



Prevention and Treatment of Dry Skin Disease in the Elderly

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DESCRIPTION

Many older adults will spend their time in nursing homes and assisted living facilities. Caregivers and healthcare professionals can help reduce or prevent the development of many skin disorders in the elderly by acting on a number of factors. Factors to consider include the patient's nutritional status, medical history, current medications, allergies, physical limitations, mental state, and personal hygiene. These include dry skin, itching, atopic dermatitis, purpura, and chronic venous insufficiency. Xerosis is characterized by itchy, dry, cracked, and flaky skin. Dry skin disease usually occurs on the legs of elderly patients but can appear on the hands and trunk. The appearance of the xerotic skin resembles a cracked porcelain model. These cracks or fissures appear due to epidermal dehydration. If the skin cracks and cracks deep enough to break through the capillaries in the skin, bleeding fissures can occur. Scratching and rubbing activities produce scratches, inflammatory reactions, chronic simple lichen, and even patches of edema. Then, environmental allergens and pathogens can easily enter the skin, increasing the risk of allergic contact dermatitis and irritation, as well as infection. Allergic and irritant contact dermatitis can cause persistent and possibly more widespread dermatitis, despite treatment. Eczema changes can occur with delayed hypersensitivity reactions, even in old age. Secondary infection is an inherent risk with any disruption in the skin barrier. This cycle must be broken to disable the process and prevent complications. Xerosis attacks the elderly. This is mainly because these people have reduced activity of the sebaceous and sweat glands; This reduced activity causes aging skin to lose moisture. There are a number of situations that cause the skin's moisture to decrease. For example, dry skin disease tends to recur in winter when a low-humidity environment prevails. Another trigger is the daily use of cleansers and/or body washes that do not replace natural

emollients. In addition, pre-existing medical conditions, therapies, and medications make older people more susceptible to dry skin. Some of the pre-existing conditions include radiation, end-stage renal disease, nutritional deficiencies (especially zinc and essential fatty acids), thyroid disease and neurological disorders with hypohidrosis, antiandrogen drugs, diuretic therapy, human immunodeficiency virus and malignancies. Deficiencies in skin hydration and lipid content play an important role in dry skin disease. Thus, the inability of the skin to retain moisture and create an effective barrier has a direct impact on the development of dry skin disease in aging skin. Once the stage is established for the development of dry skin disease, scenarios of peeling, cracking, inflammation, dermatitis, and infection develop. The xerotic cycle must be broken to neutralize the process and prevent complications. To this end, keratolytics, moisturizers, and steroids are the main ingredients of the treatment of dry skin. The keratolytic effect of 12% ammonium lactate lotion is effective in reducing the severity of dry skin. People with sensitive skin may not be able to tolerate some products formulated with Alpha Hydroxy Acids (AHAs), due to unacceptable levels of stinging and irritation. In this case, an alternative formulation intended for sensitive skin must be substituted. Using a lot of moisturizer reduces flaking and improves the breakdown of the stratum corneum. Additional treatment through the use of topical steroids (Class III-VI) is recommended in moderate to severe cases. Anti-itch medication should be added in case of bothersome itching.

Additional management recommendations:

- Reduce the frequency of bathing with warm (not hot) water
- Use a minimum of non-irritating soaps
- Avoid harsh cleansers for the skin
- Apply your moisturizer of choice directly to still damp skin
- Avoid friction from wipes, rough clothing and abrasives
- The use of humidifying the air in a dry environment

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