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quick read

Clinicians treating pseudofolliculitis barbae must take care that the therapies they prescribe do not exacerbate the condition.

Banishing bumps

Variety of treatment regimens help to resolve pseudofolliculitis barbae

By Lisette Hilton
Staff Correspondent

Minneapolis — Charles E. Crutchfield III, M.D., has had a lifelong battle with pseudofolliculitis barbae.

“When I became a dermatologist, it’s one of the things I focused on,” he says.

Razor bumps tend to haunt men — especially those who shave their beards daily — in the neck area.

Dr. Crutchfield, who practices in Eagan, Minn., and is clinical associate professor of dermatology, University of Minnesota Medical School, says athletes who shave or wax their chests also seek treatment for the unsightly bumps and pustules that result from hair removal. Pseudofolliculitis barbae can occur anywhere hair is temporarily removed, whether by shaving, plucking, waxing or chemical depilatory.



Dr. Crutchfield

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Culprits

There are two causes of pseudofolliculitis barbae, according to Dr. Crutchfield: transfollicular penetration and extrafollicular penetration.

“Either curly hair or hair that is oriented to an oblique angle has a higher propensity to form razor bumps,” he says. “If you have curly hair under the skin’s surface, it grows straight into the sidewall. That’s a process called transfollicular penetration.

compliance is very high and results are much better,” he says.

Treatment should focus on getting rid of the offending agent, hair. And the best tool to that end is the laser, Dr. Crutchfield says.

“The laser works because you remove the

“Once you have the patient educated and onboard with the program, compliance is very high and results are much better.”

Charles E. Crutchfield III, M.D.
Minneapolis

“You can also have hair that’s really curly, grows out of the hair follicle and, then, curls and pokes back in (extrafollicular). The problem is that hair is made up of the protein keratin, which is one of the most inflammatory substances to the skin. You can get pustules and secondary infections, and it’s very painful.”

Treating the problem

One of the most important aspects of treatment, according to Dr. Crutchfield, is education.

“I think once you have the patient educated and onboard with the program,

offending and causative agent and everything clears. The real trick, though, is you have to differentiate between the melanin, or melanosomes, in skin and the melanosomes in hair,” he says. “If you don’t, it’s very easy to burn the skin while trying to get rid of the hair.”

Dermatologist can avoid burning the skin by spreading out the laser’s pulse duration. This is especially important when using laser hair removal on patients who have darker skin types.

“The laser is a good treatment for pseudofolliculitis barbae, but for dermatologists who are not familiar or skilled with lasers for

SPECIAL REPORT



treating skin of color, it's a real danger zone. You could have terrible burns and scars," Dr. Crutchfield says.

Even experienced dermatologists should always start with an inconspicuous test site, behind the ear, for example. Dr. Crutchfield's treatment regimen for pseudofolliculitis barbae generally includes using the laser once a month for four to six months; then, two to three times annually, to maintain a hair-free state.

"A lot of guys worry that they'll never be able to grow a beard. I point out that they don't grow a beard on the neck (where razor bumps often occur) and, even if you use the laser on their faces, if we stop treatment, hair will grow back within a year," he says.

Alternatives

For those who are not candidates for the laser because of side effects or expense, there are many other options. Dr. Crutchfield says he recommends these to patients:

- Use a razor with a guard to avoid cutting the hair too short.
- Use an oatmeal gel shave cream. It's slippery and doesn't irritate the skin.
- Shave with a hydrated beard. Hydrated hair, when you cut it, has a feathery tip. Razor-cut dry hair has a sharp, pointed tip and is more likely to repenetrate the skin and cause inflammatory pseudofolliculitis barbae.
- For men who shave on a regular basis, use a soft-bristle toothbrush at bedtime to gently massage (in a small, circular motion) the face and neck. That helps to take out hairs that are starting to grow in, so they don't continue growing throughout the night.
- For men who use an electric razor, use it on a low setting. Dr. Crutchfield says he tells patients that even though it doesn't feel

baby-bottom smooth, it looks clean-shaven. Give up the feel for the look, he says, to avoid razor bumps.

In severe cases, Dr. Crutchfield says he often prescribes oral antibiotics to decrease the bacterial load and an anti-inflammatory to calm the pustules. He then recommends using a topical anti-inflammatory and mild steroid, as well as using an aftershave lotion to treat the bumps.

Shaving tools

A lotion by ESBA Labs, called Bump and Blemish Fighter, may be one of the best options among less-expensive products. Dr. Crutchfield, who has no financial ties with the company, says he tried it and has used it on several patients in the past few months, with good early results. He does not yet know how the lotion works for the long term.

"It contains an anti-inflammatory, exfoliant and ingredients that fade away the dark spots. That's another problem with patients of color — they often heal with dark spots that are as bothersome as the razor bumps. This product helps get rid of that post-inflammatory hyperpigmentation," he says.

There are many products on the market that don't work, however, and could worsen pseudofolliculitis barbae.

"Anything that burns the skin (including inappropriately used lasers) doesn't work," Dr. Crutchfield says. "Other things that cause harm include cutting hair way too short, plucking and old-fashioned chemical depilatories. I have a small percentage of patients that can actually get away with using chemical depilatories, but, in general, the



A male patient suffering from pseudofolliculitis barbae on the chest (top), occurring after shaving, and a male patient suffering from the condition on the face and chin area. (Photos: Charles E. Crutchfield III, M.D.)

creams and powders that dissolve hair do more harm than good."

Most of the patients Dr. Crutchfield treats for pseudofolliculitis barbae are pleased with the outcome, he says.

"There are very few patients that I see that we don't improve to the point they say they're happy with their results," he says. "I think it's really important to educate patients that they don't want perfection to be the enemy of very good, especially if they use anything less than the laser. I want them to look in the mirror and say, 'It might not be perfect, but it's much better than it was. It doesn't hurt, and I don't have pustules.'" DT

Disclosures: Dr. Crutchfield reports no relevant financial interests.

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