Skin of Color: Cosmetic Procedures on the Rise

At a recent media event, experts from the Skin of Color Society addressed the growing demand for safe and effective cosmetic treatments for skin of color.

Noting that there are a lot of myths and misconceptions about aesthetic procedures for patients with darker skin tones, Miami dermatologist Marta Rendon, MD says she thinks it’s important to address two things: “Not only the myths and the misconceptions, but also the fact that the population in the United States is shifting and Latinos are going to be the number one minority in this country soon.” According to Dr. Rendon, “dermatologists are going to see more of these conditions and need to be prepared to treat those patients. Also the public needs to know what’s available in terms of special considerations for their concerns.”

According to Babar K. Rao, MD who practices in New York City and on the West Coast, patients with darker skin tones can be treated with the same procedures done in lighter skin types. “However,” he warns, “you have to be cautious and careful. Because of their pigment they can get frequent side effects that lighter skin may not get.” For example, he says, “If you are doing a chemical peel or if you’re doing a laser, you have to prepare the patient well in advance so that they don’t get discoloration or scarring. It is important for them to go to doctors who know about their skin.”

The media day helped inform the medical community as well as patients. “We wanted the media and public to be aware that you can do all these procedures,” Dr. Rao says, “but you have to be careful and go to a doctor who knows what to do with it.”

GATHERING DATA

The medical and regulatory communities are responding to increased demand for procedures by exploring the effects of interventions in different skin types. Dr. Rendon notes that the FDA is now requiring filler marketers to include patients of multiple skin types in their studies. “When you look at the original studies [for fillers] and you look at the amount of patients that were skin types four to six, it was very limited,” Dr. Rendon observes. “You would have five, six percent. So the FDA now has required a lot of these companies to go back and do studies including skin types four, five, and six. As a matter of fact I’m involved in a multi-center trial now with a product that’s been on the market, but the FDA has required them to do some further testing on darker skin types.”

The data will not only assure safety and efficacy but may further open the market. “I think not only are we going to have more data but by having additional data, I think we’re going to be able to have a larger patient population that would want to get these procedures done once they know that they can be done with really good results and be safe at the same time.”

Dr. Rao says there is clearly demand for injectables in patients of color. “Patients were always aware that they

FROM COSMETICS TO COSMESIS

For patients of color, there’s demand not only for cosmetic rejuvenating procedures but also for medical care that affords a good cosmetic outcome. For example, biopsies of darker skin can produce worse scars than in Caucasian skin, Dr. Rao says. Confocal microscopy may be a viable alternative to cutting.

“Basically you put it on the skin and you can look inside the skin cells without cutting. So it’s like a virtual biopsy,” Dr. Rao explains.

Dr. Rendon noted growing interest in the treatment of keloids with superficial radiation. “There is a machine from Sensus called SRT-100 that uses superficial radiation to treat keloid scars.” Dr. Rendon is doing studies treating keloids with superficial radiation. “We have it available, but we’re going to have more data on how to treat these keloids with that.”
I think we’re going to be able to have a higher patient population that would want to get these procedures done once they know that they can be done with really good results and be safe at the same time.”

can do chemical peels, for example, to make tone better. But most recently I have seen that patients are more interested in doing Botox and fillers.” Enhanced knowledge is part of the demand. “Initially maybe there was not much knowledge in the public that these procedures are as good for them as anybody else.”

**CONSIDER THE SOURCE**

Besides a need for cosmetic dermatologists to hone their skill, patients themselves require education, Dr. Rendon suggests. They need to know how to research providers and pick the best cosmetic surgeon for their needs. “My tips for patients that are looking for these procedures is to do a little research on your doctor, make sure the doctor is board certified. Make sure that they have experience doing these procedures. And if you’re darker skin tone, just see if this doctor has experience in treating darker skin types. Some of them have publications that are out there.”

Those dermatologists with experience and expertise in treating patients with darker skin tones should be sure to highlight that experience in marketing materials and share that expertise with patients.

"I think we’re going to be able to have a higher patient population that would want to get these procedures done once they know that they can be done with really good results and be safe at the same time.”

**CONSIDER THE SOURCE**

Besides a need for cosmetic dermatologists to hone their skill, patients themselves require education, Dr. Rendon suggests. They need to know how to research providers and pick the best cosmetic surgeon for their needs. “My tips for patients that are looking for these procedures is to do a little research on your doctor, make sure the doctor is board certified. Make sure that they have experience doing these procedures. And if you’re darker skin tone, just see if this doctor has experience in treating darker skin types. Some of them have publications that are out there.”

Those dermatologists with experience and expertise in treating patients with darker skin tones should be sure to highlight that experience in marketing materials and share that expertise with patients.