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Synopsis: How can we achieve healthy skin for all?

Our skin is not only our biggest organ in both size and weight, but also the most prominent. No other organ represents us as much as our skin. Healthy skin is vital to the wellbeing of an individual. A functioning skin barrier is needed to provide an effective barrier, regulate body temperature, maintain moisture and for sensory function. The skin reflects greater health and can be indicative of systemic diseases: awareness of skin changes can aid early diagnosis of diseases from HIV to malnutrition. However, skin disease is often treated with low priority due to the low mortality rates of skin diseases, resulting in a deficit in the treatment of skin conditions particularly in resource-poor countries.

To try and combat the worldwide burden of skin diseases the World Health Organization (WHO) added the mission “healthy skin for all” as a main component of their “health for all” campaign. The International League of Dermatological Societies, a global body for dermatology, was founded to advance dermatological care, education and science. There are many challenges to overcome to achieve “healthy skin for all”, but I believe addressing key areas such as education and good organisation of health services should be starting steps towards achieving “healthy skin for all”.

Education empowers the individual and is vital in achieving “healthy skin for all”. Individuals can be taught to recognise signs and symptoms of skin disease, and when they should seek help. Education can also change practices to improve skincare, such as introducing proper washing and hygiene measures to reduce skin infection and control parasites such as scabies. Developing education centres for dermatology, such as the very successful Regional Dermatology Training Centre in Moshi, Tanzania allow for appropriate training in the recognition and treatment of common and local skin diseases.

In an age where technology can be used to spread campaign messages to a wider population faster than ever before, “Natural is beautiful” campaigns should be strengthened, as behaviour seeking cosmetic beauty can often damage skin or increase risk of skin disease. This includes the use of sunbeds to tan skin – resulting in an increased risk of skin cancers and skin lightening creams, which can scar the skin causing permanent damage.

Within countries there can be certain groups disproportionately affected by skin disease. Such groups need to be identified and appropriate interventions

implemented to tackle skin disease. A successful programme is the sun care cream and funding for 5000 protective hats for persons with albinism in Tanzania.

Whilst “healthy skin for all” may not be entirely achievable, I believe the International League of Dermatological Societies’ aim of “skin care for all” is achievable. Access to adequate skincare should be of high importance to international health organisations and individual governments.

Those with skin diseases of genetic aetiology or permanently damaged skin may be unable to achieve “healthy” skin, but they should be able to access skincare to best enhance the skin they have. To attain a world with optimally healthy skin, skin damage needs to be prevented, be this through education against UV exposure or campaigns against acid attacks. Education for both those who provide skincare and individuals within populations needs to be a focus for providing better dermatological care.