ASK THE EXPERTS [Opinions/Expertise]

## In Face

A LEADING DERMATOLOGIST OFFERS INSIGHT INTO ONE OF THE UGLY WAYS THAT STRESS GETS OUR ATTENTION — BY COMING OUT THROUGH OUR SKIN.

By CHARLES E. CRUTCHFIELD III, MD

0

Right about the same time my marriage was going to pieces last year, I broke out in incredibly itchy, hard little bumps on my arms legs and the back of my neck. Now I can't stop scratching. How can I make this go away?

Stress can cause or contribute to an astonishing variety of skin problems. Some of these conditions are caused by biochemical and hormonal disruptions. While a specific diagnosis of your particular condition is impossible without a physical examination, what you're describing sounds

a lot like neurodermatitis, a stress-related condition triggered in the central nervous system. Neurodermatitis winds up causing abnormal growth in the nerve fibers close to the skin, sometimes creating small, hard and very itchy bumps known as *prunigo nodularis*. This results in a maddening scratch-itch cycle: Scratching the bumps induces more growth and more itching. This chronic condition can be difficult to resolve, but at our clinic, we've had good luck with a combination of prescription topical treatments and a special type of phototherapy. This method, in which the skin is exposed to gentle, narrow-band wavelengths of ultraviolet light, helps moderate immune-system activity and is useful for many types of psoriasis and eczema. Additionally, in some cases we've referred patients for psychological counseling to help them reduce and manage their stress, which, if left untreated, can negatively affect recovery and cause other health problems. I would recommend that you see a board-certified dermatologist about your condition as soon as possible. Nonprescription itch treatments are unlikely to help and can make matters worse.



I've had a bright pink rash around my nose, mouth and chin for the past few weeks, and it seems to be getting worse. Now the area has started to peel and scale. What's causing this? Perioral ("around the mouth") dermatitis is very common among women in their 30s, and while symptoms vary, the condition is usually characterized by pink to red patches with red bumps and pustules. While perioral dermatitis is sometimes caused by a reaction to hygiene or

skincare products, it can also be triggered by emotional or psychological stress, including anxiety and overwork. The most common offending agent is the prolonged use of a topical steroid. The rash can generally be eliminated by briefly treating it with a topical prescription anti-inflammatory cream. In some cases, internal antibiotics and other interventions may also be required.

I usually start my patients on a brief three-day treatment with a low-potency steroid cream, followed by at least 20 days of a nonsteroidal anti-inflammatory cream. This "pulse method" is necessary to avoid post-treatment flare-ups common with the more extended use of steroid creams (notorious for causing a rebound effect). As described above, self-treatments and applications of over-the-counter hydrocortisone creams and conventional moisturizers tend to worsen this condition, so avoid them. Once treated, perioral dermatitis can recur in some people, particularly in times of stress. The good news is, it usually responds very well to subsequent rounds of treatment and often goes away (and stays away) as mysteriously as it appeared.



My daughter is in high school and for the past three years, mostly during her final exams, she has been getting these strange, itchy blisters along the sides of her fingers and on the palms of her hands. They are uncomfortable, and I know they embarrass her. What can we do? The condition you are describing sounds like dyshidrotic eczema, which is common among stressed-out youth and adults, often on a seasonal basis. Scratching can worsen the discomfort and lead to skin thickening, so first off, encourage your daughter to resist the

temptation to scratch. She should also avoid overwashing or

picking at her hands. Second, arrange a visit with a dermatologist. Depending on the severity of the condition, he or she will probably prescribe a topical ointment, phototherapy and, if an infection is present, oral antibiotics. Some combination of these therapies will be effective in treating the eczema. Finally, encourage your daughter to pursue some stress-reducing activities like yoga or meditation. Helping her to better manage her academic anxiety could help prevent future outbreaks.

Charles E. Crutchfield III, MD, is a nationally recognized board-certified dermatologist, a Diplomate of the American Board of Dermatology and a Fellow of the American Academy of Dermatology. Dr. Crutchfield is also a clinical associate professor of dermatology at the University of Minnesota Medical School and the medical director of Crutchfield Dermatology in Eagan, Minn. (www.crutchfielddermatology.com).