Skin care in transgender youth

PART 1: Masculinizing Gender Affirmation — Transgender Male/Female-to-Male/Transmasculine

Many gender affirming practices and medications can have effects on the skin and hair. In addition to other experts involved in gender-affirming care, dermatologists can help to manage these changes.

TESTOSTERONE AND CHANGES TO THE SKIN AND HAIR

Some people may choose to start testosterone. Testosterone is a type of hormone. Hormones are chemical messengers in the body that have effects in tissues and organs. Testosterone can deepen someone's voice and increase muscle. It can stop someone from menstruating. Testosterone can also cause changes in the skin.

ACNE

Testosterone affects the hair follicles and oils in the skin that can lead to acne. This acne typically occurs on the face, especially the jawline, as well as the chest and back. It can range from mild to severe. If severe, it can leave scars. Acne often develops within the first 6 months of starting testosterone.

Not everyone is bothered by acne, but there are many treatment options. Treatment can help with pain and sometimes prevent scarring. The Society for Pediatric Dermatology (SPD) has an acne handout ([https://pedsderm.net/for-patients-families/patient-handouts/#Anchor-Acne](https://pedsderm.net/for-patients-families/patient-handouts/#Anchor-Acne)), and you can talk to a local dermatologist about acne treatments.

If you are taking testosterone, you may want to avoid certain oral “anti-androgen”/“anti-hormone” acne medications, such as spironolactone, as they may block the desired effects from testosterone. Newer topical anti-androgens may be helpful in decreasing acne, but these have not been studied in people taking testosterone. These also may not be covered by insurance. Sometimes, decreasing the amount of testosterone you are taking can make acne better. It will be important to discuss this option with the medical providers prescribing your hormone therapy.

DANDRUFF

Some individuals develop flakiness and scaling or “dandruff” of the scalp. The medical name for this is “seborrheic dermatitis.” It may be itchy. There are many treatment options including over-the-counter shampoos with ingredients such as selenium sulfide (Selsun blue), ketoconazole (Nizoral), or zinc pyrithione (Head and Shoulders). To be effective, the shampoo should be left on the scalp for several minutes before rinsing out. If the flaking or itchiness don’t improve, consult your doctor to see if prescription shampoos or medications are needed. Shampooing daily is sometimes recommended, but this may not be appropriate for people with tightly curled or coiled hair textures.

HAIR LOSS

Testosterone will lead to overgrowth of hair in some areas (see below) and may lead to hair loss in others. Hair loss tends to occur on the top of the head and in the hairline by your temples. This type of hair loss is called “androgenic alopecia.” Androgenic refers to testosterone and similar hormones and alopecia means hair loss. It is hard to predict if this hair loss will happen. People with
family members who have similar hair loss may be at higher risk. If it does occur, it tends to happen after months to years of taking testosterone. (It is important to remember there are many other types of hair loss as well, and a dermatologist can help determine what type you may be experiencing.)

If you are bothered by hair loss, there are several management options. Topical minoxidil 5% is a safe over-the-counter medication that can help slow down hair loss. In some cases it can cause some skin irritation and dryness. Prescription oral medications, such as minoxidil and finasteride, may also be an option. Procedural options to treat hair loss are sometimes done if medications are not effective. You can discuss these treatment options and their potential risks and benefits with your health care provider.

**HAIR GROWTH**

Testosterone medication can increase hair growth on the face and body. Hair growth that happens when you take testosterone is usually permanent. If you want increased facial hair growth, you can discuss possible options such as topical or oral minoxidil with your medical provider. Sometimes your provider may recommend waiting for a few years to see how much hair growth occurs on testosterone before making additional recommendations.

**CHEST BINDING AND THE SKIN**

Some people use tight fitting clothes like sports bras or special clothes (binding garments) to decrease the size of their chest. This can occasionally lead to skin irritation (itching, swelling, scarring, skin breakdown, acne, and even discoloration in deeply pigmented skin). It may also cause other symptoms like pain, shortness of breath, and overheating.

If you experience discomfort or develop any sores, redness, or skin irritation due to chest binding you should talk to a doctor. It is important to choose breathable materials. Using duct tape, plastic wrap, or Ace bandages may have a higher risk for side effects. Taking breaks from binding is important for your skin and health. Some options for breaks include days when you do not have to go to work or school or at nighttime during sleep.

More information on chest binding can be found at:

**GENDER AFFIRMING PROCEDURES**

Sometimes people have surgery to align their outside appearance with their gender. These surgeries are permanent. In some centers, there may be age restrictions to when this type of surgery can occur. They are usually performed by a team of surgical specialists, including plastic and reconstructive surgeons, urologists, and others. Relying on your medical and surgical team is important to discuss the risks and benefits of surgery, as well as the best timing for you. There may be ways to improve post-surgical skin changes, including scars, if they are bothersome or severe. You can discuss these options with your healthcare team or dermatologist.

Additionally, the SPD has a handout that explains how to prevent and care for scars:
https://pedsderm.net/for-patients-families/patient-handouts/#Scars