

# Banishing blemishes

Beauty therapists see a host of unsightly and uncomfortable skin blemishes on a daily basis. **Janine Thomson** provides some solutions.



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## Post Inflammatory Hyperpigmentation (PIH)

Acquired hyper-melanosis can affect the epidermis or the dermis (or both) and leave very dark pigmented areas on the skin. It is imperative for the therapist to have a thorough knowledge of melanogenesis to determine what causes the inflammation that triggers the pigmentation. Are there ingrown hairs or pimples? I advise a pigment inhibiting topical treatment like Correctives Brighter Concentrate from Lamelle, in conjunction with a daily oral supplement with a high dosage of antioxidants to break down dermal pigmentation. Appropriate in-salon treatments include deep cleansing facials combined with chemical peels to address the acne, followed by a combination of the correct chemical peels and correct depth micro-needling to address the PIH.

## Depmatosis Papulosa Nigra (DPN)

DPN are numerous small, benign skin lesions or fibromas prevalent in

Fitzpatrick Skin Types V & VI. These lesions are darkly pigmented with or without scales, and found most commonly on the face, around the eyes, on the cheeks and neck area. They can appear in adolescence and increase with age. Some 40-50% of patients have a family history of DPN. The only treatment to remove these lesions flawlessly without leaving white or hypo-pigmentation marks is the Lamprobe, as this radiofrequency-based technology is suitable for African, Indian and Asian skin.

## Skin tags

Although unattractive, these are harmless growths that appear mostly on middle-aged men and women and are formed when the area of the outer layer of skin begins to overgrow and envelope collagen fibres protruding from the surrounding skin. They can

be found in areas where there is friction, and there is often a genetic component, associated with insulin resistance, or Birt-Hog Dube Syndrome, Acromegaly and Polycystic Ovary Syndrome.

Because these are raised above the skin, treatment is focused in the epidermis. The healing rate is quick and there is no risk of scarring or hypo-pigmentation as long as treatment does not cause inflammation. The Lamprobe option can be used safely on dark skin colours.

## Syringoma

These form when there is an overgrowth of cells within a sweat gland or suderiferous duct. The duct becomes enlarged by and clogged with extra cells, forming a hard, round, raised bump. They are benign, harmless and painless, but unsightly and uncomfortable, and normally affect people with diabetes, with a family history of Syringomas, or those living in very humid areas who sweat profusely and whose perspiration gets trapped under the cornified cells.

Treatment includes Lamprobe and BCA (Bichloracetic acid).

## Xanthelasma

These are soft yellowish plaques of lipids usually found underneath the skin in the periorbital area. They are very tiny to medium in size and some may be raised. Some individuals are predisposed towards them as a result of poor lipid metabolism. These lesions can also be removed non-invasively with the Lamprobe by drying up the lipids that have accumulated beneath the skin, working only topically on the surface of the skin in just one treatment. **PB**

Janine Thomson is the owner of, and full-time skin therapist at, the Skin & Body Clinic. She has been the distributor and trainer for Lamprobe SA (Pty) Ltd since 2011.

