

## Women's Health

### 5 Myths About Retinoids You Should Stop Believing ASAP

You're missing out on skin-care gold.

BY KAYLEIGH DONAHUE HODES November 8, 2017



Dermatologists have long considered retinoids the "gold standard" ingredient for smoothing wrinkles and evening tone and texture. So how come, per a *WH* poll, only 30 percent of you are using one? Misconceptions, that's why! But we're here to clear those up—along with your complexion.

**THE MISCONCEPTION:**  
**"MY SKIN IS  
SENSITIVE—NO  
WAY COULD I USE  
A RETINOID."**

The reasoning: Retinoids (the umbrella term for *all* forms of the vitamin A derivative, including the popular OTC version retinol) are the Screech of the skin world: irritating. So women who have had reactions to other skin products—or who have tried a retinoid in the past and ended up tingly and flaky—think it's not for them.

The facts: Unless you're one of the small fraction of people with über sensitive skin, you probably just haven't given this guy enough of a chance. "Everyone is going to experience at least two weeks of retinoid dermatitis—that's the redness, flaking, dryness everyone is afraid of—but once the skin adjusts to regular use of the ingredient, those side effects will go away," says **Ava Shamban**, M.D., an assistant clinical professor of dermatology at the UCLA-Geffen School of Medicine.

Beyond that, there are ways "to prevent a retinoid from overwhelming the skin," says cosmetic chemist Ni'Kita Wilson. After cleansing, rub on a gentle moisturizer as a buffer, and use a retinoid formula that either contains an anti-inflammatory ingredient like niacinamide, such as PCA Skin Retinol Treatment for Sensitive Skin (\$109, amazon.com), or is formulated with a slow-release delivery system (fast, surface-level versions are not your friend); try RoC Retinol Correxion Sensitive Night Cream, (\$19, amazon.com) or SkinCeuticals Retinol 0.5 (\$55, amazon.com). Start with this routine one night a week; once you get over the introductory hump, swap the order of your moisturizer and retinoid, and increase your routine to three times a week to work your way up to every other day.

**THE MISCONCEPTION:**  
**"I HAVE ROSACEA.**  
**MY FACE IS**  
**ALREADY RED**  
**ENOUGH!"**

The reasoning: Rosacea itself is considered inflammatory and treated with products labeled "anti-redness"—so why willfully add more flame to the fire?

The facts: It's not a good idea to use a retinoid in the midst of an outbreak, we'll give you that. Otherwise, however, you shouldn't have any additional redness after the first two weeks of use. And, in fact, one study found that retinoids might even be a *treatment* for rosacea.

Follow the same routine outlined above, but use a product with a gentle derivative of the potent anti-ager, like retinaldehyde or retinyl propionate. Try Eau Thermale Avene Retrinal 0.1 Intensive Cream (\$70, amazon.com) or Environ Youth Essentia Vita-Peptide C-Quence Serum 1 (\$125, conceptskincare.com). These versions are easier for skin to handle, but it also takes a bit longer to see results, so be patient.

**THE MISCONCEPTION:**  
**"I USE OTHER  
 ANTI-AGING ACTIVES,  
 SO I DON'T NEED A  
 RETINOID."**

The reasoning: Mixing the big R with other exfoliants, like alpha hydroxy acids (AHAs), or collagen revvers like peptides and growth factors, seems, in the best case, redundant—and in the worst case, a chemical experiment bound to go awry.

The facts: Retinoids play way nicer with other anti-agers than they get credit for—and the idea of redundancy just isn't accurate. Let's start with AHAs. It's been shown that retinoids' efficacy is "enhanced when mixed with an alpha hydroxy acid like glycolic," says Julie K. Karen, M.D., codirector of CompleteSkin MD and an assistant clinical professor of dermatology at NYU Langone Medical Center in New York City. The safest bet is to alternate the two—AHA one night, retinoid the next—or to use one product that contains both. Such formulations don't bombard skin with too much of either, like L'Oreal Paris Revitalift Bright Reveal Overnight Moisturizer (\$20, [ulta.com](http://ulta.com)), with retinol and glycolic acid. These streamline the number of products you use, but experts say they're typically less potent than those with just the single ingredient.

If you use other, nonexfoliating anti-agers—antioxidants, peptides, or vitamin C—go ahead and slather 'em on the same night (retinoid first, so the other cream doesn't act like a buffer). "Retinoid use over time helps your other ingredients penetrate better, so they all work synergistically," says Karen (and it's particularly true of peptides and growth factors, which trigger collagen production in a different way than retinoids do). With these combos, it's especially wise (and money-saving) to get them in one product since there's no loss of potency here—these ingredients don't irritate, so you can benefit from the full strength of both at once. Try the peptide-spiked Murad Retinol Youth Renewal Night Cream (\$82, [amazon.com](http://amazon.com)).

**THE MISCONCEPTION:**  
**"I'VE GOT THAT  
 TWENTY-SOMETHING  
 GLOW HAPPENING. WHY  
 ON EARTH WOULD I NEED  
 AN ANTI-AGING CREAM?"**

The reasoning: To those under 30—or even 40—using a retinoid cream fits somewhere between retirement savings and owning a house on the list of things they'll worry about later. Why waste money on something you don't need yet?

The facts: First off, these ladies are right—a 25-year-old does not need a retinoid. But if you logged too many hours lying in the sun as a teen, consider this: "What your skin looks like on the outside at this age is not necessarily a reflection of the deeper layers where UV and oxidative damage lurk beneath the surface," says Shamban. After SPF, a retinoid is the next best thing for preventing wrinkles and dark spots from taking up residence on your face.

There's another reason you might want a retinoid now: It can also help with acne and clogged pores by exfoliating the outer layer of skin, says Diane Berson, M.D., an associate professor of dermatology at Weill Cornell Medical College. Go for a 0.5 or 1 percent retinol formula, such as SkinMedica 1.0 Retinol Complex (\$53, amazon.com), which comes in 0.5 concentration too, or Paula's Choice Clinical 1% Retinol Treatment (\$55, amazon.com). Use it twice a week if you have normal skin; individuals with more oily or acne-prone skin will likely be able to tolerate the retinol more regularly, says Karen.

**THE MISCONCEPTION:**  
**"I HEARD IT CAN  
 MAKE YOU LOOK  
 OLDER"**

The reasoning: The initial skin dryness a retinoid causes can make fine lines and wrinkles look more pronounced, particularly if you're already dry.

The facts: Tell your doc this, and prepare for her to get all up in your face! "Retinoids are the single most favorite anti-aging ingredient of derms—there's nothing you can apply topically that's more proven," says Karen, referring to the decades of research on the ingredient's ability to stimulate collagen production, resurface complexions, even skin tone, and just generally rewind the hands of time. Dryness is only part of that darned adjustment period. Get past that and you should be fine. "But you can also choose a formula that contains hydrators to help manage the issue," says Berson. Look for a cream instead of a gel (the latter saps moisture), then scan the ingredients list for hydrating add-ins like hyaluronic acid, glycerin, or ceramides. Try Vichy LiftActiv Retinol HA Concentrate (\$45, amazon.com) for its hyaluronic acid.

<https://www.womenshealthmag.com/beauty/retinoid-myths-and-facts>