Melasma doesn't cause any other symptoms besides skin discoloration but may be of great cosmetic concern. Rarely, these dark patches may appear on other sun-exposed areas of the body. The darker-colored patches of skin can be any shade, from tan to deep brown. The dark patches often appear on both sides of the face in a nearly identical pattern. The exposure to the sun increases your risk. For example, women who are pregnant or who take medicines used to treat ovarian or thyroid problems. If you are already susceptible to melasma, that make you sensitive to the sun (photosensitizing). These can include some cosmetics and spend a lot of time in the sun.

Other factors that make it more likely that a person will get melasma include using medications hormone medication and avoid the sun are less likely to develop melasma than are those who pregnancy. “The dark patches typically last until the pregnancy ends. Despite the strong connection to hormones, no one knows exactly what causes the skin discoloration. Deficiency of Folic Acid during pregnancy can also lead to development of Melasma. Sun exposure, following the use of deodorant soaps, scented toiletries, and various cosmetics can also produce this mottled pigmentation. This is called a phototoxic reaction and is due to ultraviolet radiation being absorbed by the chemical substance on the skin. Contraceptive preparations. It may also be noticed in apparently healthy, normal, non-pregnant women where it is presumed to be due to some mild and harmless hormonal imbalance. Chloasma also occurs as a side-effect of taking contraceptive pills and injected depot lotions, scented soaps, and other toiletries. It is thought that female sex hormones causes melanocytes or the pigment-producing cells to produce and deposit excess pigments. It may develop in association with menopause, hormonal imbalance and ovarian disorders especially common in pregnant women, women who are taking oral contraceptives (“the pill), and women taking hormone replacement therapy during menopause. Melasma is often associated with the female hormones estrogen and progesterone. It is more common in dark skins than in fair skins. Brownish skin tones are at greatest risk. Chloasma is especially common in women aged 20-40. Melasma during pregnancy is relatively common. Sometimes it is called the “mask of pregnancy because it often develops during pregnancy. Because of melasma's relation to pregnancy and oral contraceptives, it is thought melasma in predisposed persons. Both ultraviolet A (UVA) and ultraviolet B (UVB) are believed to contribute to the formation of melasma in predisposed persons.

A factor that does seem to be essential to the development of melasma is sunlight. Estrogen is not essential to the development of melasma, however, as men may also be affected. Melasma has been referred to as the mask of pregnancy because it often develops during pregnancy. Melasma is a very common skin disorder. Though it can affect anyone, young women with especially common in pregnant women, women who are taking oral contraceptives, nor HRT medications. A patchy brown or dark brown skin discoloration that usually occurs on face and may result from Chloasma. It is generally found on sun-exposed areas of the face. Melasma often fades over several months after stopping oral contraceptives or hormone replacement therapy (HRT) or after delivering a child. It may return with additional pregnancies or use of these medications. The discoloration never entirely disappears. However, this condition develops spontaneously in some women who are neither contraceptives. Homeopathy treats the person as a whole. It means that homeopathic treatment focuses on the patient as a person, as well as his pathological condition. The homeopathic medicines are selected after a full individualizing examination and case-analysis, which includes the medical history of the patient, physical and mental constitution etc. A miasmatic tendency (predisposition/susceptibility) is also often taken into account for the treatment of chronic conditions. The medicines given below indicate the therapeutic affinity but this is not a complete and definite guide to the treatment of this condition. None of these medicines should be taken without professional advice.

Homeopathec Theraeutics

Sulphur, Lycopodium clavatum, Sepia offincinalis, Thuja occidentalis, Argenticum nitricum, Cadmium sulphuratum, Copaiva offincinalis, Guarana, Caulophyllum, Thalictroides, Plumbum metallicum, Curare.
Homeopathic Remedies:

**Sulphur**

Skin affection after local medication. Old looking. Spotted face. Skin dry, rough, wrinkled, scaly; Itching, violently at night. Scrofulous diathesis. Liver spots. Unbreakable itching, especially from warmth. Dirty, filthy people, prone to skin affection.

**Lycopodium Clavatum**

Grayish-yellow discoloration of the face, with blue circles around the eyes. Brown spot on face and nose. Carbo nitrogenoid constitution. Craves everything warm.

**Sepia Offincinalis**

Chloasma; yellow spots [moth spots] the on the face, and a yellow saddle across the upper part of cheeks and nose. Suited to patient with having dark hair, rigid fibre. Ailments during pregnancy.

**Thuja Occidentalis**

Dry skin with brown spot. Hydrogenoid constitution. skin looks dirty. Face, pale, waxy, shiny; dark under eyes; spiderlets on.

**Argenticum Nitricum**
Face looks sunken, old, pale and bluish. Brown liver spot; irregular blotches. Skin is brown, tense and hard. A prematurely aged look. Irregular blotches

**Cadmium sulphuratum**

Chloasma, yellowish stains on nose and cheeks; worse from exposure to sun and wind.

**Copaiva Officinalis**

Brown spot; circumscribed, lenticular patches with itching. Mottled appearance.

**Guarana**

Chloasma on temples and arms. intellectual excitement; uncontrollable sleepiness.

**Caulophyllum Thalictroides**

Discoloration of skin in women with menstrual and uterine disorders.

**Plumbum metallicum**

Yellow, corpse like dark brown liver spots; cheeks sunken. Skin of face is greasy, shiny. Face
pale cachetic.

Curare


**Prevention of Chloasma, Melasma.**

- Avoiding the sun and using sunscreen are key to preventing melasma.
- Avoid irritating the facial skin- No strong soaps or abrasive cleaners - use only a mild soap or cleanser for washing.
- Increase intake of foods high in folic acid, dark green leafy vegetables, wheat germ, asparagus, broccoli, potatoes, whole grains, fruits and vegetables.