

Discussion of two very common skin diseases affecting mainly African men

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Acne Keloidalis Nuchae (AKN)



Both **Acne Keloidalis Nuchae (AKN)** and **Pseudofolliculitis Barbae (PB) (shaving bumps)** are very common diseases affecting men, mainly of African descent. They can be very unsightly and cause lots of discomfort and distress. These lesions can also occur in woman; however they are much less common.

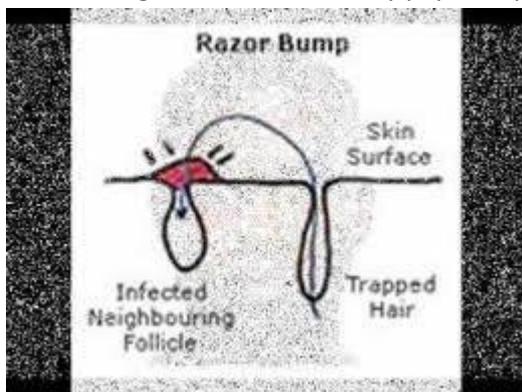
AKN begins as a chronic inflammation in the posterior neck and scalp regions and slowly progress to discrete papules, nodules and with time can lead to large keloidal plaques. Most patients are adults and it rarely occurs after the age of 50 years.

The exact cause of the disease is not known, however, the shaving of tightly curled hairs can lead to the curving of hairs back into the skin, leading to an inflammation and scarring. Other aetiological factors may be the constant irritation from shirt collars and chronic low grade folliculitis.

The first step is the prevention of the disease. People suffering from this disease should be very careful in causing irritation to the affected area. They should neither edge their posterior hairline with a razor nor wear shirts or sweaters that irritate the posterior scalp. Also, the sooner the treatment is initiated, the better the outcome.

Consulting a Dermatologist who can start a treatment regime, will be the second step. Depending on the type of lesions, treatment with a Tretionoin gel, a potent topical corticosteroid can be very helpful. Larger lesions may require intralesional injection of corticosteroids on a 2-3 weekly basis. In my practice, good results are achieved with two weekly cryotherapy, bearing in mind that there is a risk of permanent depigmentation, of the treated area. Usually in difficult cases, surgical excision with healing with secondary intention may be the only other option. Lately a few studies have shown that certain lasers can also help with this disease.

Pseuofolliculitis Barbae also favours African men and can affect one's confidence. The aetiology is the same as AKN, whereby curving of closely shaved hairs into the skin leads to an inflammation. Lesions range from inflammatory papules, pustules to keloidal scars.



The only way to cure the disease is to stop shaving. However, in certain cases, shaving techniques can be optimised to decrease the burden of the disease. Existing razor bumps can often be treated by removal of the ingrown hair. Extrafollicular hairs can usually be pulled gently from under the skin, with [tweezers](#). Complete removal of the hair from its follicle is not recommended. Severe or transfollicular hairs may require removal by a dermatologist.

A few shaving tips that might help
1. Do not pull the skin taut
2. Do not shave against the grain/ Direction of hair growth
3. Use a sharp razor each time
4. Take short strokes(with the grain of the hair) and do not shave over the same areas more than twice

Medications are also prescribed to speed healing of the skin. Good results can be obtained with the use of skin peels. Superficial glycolic or salicylic acid peels tend to help. Usually a Dermatologist can work out a regime, where appropriate maintenance skin peels can be performed, together with a combination of a Tretinoin cream, Corticosteroid, and Urea or Salicylic mixture. During the treatment phase, patients are encouraged to trim their beards instead of close shaving.