# Lifewire: Fitness center can be source of skin maladies

*by Ven_Griva*

Gymnasiums are almost universally considered to be excellent places to improve our health. But working out at public fitness centers can pose a danger many of us fail to bear in mind.

The shared equipment and surfaces found in public gyms and fitness centers can act as breeding grounds for the kinds of bacteria that cause skin infections, warns Dr. Kent Aftergut of the American Society of Dermatological Surgery.

"Physical activity is only one part of the healthy lifestyle puzzle," said Aftergut. "Cleaning gym equipment is an easy step in preventing dangerous bacterial infections, and should be added to any workout routine."

Aftergut ticked off the most common skin infections found in fitness centers:

- Staph infection: Skin lesions such as boils or open, non-healing sores are sure signs of a staph infection. These infections can be easily transferred from shared gym equipment to the skin, nose and throat. If left untreated, staph infections can invade the bloodstream, lungs, urinary tract and heart.

- Athlete's foot: Athlete's foot is spread by walking barefoot on locker room and shower floors. Symptoms include red, scaly, tender rashes in between toes. If left untreated the infection can spread to other parts of the foot and body.

- Ringworm: Shared yoga mats, unsanitary equipment and dirty towels are all sources of ringworm. The symptoms include round, red, scaly rings on the surface of the skin. It can also infect the scalp, feet and nails. If left untreated, ringworm can permanently scar infected areas.

- Nail infection: Wearing poorly fitted shoes to exercise in can lead to raised calluses and irritated, red toenail beds. Left untreated, infection can spread and cause toenail loss.

WHAT TO DO

Aftergut and the American Society of Dermatological Surgery provide the following suggestions to prevent skin and nail problems while exercising at public gyms and fitness centers:

- Sanitize: Wipe all equipment with sanitizer spray and paper towels, or antibacterial wipes, to remove dangerous bacteria.

- Bring your own mat: Avoid shared yoga mats that can absorb and trap sweat and support infection-causing bacteria.

- Wear well-fitted shoes: Tight and unsupportive gym shoes can cause toenails to become painful, inflamed and infected.

- Wear shower shoes: Always use protective footwear before heading into locker rooms and showers to stop the spread of athlete's foot.

- Take care with towels: To avoid the risk of spreading dangerous bacteria to your body, never use a towel more than once and never share one.

- Observe your skin: Monitor your skin to see how it reacts after you work out at a public gym or fitness center. If you experience persistent skin irritation or infection, visit a board-certified dermatologist.

For information on a certified skin doctor near you, visit the ADA Web site at www.asds.net.

BUTT OUT

The list of reasons for women to stop smoking continues to grow. Now the skin disorder psoriasis can be added to that list.

Researchers have found that smoking increases the risk of developing psoriasis, heavier smoking increases the risk further, and the risk decreases only slowly after quitting.

The study involved researchers from Boston at the Massachusetts General Hospital, Brigham and Women's Hospital and the Harvard School of Public Health, and researchers at Vancouver General Hospital.

It was the largest study ever to investigate the link between smoking and psoriasis and is published in the November 2007 issue of The American Journal of Medicine.

The research team mined data collected in the Nurses Health Study II, an ongoing study of more than 116,0000 female registered nurses from 15 states between the ages of 25 and 42 who completed and returned an initial questionnaire in 1989. The researchers documented 887 incident cases of psoriasis during the 14 years of follow-up.

To quantify the extent of the smoking by the survey respondents, researchers measured lifetime smoking exposure in pack-years, equal to smoking 20 cigarettes per day for one year.

Pack-years were associated with an increase in the risk for psoriasis. Compared with women who never smoked, the risk of psoriasis was 37 percent higher among past smokers and 78 percent higher among current smokers.

Furthermore, the risk was 20 percent higher for those who had smoked between one and 10 pack-years, 60 percent higher for those who logged between 11 and 20 pack-years, and more than 200 percent higher for those who smoked for 21 or more years.

The trends persisted with smoking duration for those who still smoke, and those who had quit. Furthermore, exposure to passive smoke during pregnancy or childhood was associated with an increased risk of psoriasis.

There was good news for those who had quit smoking, though it wasn't immediate. The risk of psoriasis among former smokers decreased to that of those who had never smoked 20 years after smokers had quit.

"These findings, along with well-established hazardous health effects of smoking, provide clear incentives for smoking cessation in those at risk for and suffering from psoriasis," writes Dr. Hyon K. Choi in the journal article.

He goes on to say that for those who quit smoking, ceasing would not only improve their psoriasis, but also improve their health in relation to a host of other recognized health risks associated with tobacco use.

E-mail Ven Griva or write to P.O. Box 120190, San Diego, CA 92112.

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