DERMATOLOGISTS TELL THEIR FRIENDS

From the biggest sunscreen mistakes to why you need to quit using soap, Karen Fittall asks Australia’s top dermatologists what they wish you knew about looking after your skin

SHOWERING

Stop using soap. And turn the water temperature down.

“Soaps usually contain harsh detergents that strip the skin’s natural acid mantle, which means it won’t accept any moisture you apply to it afterwards, and it can’t heal properly,” says Dr Adam Sheridan from Melbourne's Specialist Dermatology Surgery & Laser. “Instead, look for a moisturising cleansing bar or a soap substitute. They still clean the skin, but because they’ve got a neutral pH they’ll hydrate and preserve the acid mantle, which is the barrier that allows the skin to do what it’s made to do – defend our insides.”

Hot water takes a toll too, particularly in the cooler months, says Dr Cathy Reid, from Adelaide’s St Peters Dermatology and Skin Cancer Clinic. “The humidity in the air drops during winter, which dries the skin out, and then we make the problem worse by taking long, hot showers and spending time indoors with the heater on. Turn the temperature down and be vigilant about moisturising regularly when the weather’s cooler, to avoid dry skin and aggravating conditions like eczema.”

WRINKLES

You’ll need a prescription for the products that really work.

“The main ingredient to look for in an anti-ageing product that fights wrinkles is a retinoid, or vitamin A,” says dermatologist Dr Chris Kearney from Sydney Specialist Dermatology.

But while many products you can buy off the shelf contain vitamin A, he says, they don’t contain the active version – retinoic acid – which is what you need to reach the collagen in your skin. “Products containing active agents are only available on prescription from a dermatologist.”

MOISTURISING

An expensive product doesn’t work any better than a cheap one.

“The difference between the most expensive and cheapest moisturisers you can buy over the counter is usually very little, when it comes to how well they do the job,” says Dr Kearney. “So don’t equate cost with effectiveness.” In fact, if buying a less-expensive moisturiser means you’ll feel liberated to use more product each time, choose the cheaper one. “Quantity rather than quality can definitely matter most for moisturising the skin adequately. But, while you don’t want to skimp on cream, it is possible to use too much moisturiser, particularly on the face, which can lead to breakouts and congested pores. Work out the right balance for your skin.”
You're probably not applying sunscreen early enough. And rethink multitasking products.

“Your skin needs time to absorb sunscreen if you want to get the amount of protection promised on the label,” says Dr Sheridan. “So if you apply it when you’re already in the sun, for the first 20 minutes your skin won’t be as well protected as you’re expecting, and you could sweat or rub it off before your skin’s absorbed it properly. Instead, put it on 30 minutes before you go outside.”

Also, a tinted moisturiser or foundation with an SPF may not provide your face with enough protection. “Many only contain SPF15,” says Northern Sydney Dermatology’s Dr Elizabeth Dawes-Higgs. “And on top of that, you might not apply enough of the product initially, and forget to reapply it later in the day. It’s better to use a separate SPF30 sunscreen under your make-up, and then top it up during the day using a powder sunscreen.”
**SUNBURN**

*You’ll still get it when it’s cloudy, or even raining.*

“The warmth of the sun bears no relation to whether or not you’re being exposed to UV rays,” says Dr Sheridan.

Dr Reid agrees: “Unless it’s dark outside, UV rays are present. People often say they’ve got windburn if they’ve been in cold, blustery weather but the reality is, there’s no such thing as windburn. They’ve just been exposed to too much UV light and have been sunburnt.”

Windows don’t protect you either, adds Dr Sheridan. “UV rays can pass through glass, which means you can get burnt in the car or sitting behind a window.”

Both dermatologists recommend applying sunscreen to the face, hands and neck every day. “The messages about sunscreen use in different parts of the country and at different times of the year can be quite confusing,” says Dr Reid. “But if you apply sunscreen every day to the skin that’s always exposed, you know you’re covered.”

**INGROWN HAIRS**

*They’ve got nothing to do with your hair-removal technique.*

“They can occur whether you pluck, shave or wax because ingrown hairs are caused by the way the hair grows back, not how it was removed,” says Dr Dawes-Higgs. Rather than growing up and out of the skin, ingrown hairs curl back around. “Some people are more susceptible to them due to their hair type, but anyone can get them,” she says.

“Whichever hair-removal method you use, the best way to avoid ingrown hairs is exfoliating the area you’ve shaved or waxed twice a week to help the hair break through the skin as it’s regrowing.”

**DANDRUFF**

*Stop washing your hair so often.*

“People think dandruff has got something to do with hygiene – that they’re not washing their hair or scrubbing their scalp enough,” says Dr Dawes-Higgs.

“That’s not true and by washing your hair more often you’ll just make the problem 10 times worse, because it dries out the skin on the scalp. Fatigue and stress can make dandruff worse, but for the most part, whether you get it or not is more about genetics – quite often if you’ve got dandruff, so will other people in your family.”

Use shampoos designed to treat dandruff, but if that doesn’t work see a dermatologist for an official diagnosis. “Dandruff-like symptoms can also be caused by psoriasis, which requires different treatment,” says Dr Dawes-Higgs.

**STRETCH MARKS**

*You can’t prevent them, but there is a window for treating them.*

“Most people get stretch marks, and unfortunately there’s nothing you can do to prevent them, even if you pre-empt them for something like pregnancy,” says Dr Dawes-Higgs. “The skin just stretches too rapidly for any topical cream to be effective.” The better news is that there are some treatments that will improve their appearance, including topical vitamin A creams and laser treatments. “And the sooner you start treatment the better. You’re unlikely to see a lot of improvement to stretch marks that have been there for a few years.”

It’s also important to have realistic expectations. “I like to relate stretch marks to the same process as ripping a piece of paper in half. You can stick the paper back together but it’ll never look 100 per cent perfect, no matter what you do,” says Dr Dawes-Higgs.