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Pigment problems

Understanding skin pigment Normal skin contains cells that produce the pigment melanin. This is responsible for all the shades of skin colour from pale tan to dark black. The pigment cells can be over active, under active or in the wrong place. Many different diseases can cause pigment problems. Some are rare such as Addison's Disease, others are common such as fungal infections. Moles that are changing in character need a specialist opinion to check for skin cancer. An accurate diagnosis is therefore important for all pigment disorders as they can occasionally signify serious disease. A biopsy may be required to confirm the diagnosis. A consultation with a private dermatologist costs £200 and is payable in advance for new patients. The doctor will make a diagnosis and discuss possible ways of helping. For many pigment problems there is no easy solution.

It is recommended that you let your GP know you are planning to see us; they may want to write a referral letter. In any case we will want to write back with our findings. It is important that your GP is able to keep an overview of your health. If your concerns are purely cosmetic you may refer yourself.

Here are some causes of darker marks on the skin, with the commoner causes first:

Melasma is a fairly common disorder that causes dark, blotchy patches on the face. The patches darken with sun exposure and will usually look better in the winter. Although men can develop melasma the condition usually affects women. Birth control pills or hormone replacement therapy can cause it. It can also occur during pregnancy when it is called chloasma. This type of melasma usually disappears after a baby is born — but not always. It is worth avoiding sun bathing when you are pregnant to try and prevent chloasma. Women who have chloasma should wait several months after delivery before contemplating a cosmetic procedure, as the marks will often improve on their own. Women taking birth control pills who experience melasma should consider an alternative method of contraception. Changing pills, however, will usually have no effect on the hyperpigmentation you already have. The dermatologist may suggest prescription bleaching creams, and/or a peel.

Solar Lentigoes or age spots are flat, brown discolorations of the skin that appear on sun exposed areas such as the backs of hands and the face. Also known as liver spots, these harmless discolorations have nothing to do with how old you are or how well your liver functions. They are the result of years of sun exposure causing a local increase in pigment cells. The dermatologist may recommend freezing, lasering, or fading creams.

Post-inflammatory hyperpigmentation results from any inflammatory injury to the skin. Acne, particularly cysts or nodules, often leaves dark discoloration after a blemish heals. So can insect bites, oven burns, scars and eczema. Chemical peels or laser treatment can cause hyperpigmentation in susceptible individuals. Even seemingly innocuous things like leg waxing and electrolysis can leave you with dark marks. The degree of hyperpigmentation varies depending on which part of the body it appears. The darker your skin, the more prone you are to this type of hyperpigmentation. The dermatologist may recommend prescription creams, perhaps followed by a peel.

Moles are usually best left alone or cut out. This will always leave a scar. These biopsies cost from £180 plus £70 for laboratory analysis. If you and your GP are concerned about a mole that is changing in character, then an NHS referral is an appropriate option.

Seborrhoeic Keratosis are like age spots but have a rough surface. They can be frozen off with liquid nitrogen. Sometimes a pale patch remains. They tend to occur most on the chest and back.

Café au Lait Macules. About half of these can be improved with laser treatment, but they have a tendency to return.

Birthmarks. There are several sorts of pigmented birthmarks. Most are difficult to treat, but some can be improved with laser treatment. Naevus of Ota for example often does well although treatment may take a couple of years. NHS referral is an appropriate option.
