With the dandruff issues... My first thing would be to try shampoos/conditioners w/out ANY TOXIC CHEMICALS!!!! My whole family uses Young Living shampoos/soaps and we've never had a problem w/dandruff. For a couple tests throughout the years, (after a nurse asked me about options w/ bad dandruff) I tried a test. I bought other shampoos from the store just to see if it made a difference (Panteen Pro V and others). Within TWO WEEKS, I had itchy scalp and flakes appearing! Also Young Living Lavender essential oil is great for itchy stuff. (I only use Young Living though, it's the leading brand in the world for therapeutic grade essential oils and they're NOT the same as what you would buy at a health food store/organic section of a market store etc)

http://www.globusz.com/ebooks/Skin/S.gifeborrheic dermatitis is a fancy name for what I refer to as “dandruff of the skin.”

Characterized by symmetrically distributed, red, scaly, and greasy patches, seborrheic dermatitis is a condition – not really a disease – that dermatologists can diagnosis just by looking at you. It doesn’t take fancy blood tests, sophisticated laboratory analyses, or microscopic examination of a piece of skin to prove conclusively that you do, indeed, have seborrheic dermatitis. All it takes is a dermatologist’s scrupulous eye.

Seborrheic dermatitis, affecting between 3% to 5% of the population, is one of the most common skin disorders seen by practicing dermatologists. It affects people with Parkinson’s disease and about 90% of those infected with HIV (human immunodeficiency virus). It is not serious, infectious, contagious or malignant.

Like hundreds of other skin ailments, no one knows what causes this mainly cosmetic problem. And, as with so many other disorders, there are many theories concerning the “why” of this common, but troublesome problem. These theories include the following:

* a hormonal imbalance
* a hereditary predisposition
* dietary indiscretions and obesity
* drugs (Thorazine, Haldol, Tagamet, anti-seizure medications)
* environmental factors
* germs
* emotional stress and tension, worry, loss of sleep
* certain nervous disorders.
* a yeast-like organism related to a fungus

A recent theory proposes that seborrheic dermatitis results from a defect in your body’s defense against certain germs that live on the surface of your skin. Actually, no one knows . . . .

There is a condition in infants called “cradle cap,” where the scalp is covered with thick, yellowish-brown, greasy crusts, and where the hair becomes sticky and matted. This common disorder is thought to be due to leftover hormones that have been passed on to the susceptible infant from his or her mother. These maternal hormones act to stimulate the sebaceous (oil) glands in the scalp, with the result that there is a marked production of an oily secretion – sebum. This sebum is responsible for “cradle cap” – the earliest manifestation of seborrheic dermatitis.

Shortly after birth, activity in these sebaceous glands diminishes, with the result that you will almost never have seborrheic dermatitis during your childhood. When you reach puberty, however, your developing sex glands begin to stimulate these quiescent “oil formers,” which then increase in size and become very active. If you have seborrheic dermatitis, you will notice that the condition begins on your scalp in the form of redness and diffuse scaling.

In addition to this “heavy dandruff,” you’ll find that your hair gets greasy and your scalp may itch. Scaly, pink, crust- like patches may begin to form around your hairline. Other areas of your body rich in oil glands often develop patches as well: your eyebrows, the areas over and behind your ears, your ear canals, the sides of your nose, your forehead, your chest and armpits.

If you are a young man, you may develop these patches in your beard, your sideburns, and your mustache area. In certain cases, you may have the rash on your chest, back, and pubic region. Some people develop it in the body folds: the groins, the armpits, under the breasts, and in the belly button.

Your rash may or may not itch.

A special case of seborrheic dermatitis occurs when the margins of the eyelids become red and covered with small white scales or yellowish crusts.

Since seborrheic dermatitis is a chronic and recurring condition, flare-ups at odd moments are common. These occur more often in colder months.

Treatment of seborrheic dermatitis is directed at minimizing the symptoms, rather than curing the disorder permanently. Persistent, regular, and repeated treatment should give you good control over this annoying ailment.

Here are a dozen suggestions for managing and living with your seborrheic dermatitis:

* Shampoo frequently – daily if at all possible. Frequent shampooing is the first rule in treating seborrheic dermatitis. Some of the over-the-counter shampoos that dermatologists recommend are those with tar, zinc, selenium sulfide, ketoconazole, or salicylic acid.
* Since the patches of seborrheic dermatitis are prone to secondary infection by bacteria and other germs, keep your skin clean by washing carefully and regularly using a mild cleanser.
* Keep “cool.” Avoid stress and emotional tension.
* Get plenty of rest.
* Eat a well-balanced diet.
* Avoid greasy foods and alcoholic beverages.
* If you are overweight, try to lose those extra pounds.
* Avoid greasy cosmetics and oily moisturizers.
* If it itches, try not to scratch.
* Small amounts of sunlight usually help.
* If you are under the care of a dermatologist, follow his or her instructions for the proper use of topical medications.
* Avoid those over-the-counter remedies.

Dandruff, Itching, Flakey Scalp – may be caused by a fungus or imbalance of Omega 3s & 6s

Does it strike you as being odd how our modern world approaches everything from a *“once you’ve got a condition, they have some chemical or drug to fix it?”* But do they really? And is it also wise to approach every condition, such as dandruff, from the angle of, *“what can I use to make it go away?”* Rather than, *“hmmm, why did it happen in the first place?”* and correct the problem at the “root” of the cause.

Dandruff has been blamed on a multiplicity of causes, including dry skin, oily skin, too much or too little hair washing, diet, stress or hygiene. However, the real cause of dandruff is actually a yeast-like fungus, *Malassezia globosa*, which lives on your scalp, feeding on skin oils.

Dandruff is shedded skin; dandruff sufferers shed skin much more rapidly than other people. This happens because the fungus uses enzymes called lipases to metabolize the oils, which creates a by-product called oleic acid. The acid penetrates your skin and triggers skin cell shedding.  
  
In the [words of Dr. Mercola](http://articles.mercola.com/sites/articles/archive/2007/11/20/dandruff-is-caused-by-scalp-fungus.aspx): *“This is another classic example of blaming an infectious agent for the ’cause’ of a disease.”*

Scientists have come a little closer to [understanding the mysteries of dandruff](http://www.timesonline.co.uk/tol/life_and_style/health/article2814059.ece), a condition as ubiquitous as it is embarrassing.

In the past, dandruff has been blamed on dry skin, oily skin, washing the hair too often or not enough, on diet, stress or simply a lack of personal hygiene.

*“Dandruff on the collar”* = a man careless of his personal appearance!

Perhaps, the real blame for dandruff lies not in neglect, but in a yeast-like fungus, *Malassezia globosa*, which lives on the scalp in millions and feeds on the oily products of the sebaceous glands.

Finally, scientists have decoded the complete DNA of the fungus, which could provide clues on how to combat this little bugger more effectively. The scientists involved work for Procter & Gamble, manufacturers of Head & Shoulders, a successful anti-dandruff shampoo and laden with chemicals! The fungus is one of the simplest ever sequenced, with just 4,285 genes, 300 times fewer than its human host.

[Ketoconazole](http://en.wikipedia.org/wiki/Ketoconazole) is a synthetic antifungal drug used to prevent and treat skin and fungal infections, especially in immunocompromised patients such as those with AIDS. Due to its side-effect profile, it has been superseded by newer antifungals, such as fluconazole and itraconazole.[1] Ketoconazole is sold commercially as an anti-dandruff shampoo, branded Nizoral®, by Janssen Pharmaceutica.

Ketoconazole is very lipophilic, which leads to accumulation in fatty tissues. The less toxic and more effective triazole compounds, fluconazole and itraconazole, have largely replaced ketoconazole for internal use – YUCK! Internal use!!! Ketoconazole is best absorbed at highly acidic levels, so antacids or other causes of decreased stomach acid levels will lower the drug’s absorption when taken orally.

**Antimicrob Agents Chemother. 2000 Feb;44(2):467-9.**

The in vitro activities of ketoconazole, econazole, miconazole, and Melaleuca alternifolia (tea tree) oil against Malassezia species.  
Hammer KA, Carson CF, Riley TV.

**Department of Microbiology, The University of Western Australia, Nedlands, Australia.** khammer@cyllene.uwa.edu.au

The in vitro activities of ketoconazole, econazole, miconazole, and tea tree oil against 54 Malassezia isolates were determined by agar and broth dilution methods. Ketoconazole was more active than both econazole and miconazole, which showed very similar activities. M. furfur was the least susceptible species. M. sympodialis, M. slooffiae, M. globosa, and M. obtusa showed similar susceptibilities to the four agents.

**Yikes, that’s a mouthful. Not to mention, a body full of yet more toxic chemicals!**

You know how I’m always talking about therapeutic-grade essential oils and how they can kill probably every bug, virus, germ, and so forth that we don’t want?



Lavender Signature Series

It seems to me that the [**Young Living**](http://theveryessence.com/) shampoo’s, which contain therapeutic-grade essential oils would do the trick. If on their own they didn’t, I’d simply add several drops of Thieves essential oil to the shampoo.

Not to knock the Melaleuca species… but, I have at my fingertips 150 different Young Living essential oils and I can honestly say that it is NOT one of the oils I turn to when I have a serious problem – why? It’s not potent enough. I have four different species of Melaleuca in my essential oil case and I haven’t touched any of them in the past 4 years, simply because I have other essential oils that do the job better, a lot better!

If I had a bad case of dandruff, you better believe I’d turn to my Young Living Thieves, Oregano and Lemongrass essential oils! I use the Young Living shampoo/condition all the time and hand even used the [Thieves Foaming Hand Soap](http://aromatherapy4u.wordpress.com/2008/06/21/thieves-foaming-hand-soap-a-natural-antibacterial/) as a shampoo for myself and[my dog](http://aromatherapy4u.wordpress.com/2007/09/10/thieves-foaming-hand-soap-makes-a-terrific-pet-shampoo/) – it works great!

**Young Living has 3 different shampoo’s and conditioners, none of them contain toxic ingredients.**



Omega Blue Softgels

Most of the population is deficient in Omega 3′s. It’s amazing the results one can have by simply adding a little mercury-free fish oil to their diet.

Omega Blue™ ([fact sheet](http://www.youngliving.us/pdfs/PIP_OmegaBlue.pdf)) is a clinically proven dose of omega-3 (EPA, DHA) fatty acid nutrients. Critical for heart, eye, brain, and joint health, Young Living’s® Omega Blue™ pure fish oil is free of heavy metals, PCBs, and dioxins, and offers the benefits of our Omega Enhance™essential oil blend to ensure freshness and stability.

Omega Enhance combines legendary blue chamomile and myrrh oils to support a healthy inflammatory response, lemongrass oil to provide cardiovascular protection and support healthy cholesterol levels, and clove and myrrh for added antioxidant support.\*