

Skin Picking Syndromes



Are you sometimes picking your skin? Or pulling your hair?

Are you sometimes harming your skin? Don't be ashamed, about 1% of the general population have the same problem.

There is help to get!

What is skin picking?

The skin picking syndromes are habits that damage your skin.

How does it happen?

Skin Picking is an exaggeration of grooming behaviour which is normal in animals and humans. There is some genetic background.

There are 2 possibilities leading to this behaviour:

1. You have a fixed idea to pick your skin. You have tried to stop the behaviour many times but you cannot really control it. You cannot remove it from your mind. It forces you to act again and again. Shortly after having done the behaviour you feel relieved and shortly better but emotions like guilt or shame arise. And you are angry at yourself! In medicine it is called obsessive-compulsive behaviour.
2. You do it without thinking about it beforehand. It comes when something is going wrong in your life. Afterwards you feel relieved but not so much shame or guilt. In medicine this is called impulsive behaviour.



What are the different kinds of skin picking?

1. Skin picking leads to sore skin, wounds and scars. Some parts of the body are often free.
2. Hair pulling (= trichotillomania): the background could be pulling, rubbing or shortening.
3. Nail biting (= onychophagia): there are damage at the skin near the nails, the cuticles are damaged. It happens with nail biting, rubbing or squeezing.



4. Skin cutting (scarification): scars are on the upper part of the forearms or other body parts, maybe genital area. It often happens by using different instruments.
5. Hand soreness **by** too much washing: often the person has an idea that there are bacterias everywhere and therefore need to wash very frequently.
6. Nose or Ear picking: damage of skin at the nose or ear by squeezing, rubbing or using instruments on nose or ears.
7. Lip leeking: it is common in babys, but later in life it leads to lip damages caused by the habits of leeking or washing lips.
8. Cheek biting: the cheeks on one or both sides in the inner mouth with white lines parallel to the teeth or wounds. It is a nervous tic.

What is the treatment?

The treatment is a combination of several steps. There are no single special ointment or drugs which alone help to reduce the behaviour.

If you have one or more of these problems, please show up to a dermatologist with some knowledge about psychodermatology.

You will get a proposal about a management programme which include:

1. An ointment to take care of your skin.
2. Bandages or plasters are helpful to avoid picking behaviour
3. If you have a clear decision of changing your behaviour and a real motivation for additional psychological management, it will be helpful. Psychodermatologists can introduce you to this approach and inform about psychotherapeutic options.
 - a. Avoid your habits by a behavioural programme: implementation of alternative habit with a positive feedback for yourself to increase the success.
 - b. Relaxation training (e.g. muscle relaxation, awareness therapy, yoga etc.)
 - c. More insight oriented psychotherapy when personal problems are evident
 - d. Family therapy or looking back to your family relationship
 - e. Additional psychotherapy e.g. body therapy, art therapy, hypnosis etc.
4. Medications:
 - a. Psychotropic drugs (drugs for working on nerves or brain): so called Antidepressants with some anxiolytic effects are often helpful. Another possibility are so called neuroleptic drugs which are rarely used. They could have side-effects which mostly are not long-lasting.
 - b. New drug strategies are in the development like Acetylcystein where some studies demonstrate positive effects.

How common is skin picking?

Skin Picking and related Syndroms are not rare! In childhood it is much easier to handle. Please do not hesitate to ask for help. The prognosis is good most of the time.

Sources/Acknowledgments

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References:

Gieler U, Consoli SG, Tomás-Aragones L, Linder DM, Jemec GB, Poot F, Szepietowski JC, de Korte J, Taube KM, Lvov A, Consoli SM. (2013) Self-Inflicted Lesions in Dermatology: Terminology and Classification - A Position Paper from the European Society for Dermatology and Psychiatry (ESDaP). *Acta Derm Venereol.* 93(1):4-12.

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