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1: [Arch Dermatol.](#) 1997 Mar;133(3):339-42.

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Does estrogen prevent skin aging? Results from the First National Health and Nutrition Examination Survey (NHANES I)

[Dunn LB](#), [Damesyn M](#), [Moore AA](#), [Reuben DB](#), [Greendale GA](#).

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OBJECTIVE: To evaluate the relation between noncontraceptive estrogen use and skin wrinkling, dryness, and atrophy. **DESIGN:** Cross-sectional analysis of a national probability sample-based cohort study. **SETTING:** Multiple community sites throughout the United States. **PARTICIPANTS:** Postmenopausal women (n = 3875) aged 40 years and older at baseline. **MEASUREMENTS:** Skin conditions (wrinkling, dryness, and atrophy) were ascertained using a uniform clinical examination by trained dermatology resident physicians. Self-reported use of estrogen before the baseline examination, sunlight exposure, and smoking history were obtained by standardized interview. Body mass index, a measure of weight in kilograms divided by the square of the height in meters, was evaluated in uniform examination clothing. **RESULTS:** Mean (+/-SD) age of the participants was 61.6 (+/-9.0) years and mean (+/-SD) number of years since menopause was 15.6 (+/-9.4). Most were white (83.7%), the remainder being African American (15.9%) or another race (0.4%). Atrophy was present in 499 (16.2%), dry skin in 1132 (36.2%), and wrinkled skin in 880 women (28.2%). The prevalence of all 3 skin conditions was lower in African American women compared with white women. Information on hormone use was available for 3403 participants (88%). Among all women, after adjustment for age, body mass index, and sunlight exposure, estrogen use was associated with a statistically significant decrease in the likelihood of senile dry skin (odds ratio, 0.76; 95% confidence interval, 0.60-0.97). The odds of wrinkling were substantially lower in estrogen users, adjusted for age, body mass index, and sun exposure (odds ratio, 0.68; 95% confidence interval, 0.52-0.89) and additionally for smoking (odds ratio, 0.67; 95% confidence interval, 0.44-1.01). In multivariable models, estrogen use was not associated with skin atrophy. **CONCLUSION:** These results strongly suggest that estrogen use prevents dry skin and skin wrinkling, thus extending the potential benefits of postmenopausal estrogen therapy to include protection against selected age- and menopause-associated dermatologic conditions.

Publication Types:

- [Clinical Trial](#)

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