

At last a solution for hormonal pigmentation...

Are you ready for a brighter skin?



Hormonal Pigmentation, also known as Melasma, is a considerable problem for most women, especially for those living in sunny South Africa. It is a chronic skin condition that occurs on the face in the form of brown patches and is a dynamic (active) condition that needs lifelong management. According to research, hormonal pigmentation has a considerable impact on how one feels about oneself with many women feeling embarrassed, frustrated and even depressed if the pigmentation becomes chronic and does not fade with time or resolve after considerable topical treatments.

Dr Maureen Allem from Skin Renewal takes a look at innovative topical products and treatments that successfully treat this common problem.

What causes Hormonal Pigmentation ?

- UVA rays are a stimulant for melanin (brown pigmentation)

to develop on the skin and unfortunately can even penetrate through car window glass.

- Any change in hormonal status with higher levels of oestrogen is thought to trigger and aggravate the condition (ie. birth control pills and pregnancy). Discontinuing the use of contraceptives rarely clears the pigmentation and it may last for many years after discontinuation.
- After pregnancy hormonal pigmentation usually clears within a few months of delivery but may persist indefinitely.
- However many women without these risk factors also develop hormonal pigmentation.
- Any activities that cause intense heat to the face (from steam showers, hot closed environments, sitting on the beach even under cover and with full sun protection, etc) causes inflammation which is a powerful stimulator of melanin.
- It is more prevalent in darker-complexioned individuals though persons of any race can be affected due to the intense sun exposure in South Africa.
- Hormonal pigmentation is seen most frequently in young women but can even be seen in men.

Where does hormonal pigmentation appear?

- Hormonal pigmentation can occur on any part of the face but usually appears with a symmetrical pattern on the forehead, cheeks and jawline. On rare occasions, it can even occur on the forearms.

How can one prevent hormonal pigmentation from forming?

To prevent hormonal pigmentation one should:

- Avoid sun exposure and wear a protective hat when outdoors for extended periods to further block these rays.
- Use a broad-spectrum sunscreen with SPF 30+ to block the UVA rays every day

What are the different types of hormonal pigmentation and how are they treated?

The different types of pigmentation can be identified by observing the affected area under a Wood's lamp.

- Epidermal hormonal pigmentation is the most common form and is treated with topical therapy together with a combination of superficial or full epidermal chemical peels or pulsed light treatments such as IPL.
- If the pigmentation has leached into the dermis, this is

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Results after 0 weeks



Results after 4 weeks

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known as dermal hormonal pigmentation. The deeper the pigment is and the more difficult it is to treat. Dermal hormonal pigmentation is best treated with mid dermal combination peels such as a Lamelle Mela M or a Q switched laser which can penetrate into the dermis to reach the pigment together with topical therapy.

What are the exciting new developments in the treatment of hormonal pigmentation?

To date traditional cosmeceutical products as well as prescription medications such as hydroquinone or retinoic acid try combating hyper-pigmentation with unpredictable results or worse – they can cause hypersensitive skin, which in turn can aggravate the pigmentation.

Newly launched is Lamelle’s Luminesce, an advanced pigmentation program which addresses hyper-pigmentation by reducing eight pathways which produce melanin, as opposed to just one pathway as with traditional topical treatments. This wider inhibitory effect of these patented pigment reducing peptides is an industry first, positioning the Luminesce range as one of the most innovative.

How does Luminesce work?

- Luminesce uses groundbreaking peptide technology (Oligopeptide 34) for treating pigmentation and has recently added three new peptides namely Pentapeptide 15 and Oligopeptide 51 and 53 to the program which offer excellent results in combating hormonal and post inflammatory hyper- pigmentation.
- An added benefit is that the combination of peptides used in the range offers anti-ageing benefits to the skin as they stimulate collagen producing cells.
- Luminesce used twice daily for eight weeks will improve the appearance of pigmentation and age spots and is safe for use on all skin types unlike traditional skin lightening prescription products.

How should the skin be prepared before proceeding with any exfoliation treatment for hormonal pigmentation?

- As exfoliation procedures leave the skin more vulnerable to the sun, skin lightening products such as Luminesce should be used routinely for two weeks to down regulate and inhibit eight melanin producing pathways. After this period of time, peels can safely be done without the risk of post peel hyperpigmentation.

What in office treatments can reduce hormonal pigmentation:

- Epidermal hormonal pigmentation is the most common form of hormonal pigmentation and can be treated with pulsed light treatments such as IPL and a combination of superficial epidermal peels such as Beta, Glycolic and mild TCA peels.
- For more advanced pigmentation, full epidermal peels such as Mela T or Nimue Chemibrasion can be done .
- Hormonal pigmentation resistant to therapy is most likely

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What are Mela T® and Mela M® peels?

- Mela T® and Mela M® peels are full epidermal and mid dermal peels respectively for hormonal pigmentation that is resistant to treatment with normal superficial peels and IPL.
- They are both a three peel system for more advanced skin problems and are performed by trained therapists (Mela T) or doctors (Mela M).
- Using a range of synergistically functioning ingredients and penetration enhancers, these advanced peels can achieve similar results to far more aggressive and invasive peels in a more controlled, comfortable and well tolerated manner.
- Not only is patient comfort significantly improved over traditional deeper peels, but patient satisfaction and clinical results are assured.

What other problems can be addressed with exfoliation treatments such Mela T and Mela M® peels?

- Photo Ageing
- Actinic keratosis (pre cancerous rough lesions)
- Solar elastosis
- Solar lentiges (age spots)
- Fine lines in the skin
- hormonal pigmentation which is resistant to normal superficial epidermal peels
- Post Inflammatory Hyperpigmentation PIH which is the common blemish after acne has resolved
- Superficial acne scarring

Traditionally hormonal pigmentation has been a challenge for doctors to treat successfully. With new revolutionary topical therapies and innovative peel procedures, virtually any patient can be a candidate for a lightening of their pigmentation depending on the area. As each patient's case is different, treatments should be tailor made specifically for your circumstances. For best results, it is recommended that you are assessed by a medical aesthetic doctor. An appropriate exfoliation treatment plan together with long term maintenance program will then be recommended dependant on expectations, budget, time and medical conditions. If the above recommendations and treatments are followed, after a period of time, the pigmentation does fade but as hormonal pigmentation is a dynamic condition that needs to be managed daily and indefinitely, one day of unintentional sun burn can set you back.

Photos courtesy of Lemalle Research Laboratories



Results after 8 weeks



Results after 8 weeks