BEAUTY

# Why Acne Can Follow You Into Menopause

A simple routine can help, but new or painful breakouts deserve more than assumptions about hormones.

## Step 1 - Read the breakout before treating it

You expected hot flushes or broken sleep. You did not expect to meet a pimple in the bathroom mirror decades after adolescence. Yet acne does not obey the birthday rules we give it: some people continue to have it in their forties and fifties, and adult acne is more common in women.

A pimple begins below the surface. Oil and dead skin cells plug a hair follicle; bacteria that normally live on the skin can then grow inside it, provoking inflammation. The result may be a whitehead, blackhead, tender pink bump, pus-filled spot or a large, painful lesion lodged deeper in the skin.

Hormones can contribute to acne. Androgens-often called male sex hormones, though they are not exclusive to men-can enlarge oil glands and increase oil production. Hormonal changes in pregnancy can also trigger acne. But the supplied evidence does not establish that menopause itself causes acne, and a 2024 review of menopause guidelines did not list acne among the consistently recognised menopause symptoms.

That distinction matters. A breakout during the menopausal transition is not automatically a menopausal breakout. Use a mirror and a notebook to record where the spots appear, what they look and feel like, when they began, and which medicines you currently take or recently stopped. Those are details a health professional may use when assessing acne and considering whether something else is behind it.

## Step 2 - Rule out the convincing lookalike

Acne commonly affects the face, neck, chest, back and shoulders. Blackheads are not trapped dirt: their dark colour comes from air changing the exposed oil in an open follicle. Scrubbing harder will not remove the process underneath, and aggressive scrubbing can make acne worse.

Painful, boil-like lumps in the armpits or groin need a different kind of attention. They may be hidradenitis suppurativa (HS), a chronic condition that affects places where skin rubs together.

The lumps can enlarge, break open, drain fluid or pus, return over time and leave scars or tunnels beneath the skin.

HS can resemble pimples or acne in its early stages, so it may be difficult to identify without an examination. It is not caused by poor hygiene and cannot spread to other people. A clinician may examine the lumps, ask about their history and, when drainage is present, take a sample for testing.

Make an appointment rather than building a home routine around recurrent lumps in skin folds, draining sores, deep pain or scarring. Large, painful acne nodules also merit medical care because acne can scar. A primary care clinician or dermatologist can identify the type of lesion and discuss topical medicines, oral medicines, hormone therapy or other procedures when appropriate.

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## Step 3 - Choose one active, not a shelf

For ordinary acne, the useful routine is smaller than the beauty aisle suggests. Treatment aims to heal existing spots, prevent new ones and reduce scarring. The established topical options include benzoyl peroxide, retinoids, salicylic acid, antibiotics and sulfur, but they do different jobs and are not interchangeable decorations.

Benzoyl peroxide kills bacteria and may reduce oil production. Salicylic acid helps break down blackheads and whiteheads while reducing the shedding of cells lining follicles. Topical retinoids, which come from vitamin A, can treat lesions, reduce inflammation and help prevent acne from forming. Sulfur can also help break down blackheads and whiteheads.

These medicines are available in forms including creams, gels, lotions, soaps and pads. They can cause irritation, burning or redness in some people. The evidence supplied here does not provide a dose, frequency or menopause-specific schedule, so this is not a case for inventing one. Follow the product directions and discuss persistent side effects with a clinician.

Supplements and elaborate "hormone-balancing" regimens should not be allowed to borrow authority from the word menopause. Research on complementary approaches to skin conditions is limited and often methodologically weak. More importantly, the evidence provided does not establish a supplement treatment for menopausal acne. One suitable acne active is doing the treatment work; toners, masks and extra layers are not required by this evidence.

## Step 4 - Build the routine with three things

Start with a mild cleanser and lukewarm water. Clean gently rather than using strong soap, astringent products or rough scrub pads. Dirt is not the cause of blackheads or pimples, so a punishing wash cannot scrub acne into submission. It may simply add irritation to skin that is already inflamed.

Next comes one acne active chosen with a pharmacist or clinician if you are unsure which kind suits the lesions you have. Do not squeeze or pick. Picking can contribute to scars or dark marks, while rubbing and touching lesions can aggravate them. If the active produces burning, redness or irritation, ask a clinician what to change rather than covering the reaction with more products.

Finish with sunscreen when you are outdoors. Some acne medicines can make you more vulnerable to sunburn, and sunscreen is especially important for people managing the dark spots that may remain after acne heals. If you use cosmetics or hair products, oil-free and noncomedogenic options are less likely to clog pores, although even these can worsen acne for some people.

On Monday, put three things by the sink: a mild cleanser, one acne active and sunscreen. Keep the notebook nearby, too. That is enough to begin without pretending the word "menopause" explains every spot. If the breakout is deep, painful, scarring, draining or not improving-or if you are unsure it is acne-take the notes to a primary care clinician or dermatologist.

## Where this comes from

- Acne

  MedlinePlus, U.S. National Library of Medicine · https://medlineplus.gov/acne.html
- Hidradenitis Suppurativa

  MedlinePlus, U.S. National Library of Medicine · https://medlineplus.gov/hidradenitissuppurativa.html
- Acne

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