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**REJOICE!
JEANS
THAT WILL
FIT YOU
PERFECTLY**

What dermatologists tell their friends

They say beauty is only skin deep. Only?! Skin is our body's largest organ, and when it's clear, hydrated, and radiant, it signals wellness on the inside too. The secrets top M.D.'s share with their favorite people will make you look younger, feel healthier, and change your relationship with your loofah. **BY MEIRAV DEVASH**

MAGNIFYING MIRRORS ARE LIKE FUN-HOUSE MIRRORS

"Those 20x magnifying makeup mirrors just kill me. All you can see in them are flaws! Nobody should look at you that closely except dermatologists, since that's our job. To the untrained eye, seeing your skin magnified that much encourages picking at otherwise imperceptible blemishes. Plus, it contributes to a poor sense of self because it literally magnifies your imperfections. My mother is in love with them; her excuse is 'I can't see to put my makeup on.' She won't listen to me! I tell everyone I know that if they really can't apply makeup without glasses, find a mirror with magnification of just 5x to 8x that only corrects for nearsightedness." —Dendy Engelman, M.D., associate dermatologic surgeon at Manhattan Dermatology and Cosmetic Surgery in New York City

GOOD SKIN NEEDS A SCHEDULE

"So many friends ask me for product recommendations, and when they do, I remind them that applying formulas at the right time is as important as choosing the right ones. The rule is: Daytime

is for protection and nighttime is about repair. Smooth on an antioxidant serum in the morning to neutralize free radicals, which are harmful molecules created when you're exposed to UV light and pollution. They contribute to the breakdown of collagen and elastin—that's what leads to wrinkles and dark spots. At night, there's no UV to block, so that's a good time to apply moisturizer or serum that contains peptides or retinol; those are proven to stimulate collagen, which'll reduce existing wrinkles and spots and prevent new ones from forming." —Mary Lupo, M.D., director of Tulane University Resident Cosmetic Clinic and clinical professor of dermatology at Tulane University School of Medicine in New Orleans

SPEND MORE TIME BETWEEN THE SHEETS

"At lunch recently, a friend was saying that she took care of her skin but still felt like it was missing that youthful glow, so I told her to have more sex. Obviously, it's good for your relationship—but it also gives your skin radiance. Sex releases anti-inflammatory hormones and endorphins that help combat stress and aging and boost immunity. All that gives you a healthy, postcoital flush. When women

Revealed: 3 ways you're driving your doctor crazy

1

EATING PROCESSED FOODS

Patient studies have linked high-glycemic-index foods (like white breads, French fries, many sugary drinks), which raise your blood sugar, to a higher incidence of acne and a breakdown of collagen in skin.

If you're battling pimples, consider also eliminating gluten from your diet for a week to see if it helps; some derms believe it plays a part too, though studies haven't proven a connection between gluten and high blood sugar.

2

TRYING TO EXFOLIATE AWAY DRY BODY SKIN

Dermatologists have had enough of patients scrubbing skin raw, and not moisturizing afterward. Trying to buff away rough skin only strips it further, says Heidi A. Waldorf, M.D., associate professor of dermatology at Icahn School of Medicine of Mount Sinai in New York City. Break the cycle by using a hydrating body wash with glycerin, oils, or ceramides, and follow up with a nourishing moisturizer.

3

MOISTURIZING WRONG, OR NOT ENOUGH

Lots of people skip body lotion because they don't like that slimy two-to-three-minute window of rubbing it in and waiting for it to absorb. Waldorf has the solution: "The best way to rub in a skin cream is not in a circle—that just pushes it around. Instead, move your hands in a straight line up or down. It soaks into skin faster."

are more sexually active, their estrogen levels go up, which improves skin overall by increasing moisture and promoting collagen production. So I encouraged my friend to start having sex more often than whatever she currently was having. We had a giggle about it, and she seemed happy to follow my advice!" —Debbie Palmer, D.O., cofounder and medical director at Dermatology Associates of New York in Harrison, NY, and Greenwich Hospital in Greenwich, CT

MADE A CHANGE? YOUR SKIN KNOWS

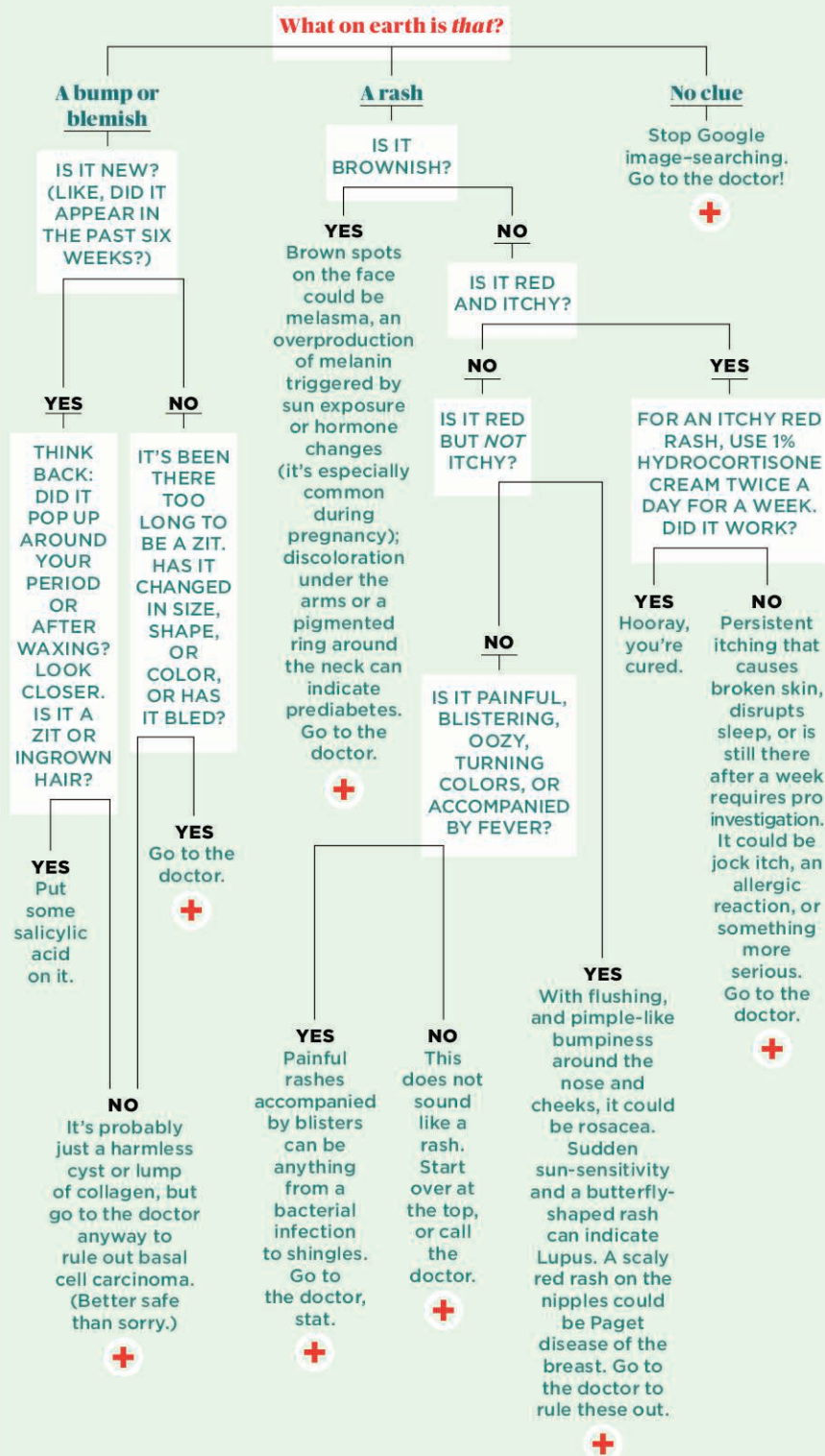
"A friend called me about an itchy rash on her face. When I saw her red, swollen bumps, I realized it was rosacea. So many things can trigger rosacea, even if you've never had it before: coffee, milk and cheese, chocolate, red wine, spices. I could have put her on antibiotics, but instead I asked her what had changed in her diet—I knew she was a healthy eater and didn't drink alcohol but loved coffee. Turns out, she had recently started taking it with cream. She stopped, and the inflammation disappeared within a week. If you're having a problem, it helps to think about *anything* that's new, even if it seems small. Your doctor might make a connection that can get you relief." —Valerie Goldburt, M.D., cosmetic dermatologist at Advanced Dermatology Center for Laser and Cosmetic Surgery and assistant clinical professor at Mount Sinai Health System in New York City

YOU CAN'T SCRUB AWAY CHICKEN SKIN

"I live in South Florida, where we wear sleeveless shirts and tanks year round. My best friend constantly had small, red-dish bumps on the back of her arms. That's usually keratosis pilaris (KP), which is an excess of keratin, the main protein that makes up hair, nails, and the skin's outer layer. When keratin clogs the hair follicles, you get KP, which people commonly mistake for rough skin that they think they can exfoliate away with a scrub

Should you see a doc?

That's never a bad idea with a new mark on your face or body, but here's how a derm friend would walk you through your worry.



mitt or loofah. That's what my friend was doing, but friction was only making it worse. I told her to apply an over-the-counter steroid cream until the redness subsided, followed by a moisturizer that contains glycolic acid, which will dissolve the excess keratin that's plugging up pores. Scrubbing won't do anything but irritate your skin!" —*S. Manjula Jegasothy, M.D., founder and cosmetic dermatologist at Miami Skin Institute and associate professor of dermatology at the University of Miami Miller School of Medicine*

START ANTI-AGING NOW

"When someone asks, 'When do I deal with this line between my eyes?' I'm tempted to say, 'It was time to deal with it when you first noticed it!' I can be blunt like that with family, so when my cousins asked, I told them my philosophy: Clean up your room before it gets too dirty. If you begin with small amounts of Botox or filler in your early 30s when lines start forming, the muscle movement that

creates wrinkles is restricted sooner, so you likely won't develop deeper ones. That said, it's okay if you've put it off. Botox, Fraxel, and fillers work into your 40s and beyond; you'll just need somewhat higher doses since the damage will be greater. Most people have it backward: They're worried about overdoing it by coming in too frequently. But if they came earlier and more often, I wouldn't need to do much, so it would cost less and look more natural." —*Paul Jarrod Frank, M.D., director of 5th Avenue Dermatology Surgery and Laser Center and clinical assistant professor of dermatology at Icahn School of Medicine of Mount Sinai in New York City*

BEWARE THE MARGARITA SUNBURN

"A good friend came back from vacation with a strange-looking rash on his forearm that looked like someone had dripped brown paint on it. I asked if he had been drinking margaritas, and he looked at me like I was psychic. The reason is that

psoralen, an organic compound found in lemons and limes, makes skin super-sensitive to UV light, causing a chemical burn called phytophotodermatitis. It's so common that it's jokingly called 'margarita sunburn.' He treated it like any other sunburn, with a moisturizer containing aloe vera or soy, and it faded away." —*Rebecca Kazin, M.D., associate director at Washington Institute of Dermatologic Laser Surgery in Washington, DC*

STOP TOUCHING ALREADY!

"The vast majority of my acne patients touch or squeeze their zits. It's called skin picking, and actually, many dermatologists do it too! So I don't get on people about it. Sometimes you don't realize you're doing it; I have patients who are literally picking in front of me, and when I'm like, 'Are you picking?' They say no! You can't just tell someone—or yourself—to stop, so you need to focus that anxious energy on something else. When one of my girlfriends found herself constantly

The truth about pills for good skin

The supplement world has exploded with beauty-focused tablets, powders, vitamin chews, and drinks that promise glowier skin. We asked dermatologists which ones are worth it—but you should always talk to your own doctor before taking any type of pill, harmless as it may seem.

The musts

Omega-3s: Most Western diets provide too few omega-3 fatty acids (usually found in fish), but you need them to reduce inflammation, especially if you have a condition like rosacea or eczema.

Vitamin D₃: This is essential as our skin ages, but it's safer to get from a pill than from the sun.

Calcium: Women need at least 1,000 mg a day for strong bones (1,200 if you're 51 or older). And yes, your bones help you keep looking youthful on the outside, too.

The maybes

Glucosamine and chondroitin: These amino sugars help give skin its resiliency, says Lupo, who likes Schiff Move Free Advanced Triple Strength tablets, which also contain beneficial hyaluronic acid.

Resveratrol: This antioxidant has been shown to protect skin against UV damage, increase elasticity, and diminish age spots. Caudalie makes both a pill and a serum.

Fern extract: It may reduce inflammation and cut down on pigmentation; find it in Heliocare.

The meh's

Collagen: The recent bone broth trend popularized the idea of drinking collagen or taking supplements to increase collagen density in your body. So far, there's only one study backing the claim, so it's promising, but not proven yet.

Probiotics: Homemade yogurt masks are popping up on beauty blogs, and they certainly won't hurt. While you may want to take probiotics for other reasons, for your skin specifically, the science isn't there yet.

Dark circles, a guide

Experts can tell, often just by looking at you, which of the three types of under-eye circles you have. Here's what they're seeing—and their solutions.

Paper-thin skin or excess melanin

THIS MIGHT BE YOU IF:

On fair skin, your circles look red or violet; on darker skin, your circles are brownish.

THE CAUSE:

Genetics. "I'm Indian," says S. Manjula Jegasothy, M.D. "I've had dark circles since I was born."

THE FIX:

An eye cream with retinol will help boost collagen production to thicken skin, making dark circles less noticeable. Another potent ingredient, glycolic acid, speeds up cell turnover to help fade surface discoloration. An effective option that's gentle enough for this delicate skin is Cane + Austin Glycolic Treatment Eye Cream, which contains both ingredients.

Post-inflammatory hyperpigmentation

THIS MIGHT BE YOU IF:

Your circles are brown; you're congested; you're always touching your face.

THE CAUSE:

Skin trauma, usually in the form of aggressive rubbing (due to allergies, dry eye, or just a bad habit), which turns into chronic inflammation.

THE FIX:

The easiest (and cheapest) solution can be found at the drugstore: a dab of cortisone cream around the eyes every other night. "After two weeks, the irritation is gone and so is the behavior," Jegasothy says. A dermatologist can also zap the under-eye area with the Fraxel laser, which breaks up pigment cells and stimulates fresh new collagen.

Volume loss

THIS MIGHT BE YOU IF:

The skin around your eyes appears sunken, causing shadows around your eyes.

THE CAUSE:

Aging or significant weight loss. As we get older, we lose fat from the one place we actually want it—our face. "Then the light hits it differently, and the shadows look like dark circles," says Jegasothy.

THE FIX:

Skin creams and concealer can't fix hollows. A well-placed filler will, so if the issue is bugging you, consider an injectable. "I do a lot of under-eye injecting; it plumps the skin and reduces shadowing," says William Kestin, M.D., ophthalmologist and nonsurgical facial aesthetics specialist in New York City.

picking, we discovered that if she wore a rubber band on her wrist and snapped it whenever the impulse arose, it worked to stop her picking. If you want to try something less dramatic first, I tell people to try squeezing a stress ball, or even just go out for a little walk." —Dendy Engelman, M.D.

SKIN NEEDS STRONG BONES

"I urge all my friends to go to the dentist twice a year for regular checkups. I cannot emphasize how important bone density and dental health are to your face. Without a strong framework, the skin on top appears more lax and wrinkled than it otherwise would. The bones above and below your teeth (right around your nose as well as your chin and jaw) will start to recess, which means you're going to lose some of your cheekbones and jawline. Your teeth will recede too, making the nose and chin jut out and appear witchy. If you ever wore braces, it's a good

idea to wear a mouth guard at night to keep your teeth aligned. Overall, make sure you're getting your vitamin D and calcium, and take care of your teeth." —Mary Lupo, M.D.

DON'T DO WHAT YOU ALWAYS DO

"One close friend of mine told me that she sleeps with makeup on—in fact, she's been doing it for decades without any problems. But now that she's in her mid-40s, she's started to see cystic acne. She tried numerous medications to treat it and nothing worked. When she stopped wearing makeup to bed, it vanished. The moral of the story isn't to wash your face at night; that's a given. It's that what worked for your skin years ago—or even six months ago—can change. Good skin care means being attuned to your skin's needs. So don't resist mixing up a routine that's always worked for you if it no longer does." —Paul Jarrod Frank, M.D.

IMPORTANT SAFETY INFORMATION (CONTINUED)

Serious and/or immediate allergic reactions have been reported. They include: itching, rash, red itchy welts, wheezing, asthma symptoms, or dizziness or feeling faint. Get medical help right away if you are wheezing or have asthma symptoms, or if you become dizzy or faint.

Do not take BOTOX® Cosmetic if you: are allergic to any of the ingredients in BOTOX® Cosmetic (see Medication Guide for ingredients); had an allergic reaction to any other botulinum toxin product such as Myobloc® (rimabotulinumtoxinB), Dysport® (abobotulinumtoxinA), or Xeomin® (incobotulinumtoxinA); have a skin infection at the planned injection site.

Tell your doctor about all your muscle or nerve conditions, such as ALS or Lou Gehrig's disease, myasthenia gravis, or Lambert-Eaton syndrome, as you may be at increased risk of serious side effects including difficulty swallowing and difficulty breathing from typical doses of BOTOX® Cosmetic.

Tell your doctor about all your medical conditions, including: plans to have surgery; had surgery on your face; weakness of forehead muscles; trouble raising your eyebrows; drooping eyelids; any other abnormal facial change; are pregnant or plan to become pregnant (it is not known if BOTOX® Cosmetic can harm your unborn baby); are breast-feeding or plan to (it is not known if BOTOX® Cosmetic passes into breast milk).

Tell your doctor about all the medicines you take, including prescription and nonprescription medicines, vitamins, and herbal products. Using BOTOX® Cosmetic with certain other medicines may cause serious side effects. **Do not start any new medicines until you have told your doctor that you have received BOTOX® Cosmetic in the past.**

Tell your doctor if you have received any other botulinum toxin product in the last 4 months; have received injections of botulinum toxin such as Myobloc®, Dysport®, or Xeomin® in the past (tell your doctor exactly which product you received); have recently received an antibiotic by injection; take muscle relaxants; take an allergy or cold medicine; take a sleep medicine; take aspirin-like products or blood thinners.

Other side effects of BOTOX® Cosmetic include: discomfort or pain at the injection site; headache; and eye problems: double vision, blurred vision, drooping eyelids, and swelling of your eyelids.

For more information refer to the Medication Guide or talk with your doctor.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

Please refer to Summary of Information about BOTOX® Cosmetic on the following page.

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