most important thing you can do to prevent recurrence of melasma is to protect your skin from the sun.



Melasma on cheek

TIPS FOR MANAGING MELASMA

In addition to wearing sunscreen, your dermatologist may recommend the following tips to help manage your melasma:

- Wear a wide-brimmed hat when you're outside
- Choose gentle skin care products: Any cosmetics (facial cleanser, cream, makeup, etc.) that irritate the skin may worsen melasma.
- Avoid waxing: Waxing may cause skin inflammation which can worsen melasma, so it's important to avoid waxing areas of the body affected by the condition. Ask a dermatologist about other types of hair removal that may be right for you.

A board-certified dermatologist is a medical doctor who specializes in diagnosing and treating the medical, surgical, and cosmetic conditions of the skin, hair and nails. To learn more about melasma or find a dermatologist in your area, visit aad.org or call toll free (888) 462-DERM (3376).

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