Dermatological Diseases and Cumulative Life Course Impairment
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This pioneering volume on dermatological diseases uses a life course perspective to arrive at a better understanding and more effective treatment of skin diseases. The authors have made important discoveries that come from taking the long view. They recognize the significance of a disfiguring skin disease for a person’s self-esteem, confidence, and quality of life. Such effects evolve over decades, not merely during the week before the patient sees a doctor. Thus, it is important to find and treat people while they are still young rather than let them wait for treatment later on. Delayed treatment can cause other problems to accumulate such as obesity, depression, and loneliness that are typical consequences of the embarrassment that comes from disfigurement and social stigmatization.

These lessons coming from the field of dermatology make an important contribution to the life course perspective that first emerged in the social sciences. Prior to the 1970s, psychologists had been able to draw a fairly detailed picture of child and adolescent development, and they had considerable knowledge of the aging process at the other end of life. But the nature of development between early adulthood and late middle age was largely unexplored. Early attempts to chart the territory of midlife were made by psychiatrists like Daniel Levinson in *Seasons of a Man’s Life* and popular writers like Gayle Sheehy in *Passages*. But a more comprehensive picture did not emerge until the extensive use of longitudinal surveys that followed children, adolescents, and adults over a number of years. Social scientists such as Glen Elder in his *Children of the Great Depression* traced the remarkable links between early experience and later outcomes. Moreover, formative influences were not all endogenous to the individual but included interactions with outside influences. Distinctive life course outcomes are further shaped by the stage of life when a significant event occurs, family influences such as socioeconomic status that lead to a deprived or nondeprived childhood, or exposure to massive historical changes such as war and depression. This new research identified a triad of factors in shaping the life course that came to be known as age, period, and cohort effects. More recently, life course scientists are beginning to recognize genetic differences that also powerfully shape life outcomes over the long term.
In this book on *Cumulative Life Course Impairment in Dermatological Diseases*, we see a focus that happens to be at the growing edge of life course research, namely the study of cumulative advantage and disadvantage. The focus on cumulative disadvantage is being carried into the world of medical research as it relates to a group of diseases that include both genetic factors and social components. The shame of dermatological disease makes one think of Erving Goffman’s classic study of *Stigma*, the description of a person without a nose. Goffman describes the painful social interaction and personal suffering that such a condition engenders. So too with an unattractive skin condition, the sufferer not only experiences physical discomfort but reluctance to socialize and the many accompanying dangers that can result such as weight gain, mood changes, substance abuse, social isolation, and downward social mobility. These effects, along with the availability of medical therapies that have vastly improved over the past 15 years, make clear the importance of early discovery and treatment. Such treatment will not only involve earlier intervention with the use of more effective new drugs but also bring attention to the negative social consequences of the disease and ways to mitigate them through face-to-face and online support groups. Using a life course perspective and a combination of new medical treatments and support programs, these authors illuminate the steps that can both heal patients’ bodies and strengthen their spirits.

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