

Editorial Note on Melasma

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Editorial

Melasma can develop as a result of hormonal changes during pregnancy or exposure to the sun. This is a condition that women are far more prone to get than men. Melasma's earthy or dim earthy coloured spots appear on the cheeks, brow, nose, and chin on a daily basis. Melasma in women frequently fades on its own after pregnancy or when an influenced woman stops taking prophylactic medications. Melasma can be treated with skin creams. Melasma is a common skin condition. The disorder causes your skin to become dull and stained. When it occurs in pregnant women, it is also known as chloasma, or the "cover of pregnancy."

The illness is more common in women than in males, though it can affect men as well. Melasma results in staining spots. The patches have a darker shade of skin than normal. It usually occurs on the face and is balanced, with blemishes on both sides of the face harmonising. Melasma can also develop in areas of your body that are frequently exposed to the sun. Melasma is a tan or dark staining of the skin. Sun exposure, genetic susceptibility, hormonal fluctuations, and skin irritation are thought to be the causes of melasma. Although it can affect anybody, it is more frequent in women, particularly pregnant women and those who use oral or patch contraception or hormone replacement therapy drugs.

Melasma manifests itself as dark, irregular, well-defined, hyper pigmented macules to patches. Usually, these patches appear gradually over time. Aside from the cosmetic discolouration, melasma has no other symptoms. Patches can range in size from 0.5 cm to more than 10 cm in length, depending on the individual. It can be found in the Centro facial, malar, or mandibular regions.

Centro facial is the most prevalent, with patches appearing on the cheeks, nose, upper lip, forehead, and chin. Patches on the bilateral rami are classified as mandibular, while patches on the nose and cheeks are classified as malar. Melasma's actual cause is unknown. When the skin is exposed to UV light from the sun, melanocytes (cells in the dermal layer that transport the pigment melanin to the keratinocytes of the skin) are thought to be stimulated, resulting in melasma. Small quantities of sun exposure can cause melasma to resurface after it has disappeared, which is why people with melasma frequently get it again, especially in the summer.

Melasma is caused by a genetic predisposition, which is a crucial element in deciding whether or not someone will get it. People of African, Asian, or Hispanic ancestry who have the Fitzpatrick skin type III or higher are at a substantially higher risk than others. Furthermore, women with light brown skin types who live in areas with a lot of sun exposure are more likely to develop this illness.

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