



## **Skin Conditions /Descriptions**

**WARNING: NEVER TRY TO DIAGNOSE A DISEASE: ALWAYS REFER TO A PHYSICIAN.**

**NOTE:** COLOR CHANGES, A CRACK ON THE SKIN, A TYPE OF THICKENING, OR ANY DISCOLORATION, RANGING FROM SHADES OF RED TO BROWN AND PURPLE TO ALMOST BLACK, MAY BE SIGNS OF DANGER AND SHOULD BE EXAMINED BY A DERMATOLOGIST.

**CAUTION: DO NOT TREAT OR REMOVE HAIR FROM MOLES.**

**Condition/  
Disease/Disorder**

**Description**

### **Pigmented Lesions**

Lentigo

small, yellow to brown spots



Chloasma

moth patches, liver spots = increased deposits of pigment



Naevus

birthmark (portwine or strawberry) small-large malformation of skin due to pigmentation or dilated capillaries

Leucoderma

abnormal light patches due to congenital defective pigmentations



Vitiligo

acquired condition of leucoderma-may affect skin or hair



Albinism

congenital absence of melanin pigment

Stain

abnormal, brown, skin patches having a circular & irregular shape

## Disorders of the Sebaceous Glands

Comedones

blackheads, a worm-like mass of keratinized cells & hardened sebum



Milia

whiteheads, an accumulation of dead, keratinized cells and sebaceous matter trapped beneath the skin



Acne Simplex

chronic inflammatory disorder usually related to hormonal changes & overactive sebaceous glands

Acne Vulgaris

acne-pimples



Acne Rosacea

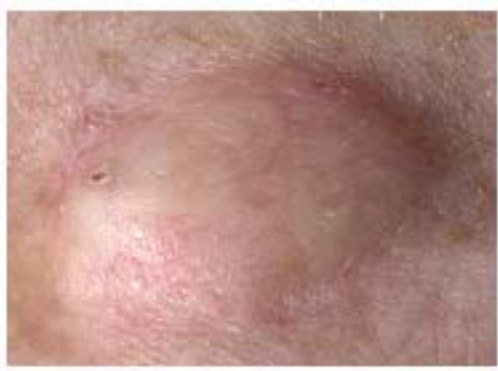
chronic inflammatory congestion of the cheeks & nose



Seborrhea/Seborrhea Oleosa = Oily Dandruff overactive sebaceous glands-often the basis of acne

Steatoma

wen or sebaceous cyst (subcutaneous tumor)  
ranges in size from a pea to an orange



Asteatosis

dry, scaly skin characterized by absolute or partial  
deficiency of sebum

Furuncle

boil-a subcutaneous abscess that fills with pus



Cysts

sac-like, elevated (usually round) area, contains liquid or semi-liquid substance-when a follicle ruptures deep within the dermis & irritating oil & dead cells seep into the surrounding tissues often cause acne pits



Pimples

follicle filled with oil, dead cells, & bacteria inflammation causes white blood cells to rush to fight bacteria creating a pus



## Disorders of the Sudoriferous Glands

Bromidrosis	osmidrosis=foul-smelling perspiration
Anhidrosis	lack of perspiration
Hyperhidrosis	excessive perspiration
Miliaria Rubra	prickly heat-eruptions of small red vesicles accompanied by burning & itching-caused by excessive heat

## Hypertrophies

Keratoma	callus-superficial, round, thickening of the epidermis caused by friction (inward growth is called a corn)
Mole	a small, brown spot-believed to be inheritedmay be flat or deeply seated-pale tan-brown or bluish black



Verruca	wart, a viral infection of the epidermis-benign
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Skin Tag

bead-like fibrous tissue that stands away from the flat surface-often a dark color



Polyp

growth that extends from the surface or may also grow with the body

### **Inflammations**

Eczema

dry or moist lesions accompanied by itching, burning, & various other unpleasant sensations usually red-blistered, & oozing



Psoriasis

rarely on the face, lesions are round, dry patches covered with coarse, silvery scales-if irritated, bleeding points occur-may be spread to larger area-not contagious



Herpes Simplex/  
Herpes Zoster = Shingles

fever blisters/cold sores-single group of vesicles  
on a red swollen base



Herpes Simplex



Herpes Zoster

## Allergy Related Dermatitis

Dermatitis  
Venenata

allergy to ingredients in cosmetics, etc.-  
protection is the prevention-gloves, etc.



Dermatitis  
Medicamentosa

dermatitis that occurs after an injection of a substance



Urticaria

hives-inflammation caused by an allergy to  
specific drugs/foods

## Primary Skin Lesions

Macule

small, discolored spot or patch on the skin's surface, neither raised nor sunken-ex: freckles



Papule

small elevated pimple containing no fluid, but may have pus note: yellow or white fatty papules around the eyes indicate an elevated cholesterol level-refer to a physician (xanthelasma).



Wheal

itchy, swollen lesion that lasts only a few hours: mosquito bite



Tubercle                      solid lump larger than a papule-projects above the skin or lies with-sized from pea to hickory nut

Tumor                        external swelling-varies in size, shape & color

Vesicle                        blister with clear fluid-lie within or just beneath the epidermis-ex: poison ivy



Bulla                         blister containng a watery fluid-larger than a vesicle



Pustule                        elevation with inflamed base, containing pus

## Secondary Skin Lesions

Scale	accumulation of epidermal flakes, dry or greasy: abnormal dandruff
Crust	accumulation of serum & pus-mixed with epidermal material-ex: scab
Excoriation	abrasion produced by scratching or scraping-ex: raw surface after injury
Fissure	crack in the skin penetrating into the dermis



Ulcer	open lesion on skin or mucous membrane, accompanied by pus & loss of skin depth
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## Acne Scars

Ice Pick Scar	large, visible, open pores that look as if the skin has been jabbed with an ice pick-follicle always looks open-caused by deep pimple or cyst
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Acne Pit Scar

slightly sunken or depressed appearance-caused by pimples/systs that have destroyed the skin & formed scar tissue



Acne Raised Scar

lumpy mass of raised tissue on the surface of the skin-caused where cysts have clumped together



## Contagious Disorders

Tinea

Tinea Capitis - Ringworm of Scalp

Tinea Sycosis - Barber's Itch

Tinea Favosa - Honeycomb Ringworm

Tinea Unguium - Ringworm of Nails

Athlete's Foot - Ringworm of Feet

ringworm, due to fungi  
(plant or vegetable  
parasites) -small reddened  
patch of little blisters that  
spread outward and heal in  
the middle with scaling



**CAUTION! NEVER ATTEMPT TO DIAGNOSE BUMPS, LESIONS, ULCERATIONS, OR DISCOLORATIONS AS SKIN CANCER, BUT YOU SHOULD BE ABLE TO RECOGNIZE THE CHARACTERISTICS OF SERIOUS SKIN DISORDERS AND SUGGEST THAT THE CLIENT SEE A PHYSICIAN OR DERMATOLOGIST.**

### **Extremely Serious Disorders-Skin Cancers**

Basal Cell Carcinoma

least malignant-most common skin cancer  
characterized by light or pearly nodules & visible  
blood vessels



Squamous Cell Carcinoma

scaly, red papules-blood vessels are not visible  
more serious than basal cell



Malignant Melanoma

most serious-characterized by dark brown, black, or discolored patches on the skin



Tumor

abnormal growth of swollen tissue

## **Nail Diseases/Disorders**

Onychophagy

nail biting



Onychogryposis

overcurvature of the nail-clawlike



Pterygium

sticky overgrowth of the cuticle

Eggshell Nail

extremely thin nail

Leuconychia

white spots under the nail plate



Paronychia

bacterial inflammation of tissue (perionychium) around the nail

Tinea Corporis

ringworm of the hand



Tinea Pedia

ringworm of the foot



Agnail

hangnail



Onychia

an inflammation somewhere in the nail



Onychocyanosis

blue nail (usually caused by poor circulation)

Hematoma Nail

bruised nail (usually caused by a hammer or slammed door)



Tinea Unguium

onychomycosis-ringworm of the nail



Onychorrexia

split or brittle nails with a series of lengthwise ridges



Beau's Lines

ridges/corrugations/furrows



Onychatrophia

atrophy or wasting away of the nail



Onychocryptosis

ingrown nail



Onychauxis	overgrowth of the nail plate
Onychosis	any nail disease
Onychophosis	accumulation of horny layers of epidermis under the nail



## Hair Disease/Disorders

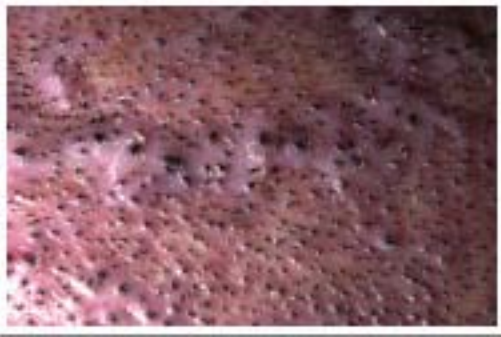
Pityriasis Capitis Simplex	dry dandruff
Pityriasis Capitis Steatoids Seborrhea Oleosa = Oily Dandruff	greasy dandruff
Trichoptilosis	split hair ends
Trichorrehexis Nodosa	knotted
Tinea Favosa	honeycomb ringworm
Tinea Capitis	ringworm of the scalp



Tinea Sycosis	barber's itch
Androgenetic Alopecia	common hereditary hair loss
Alopecia Adnata	loss of hair shortly after birth
Alopecia Areata	hair loss in patches



Alopecia Follicularis	hair loss caused by inflammation of hair follicles
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Alopecia Prematura	hair loss early in life
Alopecia Senilis	hair loss from old age
Alopecia Totalis	hair loss from entire scalp
Alopecia Universalis	hair loss from entire body
Traction/Traumatic Alopecia	patchy hair loss sometimes due to repetitive traction on the hair by pulling or twisting
Postpartum Alopecia	temporary hair loss at the conclusion of pregnancy

Telogen Effluven

hair loss during the telogen phase of the hair growth cycle



Canities

gray hair

Pediculosis Capitis

headlice

Monilithrix  
Fragilitis Crinium

beaded hair  
brittle hair

Hirsuties/Hypertrichosis

superfluous hair, excessive

Scabies

contagious disease caused by the itch mite



Impetigo/Infantigo

highly contagious bacterial infection, usually staphylococcal



Discoid Lupus

chronic autoimmune disorder, causes red

Erythematosus (DLE)

often scarring plaques, hair loss, & internal effects



Keloids

forms when excess collagen forms at the site of a healing scar-overhealing

Asteatosis

excessive dry skin