Health Basics

Skin Health

As the largest human organ, the skin is the strong and flexible wrapping that covers and protects everything inside the body from invasion by foreign intruders and infections. Besides providing protection, the skin maintains body temperature, stores energy and allows us to indulge our sense of touch. Skin gets its protective properties from its three-layer defense system: the epidermis (the outermost layer), the dermis and, below both, a fatty layer. Each performs a specific job to safeguard the body.

Black Skin Basics

The darker a person's skin, the higher its melanin content. Melanin is a pigment produced by cells in the epidermal layer. The pigment is what gives darker skin its color. Melanin's main function, however, is to filter out sunlight's ultraviolet (UV) rays. UV rays can damage DNA, harm the skin and even cause cancer. It's important to know, though, that even though the increased melanin content in darker skin makes it less susceptible to sunburn, photoaging and skin cancer, people of color have higher mortality rates than whites for several kinds of skin cancers as a result of late detection or misdiagnosis.

It's important to stress here that having darker skin does not mean African Americans can bask in sunlight and scorn sun protection. In fact, two of the three types of skin cancer are most likely to develop in people of color.

The three types of skin cancer (in order of the danger they pose to people of color) are malignant melanomas, squamous cell carcinomas and basal cell carcinomas. Malignant melanomas are caused by overexposure to sunlight and other forms of UV rays—for example, artificial light.

Squamous cell carcinomas can occur anywhere on the body. However, they are most common on skin exposed to sunlight. In addition, skin that often goes unprotected by sunscreen, such as that of the ears and lips, is especially vulnerable to attack.

Basal cell carcinomas (BCCs) arise in the skin's basal cells, which line the deepest layer of the epidermis, and are usually caused by a combination of cumulative and intense, occasional sun exposure.

Returning to basics, in addition to containing cancer-fighting melanin, black skin has more numerous and larger oil glands, and the hair follicles tend to be larger. As a result, black skin tends to be oilier, although it is less prone to acne.

Common Skin Problems Among Blacks

Acne keloidalis nuchae (AKN) are hard-to-get-rid-of bumps most often located on the back of the neck. The culprits are usually ingrown hairs resulting from close shaves. The bumps are also caused by at-home shape-ups or barbershop visits that leave nicks or cuts from a razor.

Acne rosacea is not typically associated with dark skin, but the chronic skin disorder does occur in people of color, especially those of mixed heritage. The condition's main feature is a reddening of the facial skin, which can look very different depending on skin tone. The condition often goes undiagnosed or misdiagnosed in people of color.

The cause of rosacea is unclear, but researchers believe it may be triggered by an infectious microorganism or by over-reactive blood vessels or blood vessels that lack tissue support. Rosacea is worsened by spicy foods, hot drinks, alcohol, sun exposure and hot climates.

Cosmetic-induced pigmentation problems are discolorations caused by cosmetic procedures, such as chemical peels and microdermabrasion (a smoothing and refining process). These resurfacing procedures treat common superficial skin problems, such as acne, stretch marks, facial aging and scarring.

Drug-induced pigmentation problems are sometimes caused by medications taken for ailments such as hypertension, diabetes and heart conditions, which disproportionately affect African Americans and Latinos. In addition, dark patches on the skin (hyperpigmentation) may be caused by photosensitivity (reaction to sunlight) or by allergic reactions to common medications.

Eczema is believed to be the second most common skin disorder among African Americans. The disease causes disfiguring skin discolorations resulting in both hyperpigmentation and hypopigmentation (pigment loss). The disease is difficult to diagnose in people of color because it may appear differently than it does in whites.

Eczema may also accompany asthma and hay fever. In such cases, it is referred to as atopic dermatitis. The condition appears during childhood or adolescence and continues through adulthood. It is characterized by flare-ups, ranging from mild skin irritation to severe rashes caused by temperature extremes, stress, excessively dry skin, irritants and allergies.

Hidradenitis suppurativa (HS) is a chronic inflammatory skin disease that disproportionately affects people of color, including African Americans and Latinos. The condition is also known as acne inversa and causes small, painful lumps under the skin in some hair roots near the sweat glands. The lumps can become infected and fill with pus and may emit a foul odor if they break open. HS can also cause tunnel-like wounds underneath the skin and disfiguring scar formations. It usually affects the armpits, groin, buttocks and breasts.

Hyperkeratosis (thickened skin) occurs in women of color. It's caused when excessive keratin, a protein, thickens the skin's outer layer. Although the condition may appear anywhere, it is usually seen in the elbows and knees, palms of the hands and soles of the feet (especially the heels), the

backs of the arms, the fronts of the thighs and the insides of the knees. Ichthyosis, an inherited form of keratosis, results in dry, scaly skin.

Keloids are abnormally large scars that form at the site of skin injuries or trauma. Although they appear in all races, keloids most often affect people of color, especially those with a family history of the condition. Keloids may be found anywhere on the body, but prime locations include the chest, back, arms and earlobes.

Melasma is a skin pigmentation disorder caused by dysfunctional melanin-producing cells. It causes irregular brown or grayish-brown marks, usually on facial skin—particularly on or near the nose, cheeks, forehead, upper lip and chin. Melasma discolorations may also occur on other body parts, such as the forearms and neck.

Post-inflammatory hyperpigmentation (PIH) occurs when melanin-producing cells (melanocytes) make too much pigment, often as a result of skin injuries, such as scratches, burns, cuts, bruises, rashes, acne, sunburns, surgery or cosmetic procedures. If the excess melanin is produced in the skin's upper layer (the epidermis), the skin is a darker shade of brown. If the extra melanin is produced in the skin's lower layer (the dermis), the skin exhibits a gray or blue discoloration. These discolored areas range in size from small spots to larger patches.

Pseudofolliculitis barbae (PFB), or ingrown hairs, is an unsightly skin condition caused by cutting hair on the head and face too close to the skin. The hair of darker-complexioned men of African-American or Latino descent grows almost parallel to the skin's surface, and it's tightly curled. As a result, when hair is cut, the remaining barb-like follicles often puncture the skin and become ingrown. The results are dark marks and bumps (razor bumps) on the cheeks, chin, jawline, neck, head and groin area. In some cases, the hair follicles may become inflamed because of infection, occlusion (absorption of foreign substances), irritation and specific skin diseases.

Psoriasis is a chronic, recurring inflammatory disease of the skin and joints that causes red scaly patches of inflammation and excessive skin production. The condition is not confined to those with darker skin, but skin color does affect how pronounced these scaly patches appear.

Seborrheic dermatitis is a common condition that mainly affects the scalp but also oily areas of the body, such as the face, sides of the nose, eyebrows, ears, eyelids and chest. This condition usually causes scaly patches, red skin and stubborn dandruff. When the condition is left untreated, the area of skin involved may become lighter or darker than normal.

The cause of the condition is uncertain, but some doctors believe that a yeast infection of the skin triggers the body to mount an immune response. Seborrheic dermatitis is often confused with other skin disorders, such as eczema, tinea versicolor (a fungal infection) and psoriasis. In African-American and Latino children, the disorder may be mistaken for ringworm (tinea capitis).

Skin pigmentation conditions are problematic for darker-skinned people in particular because of the very thing that provides sun protection—melanin. This pigment also makes people of color

highly susceptible to skin discoloration problems, such as post-inflammatory hyperpigmentation (PIH), drug-induced pigmentation, cosmetic-induced pigmentation, melasma and vitiligo.

Vitiligo is characterized by white patches on the skin, in the hair and on the lips and genitals. Although vitiligo occurs in all racial and ethnic groups, it is significantly more noticeable on darker-skinned people. The cause of vitiligo is unclear, but doctors believe the disorder may be related to family history, a disorder in which the immune system attacks and destroys the melanocytes in the skin or a trigger event, such as sunburn, stress or exposure to industrial chemicals.

Quick Tips
How to lavish love on your skin

Develop a basic skin care regimen.

Daily maintenance, repair and prevention are crucial to healthy, flawless skin. Consistently clean, tone, moisturize and exfoliate your skin.

Drink lots of water.
Water is an essential component of your blood. It's blood that feeds your skin cells with nourishing oxygen. Make sure to drink enough pure, clean water each day.

Educate yourself about your skin.
Learn how to properly care for your skin, which conditions people with black skin are more likely to develop and which products, cosmetics, medications and procedures are appropriate and safe for your skin.

Take sun protection precautions.
Sun protection isn't limited to sunscreen. It also includes the following:

- Limit the time you spend in sunlight, especially when the sun is highest overhead.
- Apply sunscreen if you are going to be exposed to sunlight.
- Cover up to shield your skin from sunlight's UV rays.
- Wear sunglasses or other protective eyewear.
- Check meds to ensure they don't increase your skin's sensitivity to UV rays.
- Use appropriate treatments for sunburns should they occur.

Last Reviewed: February 17, 2021

© 2026 Smart + Strong All Rights Reserved.