ELANCYL
PARIS

Special expert file STRETCH MARKS

Stretch marks are lesions in the skin resulting from **breaking elastic fibres** and **disorganized collagen fibres** produced by fibroblasts in the dermis. When they first begin to form, stretch marks are purplish red in color and slightly elevated. Their appearance is a sign of inflammatory condition, after which they turn silvery white and start to look atrophied.

How are stretch marks formed?

Stretch marks are mainly located on the stomach, breasts, hips, thighs and buttocks. They are the consequence of sudden skin distension and/or hormonal changes:

Sudden skin distension: observed during rapid weight fluctuations, pregnancy or puberty accompanied by intense growth. The fibroblasts do not have time to produce enough elastin in order to face up to significant tension. The elastic fibre network therefore lacks resistance and breaks in places.

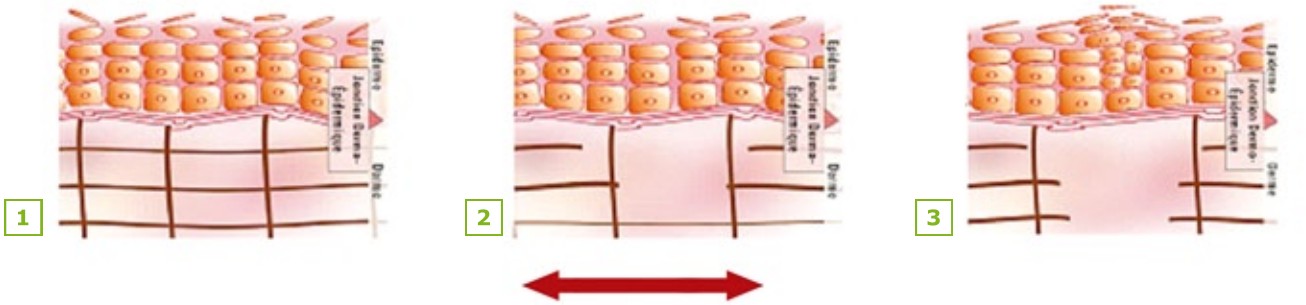
Hormonal changes: dermal fibre production is under the influence of a hormone called cortisol. Excess cortisol inhibits collagen and elastin production by the fibroblasts. During hormonal variations, higher production of cortisol may take place. The fiber network is then observed to weaken, showing lower resistance to wear.

Stretch marks are the sequellae of skin **stretching too rapidly** resulting in skin distension. They occur progressively. They are similar to scars and most often appear on the **hips, stomach, breasts, thighs, and buttocks.**

They might be caused by:

- Pregnancy → the stretch marks occur in the direction of the abdominal distension. They affect 50 to 70% of all primiparas.
- Puberty → stretch marks affect 50% of the young population.
- Significant weight changes → in this case stretch marks are most often located on the hips and thighs.
- Menopause or hormonal disturbances

THE FORMATION OF STRECH MARKS

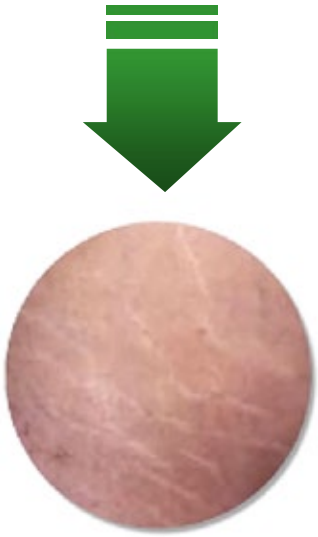


1 Normal skin with its dense network of dermal collagen fibres.

2 Hormonal changes lead to:

- the **decrease in collagen and elastin production,**
- the **disorganisation** of the collagen network,
- the **rupture** of elastic fibres,
- **poor healing**

3 Finally, the interstices formed by stretching are filled by new disorganised epithelial cells which give stretch marks their scarred appearance.



Initially, stretch marks form linear, atrophic, purplish-pink, smooth striae. This initial pinkish colour is related to the inflammatory phenomenon. At this stage, the stretch mark can be treated with cosmetic products that contribute to healing. **They never regress spontaneously.**

After 12 to 24 months, according to the woman affected, if they are not treated, the stretch marks become white and striated. At this stage, they become permanent.

How to fight against stretch marks?

PREVENT

By providing skin with intense nutrition and protecting elastic fibres in a way that will help them better resist stretching to avoid "breakage".

For whom?

In all women during "high risk" periods (puberty, hormonal changes, weight fluctuations, etc.).

In pregnant women as of the 4th month of pregnancy and up to one month after childbirth.

CORRECT

By preparing dermal tissue, by improving the skin's surface and by attenuating the visible appearance of stretch marks.

For whom?

In new mothers, teenage girls going through puberty, all women suffering from sudden weight fluctuations or hormonal changes.