



## Editorial

## Updates in the understanding and treatments of skin and hair disorders in women of color

*The color of skin is indeed intriguing for it evokes a plethora of societal perceptions, emotions, inclusions and exclusions, as well as understanding and misunderstandings.*

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Individuals with darker skin types comprise the majority of the global population. By the year 2050, the United States census data suggest that at least 50% of Americans will represent darker racial ethnic groups. There are myriad cutaneous advantages associated with deeply pigmented skin. The unique photoprotective effects of increased epidermal melanin minimize photodamage and decrease the incidence of skin cancer. However, the increased melanin content and the labile features of melanocytes in pigmented skin have several key disadvantages. Individuals with skin of color more often develop distressing disorders characterized by hyperpigmentation and hypopigmentation, which significantly impact quality of life.

Darker skin types, in particular, Africans and African-Americans are more prone to keloid formation. Fibroblasts are large and numerous in dark skin suggesting active biosynthesis. This heightened activity of fibroblasts is thought to play a role in the formation of keloids and hypertrophic scars.

Moreover, the unique morphologic hair features of individuals of African ancestry are associated with special grooming needs, procedures, and hair disorders often related to the grooming practices.

The article by Lawson C et al., *Updates in the Understanding and Treatments of Skin and Hair Disorders in Women of Color*, summa-

rizes basic science differences in skin of color and provides a very detailed overview of the treatment of acne vulgaris, melasma, and hair disorders.

The importance and significance of this article is substantial. From a historical perspective, until recently, dermatology residency programs lacked substantial curricula, which addressed the unique issues and needs of patients with skin of color. However, in the past 10 years, multiple dermatology departments in the United States have created "Skin of Color Centers" recognizing the need for greater knowledge, understanding and expertise in correctly diagnosing and treating skin diseases in darker racial ethnic groups.

Lawson C et al. in *Updates in the Understanding and Treatments of Skin and Hair Disorders in Women of Color* has increased our knowledge and understanding of acne vulgaris, melasma and hair disorders in women of color. This review should facilitate improving patient outcomes while minimizing diagnostic errors and therapeutic complications. Additionally, new data regarding morphologic and physiologic differences may indeed stimulate novel research addressing the pathogenesis and treatment of skin and hair disorders in darker racial ethnic groups.

Pearl E. Grimes MD FAAD

Director, The Vitiligo & Pigmentation Institute of Southern California  
Clinical Professor of Dermatology, University of California, Los Angeles