

# Post-Inflammatory Hyperpigmentation (PIH)

(Dark marks that appear after acne, eczema, irritation, or injury)

## What Is PIH?

**Post-Inflammatory Hyperpigmentation (PIH)** is **darkening of the skin** that happens **after inflammation or injury**. It's your skin's natural response: inflammation can signal pigment-producing cells to make **extra melanin**, leaving a **brown, gray-brown, or even blue-gray mark** where the skin was irritated.

PIH is **not dangerous** and **not contagious**, but it can take time to fade—especially without the right plan.



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## What Causes PIH?

PIH can follow almost any inflammatory skin event, including:

- **Acne** (especially picked or cystic acne)
- **Eczema / dermatitis**
- **Insect bites**
- **Rashes** or allergic reactions

- **Cuts, scrapes, burns**
- **Waxing, threading, shaving irritation**
- **Procedures** (if the skin becomes inflamed afterward)

PIH is more common and often more noticeable in **medium to deeper skin tones**, but it can affect anyone.

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## What Does PIH Look Like?

PIH is usually:

- **Flat** (not raised)
- Located exactly where the original bump/rash/injury was
- **Brown to dark brown** most commonly
- Sometimes **gray or blue-gray** (often indicates deeper pigment)

**Tip:** If a spot is **raised, scaly, bleeding, changing rapidly, or not linked to a prior rash/blemish**, it should be evaluated.

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## PIH vs Melasma

They can look similar, but they're different:

- **PIH:** follows **inflammation** (acne, eczema, bite) and matches the shape/location of the prior spot.
- **Melasma:** tends to be **symmetric patches** on cheeks/forehead/upper lip and is strongly linked to **sun + hormones**.

Many people can have **both**.

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## How We Treat PIH

PIH treatment works best in layers: **prevent new marks, fade existing marks, and protect the skin barrier**.

### 1) Sun protection (foundation of PIH care)

Sun exposure can **darken PIH and slow fading**.

- Daily broad-spectrum sunscreen
- Hats / shade when outdoors
- Consider protection from heat/visible light if you're very pigment-prone

## 2) Treat the cause

If acne or eczema is still active, we focus on controlling it to prevent new marks.

## 3) Gentle brightening + skin barrier support

Common approaches include:

- Prescription or medical-grade brighteners
- Gentle retinoid routines (when appropriate)
- Barrier repair moisturizers to reduce irritation

## 4) In-office options (selected patients)

When appropriate and safe for your skin type:

- Chemical peels (carefully selected)
- Other targeted procedures

**Important:** Over-treating or irritating the skin can worsen PIH—especially in pigment-prone skin—so we choose treatments carefully.

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# Pre-Op Instructions

*(Not surgery—these are “before starting treatment or procedures” tips.)*

## Before your PIH visit

- Bring a list (or photos) of current skincare products
- Tell us if you have a history of **dark marks after irritation** or prior procedures
- Avoid tanning/sunburn before your visit
- If you’re treating acne: avoid picking/squeezing (a major PIH trigger)

## If you’re scheduled for an in-office procedure (peel, etc.)

- Avoid waxing/threading on the area beforehand (we’ll give timing)
  - Stop harsh exfoliants/strong acids/retinoids as directed
  - Let us know about:
    - Recent breakouts, eczema flares, or skin irritation
    - Pregnancy/breastfeeding (may change treatment options)
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# Post-Op Instructions

## After starting topical treatment

- Use products exactly as directed—**more is not better**
- Expect gradual improvement over **weeks to months**
- If you develop burning, significant redness, peeling, or worsening darkening, stop the product and contact the office

## After an in-office treatment

- Be strict with **sun protection**
- Use gentle cleanser + bland moisturizer until healed
- Avoid picking, scrubbing, or exfoliating until cleared
- Call if you have increasing pain, swelling, blistering, pus, or fever

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## How Long Does PIH Take to Fade?

It depends on:

- How deep the pigment is
- Your skin tone and how reactive your pigment cells are
- Ongoing sun exposure
- Whether inflammation (acne/eczema) is still active

Some marks fade in **weeks**, others take **months**—and deeper gray/blue pigment can take longer.

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# Post-Inflammatory Hyperpigmentation (PIH) FAQ

## Is PIH a scar?

Usually, no. PIH is a **color change**, not a texture change. True scars cause **indentation or thickening**.

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## Why do my acne marks last so long?

Inflammation stimulates pigment production. Picking, deeper acne, and sun exposure can make marks darker and longer-lasting.

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## Can PIH be prevented?

Often, yes. The best prevention is:

- Treat acne/eczema early
- Avoid picking/scratching
- Daily sunscreen
- Gentle skincare that protects the barrier

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## Should I use bleaching creams?

Some lightening ingredients can help, but “strong” or unregulated products can irritate skin and worsen PIH. It’s safest to use a dermatologist-guided plan.

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## Do chemical peels help PIH?

They can help in selected patients, but they must be chosen carefully—especially for pigment-prone skin—because irritation can trigger more PIH.

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## Why did my dark marks get darker after a product or treatment?

If the skin becomes irritated or inflamed, pigment can increase. This is why we focus on **gentle, consistent** treatment and barrier repair.

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## When should I be worried that it’s not PIH?

Schedule evaluation if a spot is:

- Growing, bleeding, crusting, painful, or changing quickly
- Not connected to a prior pimple/rash/injury
- A new dark lesion that looks different from others