

# Medical Reference: Oily Skin (Seborrhea)

## 1. Condition Overview

**Name:** Oily Skin (Seborrhea) **What it is:** Oily skin, medically known as seborrhea, is a condition caused by the overproduction of sebum from the sebaceous glands. Sebum is a complex mixture of lipids (fats) that serves to lubricate and waterproof the skin and hair. When produced in excess, it results in a persistent "shiny" or "greasy" appearance, enlarged pores, and a higher predisposition to various forms of acne.

**Who is commonly affected:** Seborrhea is most prevalent during adolescence due to the surge of androgens (male hormones present in both sexes). However, it also affects a large percentage of adults, particularly those with genetic predispositions, hormonal imbalances (such as PCOS), or those living in humid climates.

## 2. Visual Severity Mapping

The following numerical scores categorize the level of sebum excretion and its impact on skin texture:

- **Mild (0–30):** Skin appears "dewy" or slightly shiny in the T-zone (forehead, nose, chin) by midday. Pores are slightly visible but not dilated. Makeup may slip slightly but does not disappear. No significant inflammatory lesions.
- **Moderate (31–60):** Visible shine across the entire face (T-zone and cheeks) within 3–4 hours of washing. Pores appear dilated and frequently contain sebaceous filaments or blackheads. The skin feels "slick" to the touch and requires multiple "blotting" sessions per day.
- **Severe (61–100):** Constant, heavy "greasy" appearance visible within 1 hour of cleansing. Skin texture is thick and coarse with significantly enlarged pores. High frequency of acne breakouts and a "heavy" feeling on the skin. Seborrheic dermatitis (flaking in oily areas) may also be present.

## 3. Common Triggers

- **Androgen Levels:** Fluctuations in hormones like testosterone and dihydrotestosterone (DHT) directly stimulate sebum production.
- **Genetics:** Large sebaceous glands can be an inherited trait.
- **Humidity and Heat:** High temperatures increase the fluidity of sebum, making it spread more easily across the skin surface.
- **Over-Cleansing:** Using harsh, stripping soaps can trigger a "rebound effect" where the skin produces more oil to compensate for the perceived dryness.
- **Dietary Factors:** Diets high in refined sugars and high-glycemic foods can spike insulin, which correlates with increased oil production.
- **Stress:** Cortisol (the stress hormone) can increase sebaceous gland activity.

## 4. Evidence-Based Care Guidelines

### Mild Care (Score: 0–30)

- **Foaming Cleanser:** Use a gentle, pH-balanced foaming cleanser twice daily to remove surface oil without stripping the barrier.
- **Oil-Free Moisturizer:** Use "non-comedogenic" gel-based moisturizers to maintain hydration, which prevents the skin from over-producing oil.

- **Niacinamide:** Incorporate a 5% Niacinamide serum to help stabilize oil production and improve pore appearance.
- **Daily SPF:** Use a "matte-finish" or "dry-touch" sunscreen to protect the skin without adding extra shine.

## Moderate Care (Score: 31–60)

- **Salicylic Acid (BHA):** Use a 2% BHA exfoliant 3 times per week to penetrate deep into the pores and dissolve the oil-keratin plugs.
- **Clay Masks:** Apply a Kaolin or Bentonite clay mask once or twice a week to absorb excess sebum from the deeper layers of the stratum corneum.
- **Retinoids:** Start a nighttime OTC Retinol or Adapalene (Differin) routine to regulate the skin's cell turnover and shrink the appearance of oil glands over time.
- **Double Cleansing:** Use a lightweight cleansing oil or micellar water followed by a gel cleanser at night to ensure all oil-based impurities are removed.

## Severe Care (Score: 61–100)

- **Prescription Topicals:** Consultation for high-strength Tretinoin or topical anti-androgens (e.g., Clascoterone).
- **Systemic Treatment:** For severe, treatment-resistant seborrhea, a dermatologist may discuss oral medications like low-dose Isotretinoin or Spironolactone (for women) to physically shrink the sebaceous glands.
- **Professional Peels:** High-concentration Salicylic acid peels performed in a clinical setting to provide deep follicular clearing.
- **Medical Consult:** Rule out underlying endocrine disorders such as Polycystic Ovary Syndrome (PCOS).

## 5. Do's and Don'ts

### Do

- **Blot, Don't Rub:** Use oil-absorbing sheets to press away excess shine during the day without disturbing the skin barrier.
- **Wash After Exercise:** Sweat mixed with oil is a primary cause of "clogged pores"; cleanse immediately after physical activity.
- **Use Non-Comedogenic Makeup:** Ensure all cosmetic products are labeled "oil-free" and "non-acnegenic."
- **Moisturize Regularly:** Oily skin can still be dehydrated; maintaining water levels is key to controlling oil.

### Don't

- **Use Alcohol-Based Toners:** High-alcohol "astringents" cause surface irritation and lead to increased oil production in the long run.
- **Skip Moisturizer:** Avoiding moisturizer makes the skin's surface "leathery," trapping oil underneath and causing more breakouts.
- **Scrub Vigorously:** Physical exfoliants (like walnut scrubs) create micro-tears and cause inflammation, which stimulates oil glands.
- **Touch Your Face:** Transferring oils and bacteria from your hands to your face can lead to secondary infections.