

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/the-practical-dermatology-roundtable/practical-dermatology-roundtable-the-role-of-adjuvant-skin-cleansing-and-moisturizing-in-treating-psoriasis-and-other-inflammatory-diseases-ch-5/56873/>

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Practical Dermatology Roundtable: The Role of Adjuvant Skin Cleansing and Moisturizing in Treating Psoriasis and Other Inflammatory Diseases, Ch. 5

Ted Lain:

Zoe do you think that we could take this data and apply it to any other sensitive skin skincare regimen? Or do you think that there are certain attributes of these Cetaphil products that make it more amenable and more the products of choice for our psoriatic patients?

Zoe Diana Draelos:

No, I think these results could be generalized to any inflammatory condition, atopic dermatitis, eczema. I think most of dermatology is the treatment of inflammatory diseases, whether it's infection induced, whether it's autoimmune induced, whether it's induced by something we don't fully understand. And so I really think skincare is an important part of everybody we treat. Even acne has barrier defects, right? The localized barrier of the lesion. So I think becoming the expert at skincare and customizing skincare regimens for all these various patient groups, I think it's a very important part of dermatology.

Ted Lain:

No, I agree. And do you think that there are attributes of the Cetaphil products that make them more amenable for this patient population? I know you mentioned the emolliency. Are there other ingredients and/or technology that make you think, OK, yeah, this is the product line to choose?

Zoe Diana Draelos:

Right. Well, the product line's dimethicone rich, and dimethicone is an oily substance,

But it's not greasy. It's called an astringent emollient. And the reason it's called an astringent emollient is a lot of times it's added to other formulations that may be heavy in mineral oil, heavy in shea butter, heavy in petroleum jelly. And the idea is that it makes it less greasy, less tacky, more spreadable. So that's one thing that gives the tactile texture with good occlusion, but not greasy, as you mentioned earlier. The other thing is there are acrylates in these products, and those acrylates are film formers. And what that film former does is it creates a film over the skin surface, and that film reduces transepidermal water loss while it's in place. Also, that film improves skin appearance by creating a smooth surface over the rough skin. It also improves tactile benefits with the acrylate because now you have it, it's kind of like putting varnish over a wood table.

When there's no varnish, you can get splinters in your fingers when the varnish is on, it's nice and smooth and high shine and polished. And that's the same thing that the acrylate does in a moisturizer is it creates that smooth surface and it creates that improved radiance or shine, which is light reflection off the skin surface into the eye of the observer. So those are some of the unique ingredients with unique attributes that we studied in this project.

Ted Lain:

And the cleanser, Zoe, that lipid-free cleanser is really important as well. It's low surfactant content and its ability to kind of de-grease the skin without removing the intracellular lipids, which we know are impaired in this inflammatory disease.

Zoe Diana Draelos:

Right. More traditional detergent containing cleansers, basically what happens is you put that detergent on the skin and since the skin barrier is defective, those surfactants actually penetrate into the psoriatic plaque. And those detergents actually emulsify the intracellular lipids. So not only are you removing environmental soils, you're further removing the intracellular lipids and you're removing them even deeper into the skin because you have this defective barrier. And then you're changing the pH of the skin too. You're alkalinizing the pH

because most of these detergent surfactant containing products are a little bit alkaline. We know that the skin has a better microbiome barrier at a slightly acidic pH, 5.52, so you definitely don't want to acidify the skin. And the other thing that happens is when you use a detergent and you are alkalinizing the skin, that's that tight feeling. A lot of people with psoriasis complaint tightness of their skin and detergents can magnify that.

And then the last thing that detergents can do is they're irritants. So they can perpetuate the inflammation by making the psoriasis even worse. So a lipid-free non-foaming cleanser that's not rich and traditional, they're called syndet detergent, synthetic detergents, or true detergents. Those products are important to the psoriatic because you want to get rid of those detergents. You want to hygienically maintain the skin, but you don't want to create all the issues that I just discussed.

Ted Lain:

Absolutely. And Cetaphil is from cetyl alcohol, right? It's a fatty alcohol. So it's one of those that you can apply and then you can wash, you don't even have to use water for the Cetaphil gentle skin cleanser. You can just take it off with a cotton ball, for example, and it leaves some moisturizing properties behind. So it makes a lot of sense to me to choose this kind of lipid-free cleanser. And then for all the reasons you just mentioned in the moisturizing cream, a wonderful, relatively lightweight cream for our psoriatic patients where it doesn't leave a greasy feel. It has that really great dry off and touch to it, very tactile friendly for our patients. And we've already talked about, Firas, how it reduces scaling and smoothness. And so that's really important.