PATIENT INFORMATION LEAFLET

COMMON SKIN CHANGES DURING PREGNANCY

The aim of this leaflet
During pregnancy you may see many changes to your skin. We would like to introduce you to some of these common, usually harmless but often unpleasant skin changes and explain what you can do to help them.

Skin changes during pregnancy include:
1. stretch marks (striae)
2. skin tags
3. changes in hair growth
4. pimple breakouts (acne)
5. pregnancy glow
6. spider veins and varicose veins
7. darkening of areas of your skin
8. darkening of moles and freckles - information in a separate leaflet

1. What are stretch marks (striae)?
Stretch marks are linear marks that most often develop over the breasts, belly, hips, and thighs. They begin as reddish purple lines and with time, they become white atrophic (like wrinkled cigarette paper) scars.
Stretch marks are common in pregnancy, 50% to 90% of pregnant women will get some. Even in the writings of the ancient Egyptians stretch marks of pregnancy were mentioned.

Do stretch marks cause any symptoms?
Rarely they may cause burning and itching.

What causes stretch marks in pregnancy and who gets them?
The exact mechanism is still unknown. It is commonly thought to be caused by rapid weight gain and subsequent stretching of the skin; although this is not proven.

Stretch marks are often seen in more than one family member, this means your sister and mother may have stretch marks. A personal history (e.g. appearance of striae during teens), and other genetic factors play a part in the development of stretch marks. They are more frequently seen in young women and in women who are overweight and have large babies.

When do stretch marks appear during pregnancy?
Usually around the 25th week of pregnancy, although some women develop stretch marks even earlier.

Is there a health risk if stretch marks are present?
No.
However, they can cause emotional distress.

What happens to stretch marks after delivery?
Most stretch marks fade after delivery and only very light-coloured lines remain.

Can stretch marks be treated or prevented?
No good treatment exists.
Olive oil massage, castor oil, cocoa butter, glycolic or fruit acids, homeopathic creams and/or oils are used; the effect of these is not certain, massage with olive oil possibly helps. Many expensive and often painful treatments are often tried without any effect, and we recommend avoiding these.

Daily massage of the skin with a simple moisturizer or olive oil may be tried and also the control of excess weight gain may partly help to prevent the development of stretch marks.

After delivery you may consider topical retinoid products, but retinoids are forbidden whilst you are pregnant, as they harm the baby! Other applications and laser treatment may be recommended by your dermatologist.

2. Skin tags (fibroma pendulum)
Skin tags are very small, 1-5 mm, loose, polyp like, skin coloured growths of skin that usually appear under your arms or breasts. The increased appearance of skin tags during pregnancy is hormonally induced at areas exposed to mechanical irritation. They may disappear after delivery. If they still persist, these tiny tags can be removed by your dermatologist.

3. Changes in hair growth
During pregnancy more hair goes into the resting phase, a particular part of the normal growth cycle of hair. This causes diminished shedding of the hair and is perceived as thickening of the hair. Three months after delivery the hair cycle normalizes causing temporarily more loss of hair in many women. This is called telogen effluvium. This process is usually completed six to twelve months after delivery. Thereafter the hair will usually be the same as before pregnancy. Pregnant women may experience hair growth in typical male sites for example the beard area. This phenomenon is also related to hormonal changes (more male hormones). Usually, it is not severe and not permanent. It tends to disappear within a couple of months after delivery.

4. Pimple breakouts (acne vulgaris)
The increased female hormones during pregnancy usually improve acne. But there may be worsening of acne in some patients; the entire skin is usually greasier (see also patient information for acne).

5. What is "pregnancy glow"?
During pregnancy the blood circulation of the skin is significantly increased which causes your face to be brighter. The increased production of hormones may stimulate glands that produce grease (sebaceous glands) to produce more sebum resulting in a shiny face. "Pregnancy glow" is an old fashioned phrase to describe this phenomenon. If you feel your skin to be too oily use an oil free cleanser or a mild alcoholic (50-70%) solution containing salicylic acid (1-3%) for cleaning your face. Cold and warm water is also useful.

6. Spider veins (spider angiomas)
Spider veins are collections of tiny dilated blood vessels that usually radiate from a central point. They may appear on the face, chest, or sometimes on the arms and belly. They usually fade or disappear after delivery. If not, they can be treated effectively by a dermatologist.

Varicose veins
Pressure on the large veins (blood vessels that lead blood to the heart) behind the growing uterus causes the blood flow to slow down in its return to the heart. The blood is "trapped" in the veins of the legs. Swelling of the skin around the ankles may develop; your legs may feel heavy and tired. In a later stage dilated veins of your legs - varicose veins – may appear.
In order to improve the circulation of the blood you should put your legs up when ever possible. Walking helps the circulation (your muscle pump) whilst standing and sitting for long periods worsens the blood flow. Supportive stockings or flight socks should be worn if you feel that your legs get swollen - special pregnancy types are available. If you have a family or personal history for the development of varicous veins or thrombophlebitis (inflamed veins) / phlebothrombosis (blood clots) you should consult your doctor.

7. Darkening of areas of your skin
Increased skin pigmentation is common particularly in dark skinned women in whom up to 90% may be affected. There is darkening of the nipples, genitalia, and linea alba (line on your belly). In some women recent scars will darken. The unsightly and sometimes distressing facial pigmentation called melasma or chloasma, also known as 'the mask of pregnancy', affects many women. It gets worse with sunlight, and can be reduced by the use of high protection factor (SPF 50) UVB and UVA sun screens. It usually disappears after pregnancy by itself, if not may it be treated with certain creams prescribed by a dermatologist.

This leaflet has been prepared by the EADV task force “skin disease in pregnancy”, it does not necessarily reflect the official opinion of the EADV.

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