Dear Alice,

What is wrong with my face? It permanently looks sunburnt across my nose, cheeks and on my chin. Sometimes it appears worse than others. It is hot to touch and often bleeds. Typical rosacea treatments do not improve the redness or pain. I'm overweight but otherwise healthy. Thanks!

Answer

Dear Reader,

Dealing with pain on a regular basis can be really tough, especially when that pain is literally seen across your face. Equally (or perhaps more?) frustrating is that the treatments you've tried aren't working. Here's the thing: Not all products recommended for treatment of rosacea have been sufficiently studied. In fact, many over-the-counter skin care products contain ingredients such as acids, alcohol, or other irritants that could worsen your condition. Have you been working with a dermatologist or another health care professional? It may prove beneficial to make an appointment if you haven't already. While your symptoms do sound like rosacea, s/he can properly diagnose your condition. If you're a Columbia student, you can schedule an appointment with Medical Services on the Morningside campus via Open Communicator or by calling (212) 854-2284. If you're a student at the Medical Center campus, try reaching out to Student Health for further information.

So far, research suggests that the most successful of treatments for rosacea are creams and gels with either azelaic acid or the antibiotic metronidazole in them. Generally, it can take a few weeks for any improvement to be seen when using these products. Oral antibiotics may also be used to treat rosacea, mostly due to their anti-inflammatory properties, and tend to work faster than topical ones. Antibiotics belonging to the group called tetracyclines such as erythromycin or clindamycin are commonly prescribed, and there is evidence that doxycycline can help relieve skin redness. In very serious cases of rosacea, the hormone-like substance isotretinoin has been used, but it is associated with adverse effects. There are alternative therapies that have been touted as possible ways to treat rosacea, but there's no conclusive evidence that they are effective. This is why working with a health care provider can be so helpful? s/he can help you weigh the pros and cons of continuing your current treatment plan and help you navigate alternative therapies until you find one that helps and relieves symptoms.

Here's something you can begin doing now: Keep a diary of your symptoms and their potential triggers.
Certain things can trigger an outbreak of rosacea, but these factors differ from person to person. Generally, though, anything that makes the face flush could worsen your symptoms. These can include different types of foods (such as spicy foods) or alcohol, cosmetics, particular medications, and specific exposures (sun, wind, exercise, hot water). You may consider a few weeks of tracking your daily symptoms and including other details about your day such as the weather, food and drinks consumed, general mood, or cosmetics used. All of these factors could be potential triggers to the rosacea. Perhaps you will find some patterns that will help you in controlling your symptoms. In the meantime, there are a few things you can do which may help: Protect your face from the sun, avoid touching or rubbing your facial skin, wash problem areas with a gentle cleanser, avoid overheating, and use products that are labeled non-comedogenic. If you’re feeling self-conscious about the redness in your face, cosmetics could help make the problem less obvious. Just be careful that they don’t make your rosacea worse.

Rosacea is a chronic inflammation of the skin that is fairly common (affecting about 1 in 10 adults) and, in some cases, can last for years. Rosacea is more common in fair-haired and fair-skinned people, and in women. It usually starts in people over the age of 20 and causes redness in the face, papules, pustules and patches (red and yellow pimples), edemas and bumps on the nose, and symptoms affecting the eyes. Given the range and phases of symptoms, rosacea can be mistaken for acne or other skin problems like skin allergy or eczema.

In most people, rosacea is cyclic, so symptoms may flare up and diminish over a period of weeks to months. In other people, symptoms can stay the same for long periods of time or can steadily worsen over time if not treated. There is no exact cause, but some types seem to run in families. Researchers believe several things could be going on, including problems with the blood vessels in the skin, sun damage, an abnormal inflammatory reaction, or an adverse effect of some medications.

By the way, there are various rosacea support groups online where individuals share their experiences. You may consider checking one of these out for additional support. Columbia students on the Morningside campus can also make an appointment with Counseling and Psychological Services [6]. Students at the Medical Center campus can contact Mental Health Services [7].

Good luck finding a treatment that works for you!

Alice!

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