

Melasma beyond the skin: psychosocial impact on quality of life—a narrative review

Melasma além da pele: impacto psicossocial na qualidade de vida – uma revisão narrativa

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ABSTRACT

Melasma is a chronic facial dermatosis that strongly affects mental health and self-esteem, especially among women, causing anxiety, depression, and frustration due to its visibility and recurrence. This narrative review analyzed publications from the last five years (PubMed, SciELO, LILACS, VHL) regarding the condition's psychosocial impact. The results indicate a prevalence of depressive symptoms of up to 43.4%. Therapeutic success is found to depend on an integrated and humanized approach, combining effective treatments (such as oral tranexamic acid and the triple topical formula) with psychological support, aiming not only for lesion clearance but also for the restoration of patients' quality of life.

Keywords: Melanosis; Mental Health; Psychosocial Impact; Dermatology

RESUMO

O melasma é uma dermatose facial crônica que com forte impacto na saúde mental e a autoestima, especialmente entre as mulheres, causando ansiedade, depressão e frustração devido à sua visibilidade e recorrência. Esta revisão narrativa analisou publicações dos últimos cinco anos (PubMed, SciELO, LILACS, BVS) sobre o impacto psicossocial da condição. Os resultados apontam prevalência de até 43,4% de sintomas depressivos. Observa-se que o sucesso terapêutico depende de uma abordagem integrada e humanizada, combinando tratamentos eficazes (como ácido tranexâmico e fórmula tripla) ao suporte psicológico, visando, além do clareamento das lesões, a restauração da qualidade de vida dos pacientes.

Palavras-chave: Melanose; Saúde Mental; Impacto Psicossocial; Dermatologia

Review Article

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INTRODUCTION

Melasma is a chronic, recurrent dermatosis of multifactorial etiology, characterized by hyperpigmented, usually symmetrical patches affecting photoexposed areas, particularly the face. It is more prevalent in women of childbearing age, especially those with Fitzpatrick skin phototypes III to V. The main triggering factors include sun exposure, hormonal changes, genetic predisposition, oral contraceptive use, and certain photosensitizing medications.¹

Although it is a benign dermatological condition, melasma can have important emotional, social, and psychological consequences. Studies indicate that the visibility of facial lesions can impair self-esteem, promote social isolation, and is associated with anxiety and depression symptoms.^{2,3} A recent meta-analysis found a prevalence of depression of up to 43.4% among patients with melasma, particularly in Asian and Latin American populations.³ The recurrent nature of the disease, combined with frustration over ineffective treatments, contributes to the emotional distress of patients.²

In this context, it is essential for health care professionals to adopt an interdisciplinary approach that takes both clinical and psychosocial aspects into consideration, promoting care that is more empathetic, integrative, and patient-centered.^{1,4}

OBJECTIVE

To analyze the psychosocial impact of melasma on patients' lives, with an emphasis on emotional and social aspects related to self-esteem and mental health, and to identify therapeutic strategies that promote improvements in quality of life through an integrated and humanized approach.

METHODS

This study is a narrative review of the literature. PubMed, SciELO, LILACS, and VHL databases were searched. The search strategy used the English descriptors "melasma," "psychosocial impact," "quality of life," and "mental health," combined using the Boolean operators AND and OR, as follows: ("melasma" AND "psychosocial impact") AND ("quality of life" OR "mental health").

The review included studies published within the past 5 years, with full text available in Portuguese, English, or Spanish, addressing the psychosocial impacts of melasma and therapeutic strategies involving integrative approaches. The eligibility criteria included systematic reviews, literature reviews, clinical trials, observational studies (cross-sectional and longitudinal), qualitative or quantitative studies, and clinical guidelines.

Case reports, brief or extended abstracts, articles without access to the full text, and publications outside the established time frame were excluded.

RESULTS

The studies analyzed show that melasma predominantly affects adult women, particularly those with darker skin phototypes, a history of prolonged sun exposure, oral contraceptive use, or hormonal changes.

From a psychosocial perspective, a strong negative impact on self-esteem was identified, with frequent reports of shame, insecurity, feelings of inferiority, and social withdrawal. In addition, patients reported frustration over ineffective treatments and feelings of hopelessness given the recurrent nature of the condition.

Prevalence rates of depression of up to 43.4% were identified among patients with melasma, particularly in Asian and Latin American populations.³ Emotional symptoms were assessed using validated instruments such as the PHQ-9 (Patient Health Questionnaire), HADS (Hospital Anxiety and Depression Scale), and SDS (Zung Self-Rating Depression Scale), which found a significant association between melasma and symptoms of anxiety and depression.

It was also observed that the psychosocial impact does not necessarily correlate with the extent of the lesions, as measured by the MASI score, but rather with the patient's subjective perception of their appearance. Furthermore, interventions combining effective clinical treatment, such as oral tranexamic acid and the topical triple combination, with psychological support have demonstrated significant improvements in self-esteem and quality of life.^{1,4}

DISCUSSION

The impact of melasma extends beyond skin changes, profoundly affecting patients' emotional and social well-being. Hyperpigmented lesions located on the face—a central aspect of identity and interpersonal communication—can become a constant source of embarrassment and perceived aesthetic judgment.

This context may contribute to low self-esteem, anxiety, and depression, as evidenced by studies in which patients reported fear of social exposure, self-deprecation, and withdrawal from social interactions.² These findings are supported by studies finding a high prevalence of depressive symptoms among patients with melasma, particularly in populations in which aesthetic standards value lighter skin.³

The association between melasma and emotional distress highlights the need for health care professionals not only to treat the skin condition but also to recognize and address the subjective suffering associated with it. In this regard, integrating dermatological therapies and psychological support represents a promising strategy.

The use of oral tranexamic acid and the classical topical combination has demonstrated clinical efficacy and a positive impact on self-esteem.¹ These findings stress the importance of psychodermatology in the management of melasma.

CONCLUSION

Although melasma is a benign dermatological condition, it has a strong impact on the self-esteem, social lives, and mental health of patients, particularly among women. The literature shows that the facial manifestation of the disease can impair quality of life, promoting the development of anxiety, depression, and social isolation.

Therefore, it is essential for health care professionals

to adopt an interdisciplinary approach, integrating dermatological treatment with psychological support and empathetic care. Promoting person-centered care that acknowledges the patient's subjective suffering is essential to ensure not only clinical improvement but also emotional well-being.

In conclusion, therapeutic success should not be measured solely by lesion clearance, but also by the restoration of quality of life and social functioning. ●

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