MELASMA: Prescription For Change

BY KRUTIKA PATEL

Whether you are 17 or 71, the desire to be desirable never goes away. Certainly, the issues change — from acne to wrinkles, menses to menopause — but the longing to look good remains. Indeed, it’s not vain to want to look as good as you feel. Because clear, radiant skin is a natural outcome of health and well-being, a luminous, even-toned, unblemished complexion is a very precious asset.

So what happens when that asset suddenly goes haywire, causing freckles to enlarge and brown splotches to appear overnight? Chances are the culprit may actually be a condition called melasma.

Though the true cause of melasma is still not known, most experts agree that hormones and sun exposure are at the heart of the problem. Both trigger the production of excess melanocytes — the cells that produce melanin, the pigment that gives skin its color — causing a symmetrical darkening of the complexion, usually concentrated on the upper cheeks and forehead. It is up to 10 times more common in women than men, appearing between the ages of 20 and 40, and while it affects women of all ethnicities, darker complexions tend to have the most persistent forms. Melasma can occur at either the surface level (superficial melasma) or in the deeper layers of skin (dermal or deep melasma), giving it more of a spread-out appearance.

While melasma is definitely a very challenging problem to treat, it’s not impossible. Hyperpigmentation has a variety of causes, but with an array of treatments available, from the tried-and-true to groundbreaking, you can get rid of discoloration for good.

Chemical peels and light treatments are slightly more aggressive procedures that utilize strong chemicals or intense pulsed light (IPL) technology to remove the top layer of discolored skin. Some treatments can be uncomfortable and your skin may be red and flaky for several days. (These effectively treat sun spots on the hands as well as the face.)

Ablative lasers like Fraxel help break up stubborn or deep spots by creating microscopic wounds at the dermal layer. Typically skin will turn red, then dark for seven to 10 days before healing and flaking off. Darker skin tones may experience blistering or discoloration, so be sure to consult with your physician about the right treatment for your skin.

Topical medications such as hydroquinone and Retinoids are commonly prescribed for melasma. These do not work for all skin types, and they can take up to six months to visibly lighten. However, new to the market is a prescription-only melasma cream by Trinity Medical Pharmacy. Custom compounded by a highly trained pharmacist in Trinity’s local, state-of-the-art, PCAB accredited laboratory and pharmacy, this melasma cream combines Hydroquinone and Tretinoid with a groundbreaking technology that delivers faster, more visible results. Since the cream is compounded at the time of order, it has no preservatives and is paraben-free, and as a prescription, it’s covered by many insurances.

For long term success, the most effective treatments combine laser treatments with topical medications like Trinity’s Melasma Cream.

No matter what protocol you follow, sunscreen has never been more important. With melasma, it’s important to wear a broad-spectrum SPF 30 sunscreen (blocking both UVA and UVB rays) — one with zinc oxide or titanium dioxide. Wear your sunscreen every day, even cloudy days. And be vigilant. Skipping even one day can undo all of the melasma treatments you’ve undergone thus far.

Once you find a regimen that works for you, stick with it—even if it requires a lifetime of maintenance—to prevent your discoloration from ever returning.

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