# THE IMPACT OF COSMETOLOGICAL PROCEDURES ON STRIAE AFFECTED WOMEN SKIN

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## Abstract

The article analyses the effect of cosmetic procedures on women's skin affected by striae, the impact of stretch marks on women's quality of life and presents the research data describing respondents' knowledge about stretch marks, their correction possibilities, and their impact on quality of life. The research data is compared with the findings of studies conducted by foreign authors.

Keywords: striae, stretch marks cosmetological procedures, life quality.

# Introduction

Actuality. Around 90 % of females face the problem of striae affected skin condition. This often causes low self-confidence and psychological distress particularly in women of certain professions where physical appearances have significant importance. Recently, with the increasing significance of cosmetic procedures and awareness, women approach specialist for stretch marks correction [8].

The cause of this pathology is currently unknown and despite several advances, no means of striae correction is fully effective. Striae known as stretch marks, are a common disfiguring skin condition, characterised by tearing of elastic fibres. Elastic fibres undergo elastosis along with degranulation of mast cells. The skin loses its elasticity in the affected area [9]. The emergence of stretch marks is associated with changes in elastin, fibrillin, and collagen. These components are responsible for the skin's elasticity and resistance to stretching [4]. Stretch marks generally develop in various physiological states such as growth spurt during puberty, pregnancy, obesity, in pathological conditions as a side effect of systemic corticosteroid therapy [9]. Various diseases such as nervous anorexia, Cushing's syndrome, rheumatic fever, and chronic liver diseases also influence the appearance of stretch marks [16]. The formation of stretch marks is also associated with hormonal imbalances. Increased levels of androgens, oestrogens, and glucocorticoids contribute to the appearance of stretch marks [1]. Typically, the development of stretch marks is influenced not by a single factor but by several [10].

The issue of stretch marks is particularly sensitive during pregnancy. It has been found that stretch marks have a negative impact on the psychological well-being and quality of life of pregnant women. While stretch marks pose no health risks, they come with their own set of symptoms: itching, discomfort, and psychological dissatisfaction. All of these symptoms contribute to the overall quality of life of women [15]. Stretch marks, much like scars, alter the aesthetic appearance of the body. This causes psychological dissatisfaction, lack of self-confidence, stress, emotional disappointment, and even withdrawal from social life for women [6] [2] [7].

Though no fully effective method for correcting stretch marks has not yet been discovered, but research is constantly ongoing to achieve better results in striae correction [9]. For successful correction, it is necessary to properly assess and determine the cause, type of striae, and skin type affected by stretch marks [8] [12]. Numerous studies have been conducted to identify the measures and procedures that positively affect skin affected by stretch marks (see Figure 1).

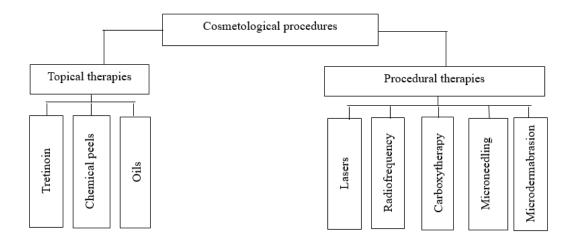


Figure 1. Cosmetological procedures

Both, topical therapies and procedural therapies can be successful in stretch mark correction. However, it's important to understand the basis of different therapeutic options, their mechanisms of action, so that the most appropriate procedure for stretch mark correction can be chosen [8]. The main goal of cosmetological procedures is to promote fibroblast activity, collagen synthesis, and skin regeneration. Therapies aim to provide lasting improvements in pigmentation and texture of both striae rubrae and albae, with minimal side-effects, in patients of all skin types. Procedures increase collagen production and fibroblastic activity, elasticity and blood perfusion, improve cell proliferation, increase skin hydration and anti-inflammatory properties in the dermis. As a result, the signs of stretch marks decrease, improving the physical appearance of the skin, which becomes thicker, firmer, and more elastic [16].

Aim – to analyse the peculiarities of striae affected skin, its care and impact on quality of life.

# Objectives:

- 1. To reveal respondents' opinion on skin affected by stretch marks, its care, and the impact on quality of life.
- 2. To Compare the results of the empirical research on the impact of stretch marks on quality of life with the data from studies conducted by foreign authors.

# **Research Methodology**

In conducting the study " Striae Affected Women Skin its Care and Impact on Quality of Life" the following research methods were employed: a review of scientific literature was conducted using abstract, analysis, and summarization theoretical methods. An anonymous questionnaire survey was conducted to explore women's knowledge about stretch marks and their correction possibilities, as well as how stretch marks affect women's quality of life. Descriptive analysis and comparative analysis of the collected data were performed, applying theoretical abstraction and summarization methods. The data were organized into tables, diagrams, described, and compared (see Figure 2).

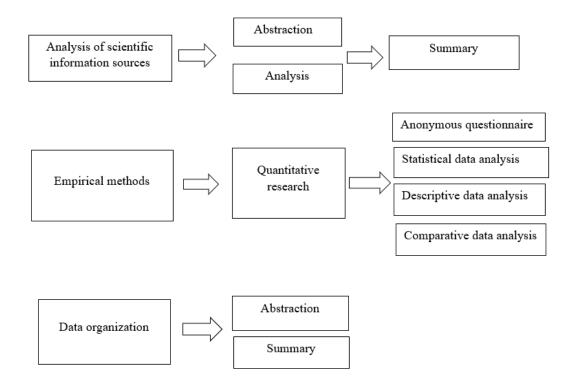


Figure 2. Research methodology

Research instrument - anonymous questionnaire. A questionnaire survey means that the survey is conducted in writing, using a questionnaire [14] [5]. The questionnaire is composed of closed and open-ended questions aimed at understanding women's attitudes towards stretch marks, the problems they pose, and correction possibilities. The questions of the research questionnaire can be divided into two main parts. The first introductory section includes questions about the social demographic characteristics of the respondents (age, place of residence, education, etc.). These questions are necessary to assess the potential influence on the distribution of responses according to certain criteria when answering the questions in the questionnaire. The main part of the questionnaire consists of 13 closed and open-ended questions, which can be divided into two blocks:

- 1. Women's knowledge about stria and their correction possibilities.
- 2. The impact of stretch marks on women's quality of life.

Data analysis methods: The study was conducted on a public survey website www.apklausa.lt. The research material was processed using the PSPP statistical data analysis program. Microsoft Excel program was used for graphical representation of the obtained data. Quantitative analysis of the research data was performed. The statistical significance level used was p < 0.05 - statistically significant. The statistical correlation between variables was examined using the method of contingency tables. Based on the table data, the value of the chi-square ( $\chi$ 2) criterion, its degrees of freedom (df), and statistical significance were calculated.

Selection criteria: The research participants were selected using non-probabilistic purposive sampling method. The group of survey participants was formed according to the researcher's objectives [3]. Purposive selection is carried out when the researcher chooses a sample, taking into account a specific objective, based on certain criteria or decisions (for example, specific competencies, experience, events) [11]. Women were chosen as research respondents.

The sample size of the study was 311 respondents. According to Židžiūnaitė (2011), it is preferable for the number of participants in quantitative empirical research to range from 6 to 120. If there are more than 120 participants in the study, then the research results are characterized by a higher degree of reliability and suitability [18].

### Analysis of research results

Socio-demographic data: 311 respondents participated in the anonymous questionnaire survey. The participants were selected through non-probabilistic purposive sampling. The age of the women participating in the survey ranged from 18 to 49 years old. The women participating in the survey were divided into age groups as follows: the first group (<20 years old) comprised 5.47%, the second age group (20-25 years old) comprised 22.83%, the third group (26-30 years old) comprised 14.15%. The fourth age group (31-35 years old) consisted of 15.43% of the women participating in the survey, the fifth group (36-40 years old) consisted of 16.72%, and the last group (>40 years old) comprised 23.15% of the women participating in the survey. Therefore, the majority of women participating in the survey were between 20 and 25 years old and older than 40 years old (see Figure 3).

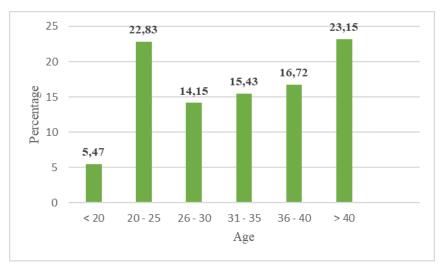


Figure 3. Distribution of respondents by age

The study did not identify statistically significant correlation between the age of respondents and the negative emotions caused by stretch marks. However, Karhade et al. (2021) found statistically significant correlation in their study, stating that younger respondents with stretch-marked skin experience more negative emotions [6].

The majority of female participants surveyed reside in urban areas (80.06%), with one-tenth residing in rural areas (9.97%) and 9.65% in small towns (see Figure 4).

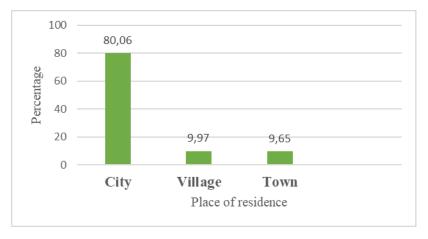


Figure 4. Place of residence of respondents

Nearly half (49.20%) of the women participating in the study have obtained higher education degree. One-third (33.76%) of the women have completed secondary education, 14.15% have some form of post-secondary education, and only 2.89% have completed basic education (see Table 1).

Education	Number of women (N)	Percentage (%)
Basic	9	2,89
Secondary	105	33,76
Post - secondary	44	14,15
Higher	153	49,20

Table 1. Education of the respondents

Respondents' knowledge about striae and their correction possibilities: Almost all (98.39%) of the women participating in the survey responded positively to the question "Do you know what stretch marks are?". Only 5 women (1.61%) were unaware of what stretch marks were and responded negatively to the question (see Figure 5).

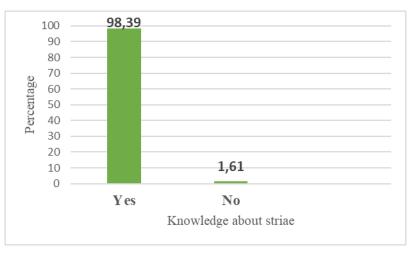


Figure 5. Respondents' knowledge about striae

According to Al-shandawely et al. (2021), approximately 90% of women have striae affected skin [1]. The results of our study confirm the fact. Even 277 (89.07%) out of 311 women participating in the study have striae affected skin. Therefore, we can conclude that the issue of stretch marks is very common and relevant among women (see Figure 6).

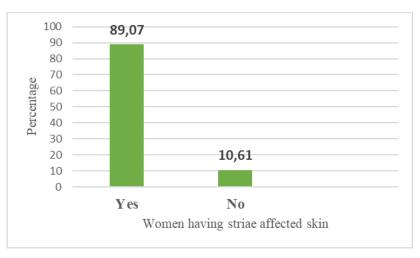


Figure 6. Respondents having striae affected skin

Respondents were asked "Which parts of your body are affected by stretch marks?" Women could choose multiple options for areas where they have stretch marks (see Table 2).

Affected Body Area	Number of women (N = 311)	Percentage (%)
Abdominal area	110	35,37
Waist area	63	20,26
On thighs	210	67,52
On the back	10	3,22
Breasts	123	39,55
Other option	25	8,04

# Table 2. Stria affected body area

Out of 311 women surveyed, 210 (67.52%) indicated they have stretch marks on their thighs. 110 women (35.37%) reported having stretch marks in the abdominal area. 123 women (39.55%) mentioned having stretch marks on their breasts. 63 women (20.26%) stated that they have stretch marks in the waist area. 10 women (3.22%) among those surveyed indicated having stretch marks on their back. Women who selected another response option most mentioned having stretch marks in the buttocks area. Additionally, one woman reported having stretch marks on her arms.

Karhade et al. (2021) conducted a study where one of the analyzed aspects and goals was to determine the most common body areas where women have skin affected by striae. In the conducted study, 116 pregnant women were surveyed. The majority of the respondents indicated that they have stretch marks on their abdominal area (75%, N = 87), 43% (N = 50) of women reported having stretch marks on their chest, 43% of women mentioned having stretch marks on their thighs, and 19% of women stated that their buttocks area was affected by stretch marks [6].

Wang et al. (2021) conducted a study where 125 respondents were surveyed. According to their findings, 56% of the respondents reported having stretch marks on their abdominal area. Additionally, 43.2% stated that they have stretch marks on their thighs, 35.2% of respondents reported having stretch marks on their buttocks, 24.8% on their chest, and 21.6% mentioned having striae on their arms [17]. The comparison of the data from three studies are presented in Table 3.

Affected Body	Our survey (%)	Karhade et al., 2021	Wang et al., 2021
Area		(%)	(%)
On thighs	67,52	43	43,2
Abdominal	35,37	75	56
area			
Breasts	39,55	43	24,8
Waist area	20,26	-	
On the back	3,22	-	
buttocks area	2,3	19	35,2
Arms	0,64	-	21,6

Table 3. Data comparis	on on striae affected body area
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Summarizing the results of the studies, it can be stated that stretch marks most commonly affect the abdominal and thigh areas. Additionally, stretch marks frequently occur on the buttocks and chest. There is a statistically significant correlation between women who report having stretch marks in the abdominal area and pregnancy ( $\chi 2 = 78.41$ ; df = 1; p = 0.00). This indicates that many women who have stretch marks in the abdominal area associate it with pregnancy.

Silva et al. (2023) state that stretch marks most commonly occur during pregnancy, can also occur due to sudden weight gain or loss and during adolescence. The data of our survey confirm those statements (see Figure 7).

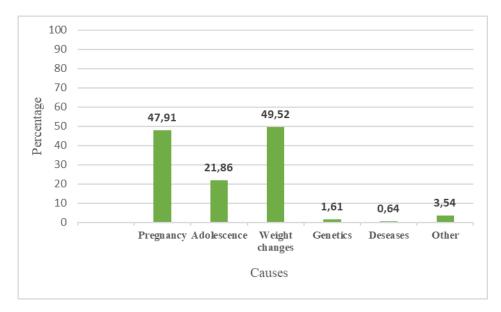


Figure 7. Causes of striae

Out of the 311 respondents in the study, 154 women (49.52%). 49.52% indicated that the appearance of their stretch marks was caused by sudden weight gain or loss. 47.91% of women (n = 149) stated that pregnancy was the cause of stretch marks. 68 women (21.86%) believed that stretch marks appeared during adolescence. Only 5 (1.61%) women indicated that their stretch marks appeared due to genetic reasons, and 2 (0.64%) women cited illnesses as the cause of stretch marks. It is statistically significant that women who encountered stretch mark problems due to sudden weight gain or loss have stretch-marked skin on their thighs ( $\chi 2 = 39.69$ ; df = 1; p = 0.00). Women who chose another option stated that they did not know the cause of stretch mark appearance.

In the study conducted by Wang et al. (2021), nearly half of the respondents (40.8%) believed that rapid weight gain was the cause of striae. Pregnancy was indicated as the cause of stretch marks by 37.6% of the respondents, while 28.8% of the participants believed that stretch marks occurred during adolescence. 23.2% of respondents stated that the cause of stretch marks was growth spurt, and 20% of those surveyed believed that stretch marks occurred due to hormonal imbalance [17] (see Table 4).

Causes of striae	Our survey (%)	Wang et al., 2021 (%)	
Rapid weight change	49,52	40,8	
Pregnancy	47,91	37,6	
Adolescence	21,86	28,8	
Growth spurt	-	23,2	
Hormonal imbalance	-	20	
Genetics	1,61	-	
Diseases	0,64	-	

Table 4. Data comparise	on on causes of striae
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Summarizing and comparing the results of the studies, we can conclude that the main causes of stretch marks are rapid weight change and pregnancy.

The study aimed to clarify women's knowledge about striae correction methods. In response to the question "Do you know what methods or ways are used for stretch mark correction?" 163 women (52.41%) answered positively. 119 women (38.26%) did not know about the methods for stretch mark correction (see Fig. 8).

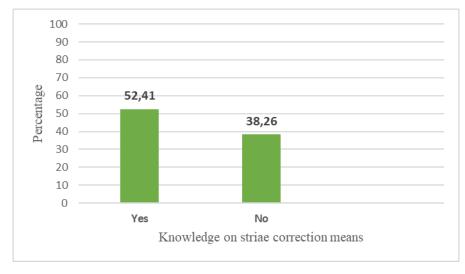


Figure 8. Women's knowledge on stria correction methods

The research results indicate that a significant number of women lack knowledge about the means and methods of striae correction, hence there is a need to encourage women to explore ways and possibilities to solve the issue of stretch marks.

Although nearly half (n = 163) of the women participating in the study claimed that they know the means and methods for stretch mark correction, only 83 women use these mentioned means or methods (see Fig. 9).

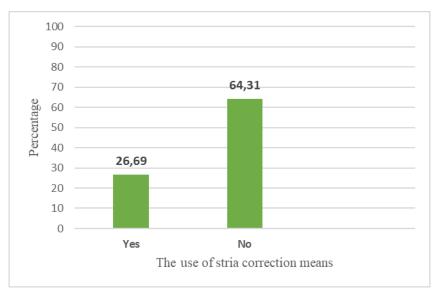


Figure 9. The usage of striae correction means among respondents

According to Mendes et al. (2022), the most used means for stretch mark correction are topical products [9]. In our study, we aimed to determine which means for striae correction are most popular among women (see Fig. 10). Respondents were asked about the means they use for stretch mark correction. Four response options were provided: creams, oils, chemical exfoliants, and hardware techniques. Women could also write their own options. Most women, 22.19% (n = 69), reported using creams for stretch mark correction. 13,18% (n = 41) of respondents stated they choose oils for stretch mark removal. 20 (6.43%) women use hardware techniques for stretch mark correction, and only 3.54% of respondents choose chemical exfoliants for striae correction. Women who chose to write their own option mentioned that they do not use any means of stretch mark correction but do sports. Two women specified a particular hardware techniques – microneedling as a means for stretch mark correction.

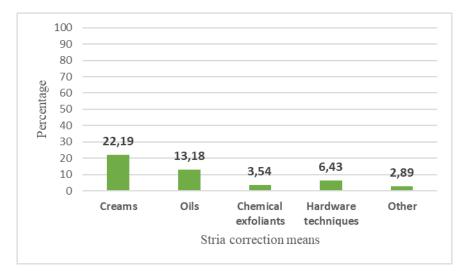


Figure 10. The choice of stria correction means among respondents

The research results indicate that the most popular means for stretch mark correction used by respondents are creams and oils. These findings align with the study conducted by Karhade et al. (2021), which shows that almost half of the women surveyed (51%) use oils and creams for stretch mark correction. We can assume that other methods of striae correction are either poorly known or entirely unknown to women. This assumption is supported by the responses to the question about the use of chemical exfoliants for stretch mark correction. Women were asked to specify which chemical exfoliants they use. Three options were provided: with glycolic acid, with salicylic acid, and with TCA (trichloroacetic acid). 2.89% of respondents chose peels with glycolic acid, 2.57% with salicylic acid, and 1.29% with TCA. Women who chose to write down their answer mentioned the previously listed means, such as oil or cream for stretch mark correction (see Fig. 11). We can conclude that women have insufficient knowledge about chemical exfoliants and their use in striae correction.

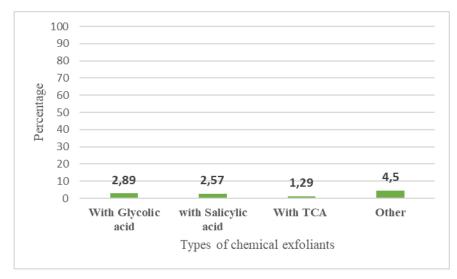


Figure 11. The use of chemical exfoliants among respondents

The impact of stretch marks on women's emotional state and quality of life. As Gaber and Elshafie (2021) claim, stretch marks deteriorate body image and are associated with beauty loss for many women. This affects women's psychological well-being and quality of life [2].

Regarding the question "Do stretch marks cause you negative emotions?" more than half (53.38%) of 311 women respondents answered affirmatively. More than one third (37.3%) of the respondents stated that stretch marks do not cause them negative emotions. 29 women (9.32%) did not respond to the question (see Fig. 12).

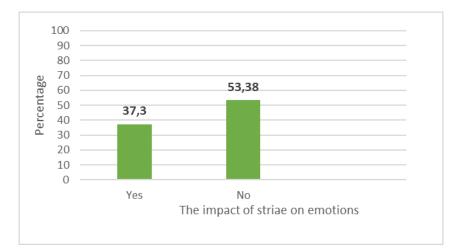


Figure 12. The impact of striae on emotional well - being of respondents

As stated by Lokhande and Mysore (2021), stretch marks are a very common cosmetic issue among women, causing psychological dissatisfaction and negative emotions [8]. This is also confirmed by our study. It revealed that more than half of the women participating in the study reported that stretch marks cause them negative emotions and feelings.

Women who experience negative emotions due to striae were asked to indicate the reason. The options provided were: "Stretch mark removal is difficult or impossible", "Stretch marks are very visible", "Stretch marks cause physical discomfort". Additionally, women could provide their own option (see Figure 13).

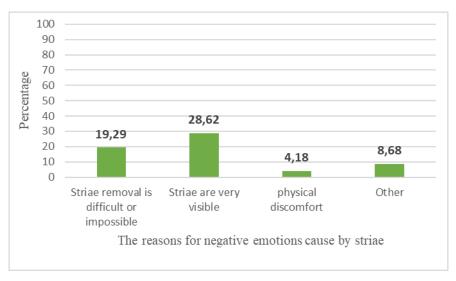


Figure 13. The reasons for negative emotions caused by stretch marks

The majority of women, 28.62% (n = 89), stated that stretch marks are highly visible, causing negative emotions. 60 women (19.29%) chose the response "Stretch mark removal is difficult or impossible." Only 4.18% of women indicated that stretch marks cause physical discomfort. Women who selected another option indicated that stretch marks cause them negative emotions because the affected skin looks aesthetically unpleasing and unattractive, causing embarrassment when undressing.

In the study conducted by Karhade et al. (2021), the reasons for negative emotions caused by stretch marks were also explored. Women were asked why stretch marks caused them concern and negative emotions. The majority of surveyed women (75%) stated that their greatest concern was the impossibility of eliminating stretch marks, as they remain for life. 37% of women indicated that stretch marks caused negative emotions because the affected skin is a different color from healthy skin, making the stretch marks highly visible. A very small percentage of women chose the option that stretch marks cause physical discomfort (itching and pain) [6]. The summarized and compared research data is presented in Table 5.

Reasons for negative emotions and concern caused by striae	Our research (%)	Karhade et al., 2021 (%)
Striae removal is difficult or impossible	19,29	75
Stria are very visible	28,62	37
Physical discomfort	4,18	3

Table 5. Data comparison on reasons for negative emotions caused by striae

Comparing the research data, we see that the respondents in our study are most concerned about the fact that stretch marks are highly visible, causing them negative emotions, while in the study conducted by Karhade et al. (2021), women participants believe that their greatest concern and negative emotions are due to the difficulty or impossibility of eliminating stretch marks.

In our study, women were asked to rate their stretch marks as highly visible, prominent, visible, prominent, and almost invisible. 29 women (9.32%) rated their stretch marks as highly visible and prominent. Slightly less than half of the respondents, 44.69% (n = 139), stated that their stretch marks to be visible and prominent, while 120 women (38.59%) believe that their stretch marks are almost invisible (see Figure 14). It is statistically significant that women who rated their stretch marks as highly prominent experience negative emotions due to stretch marks ( $\chi$ 2 = 180.69; df = 2; p = 0.00). Figure 14 illustrates women's self-assessment of stretch marks.

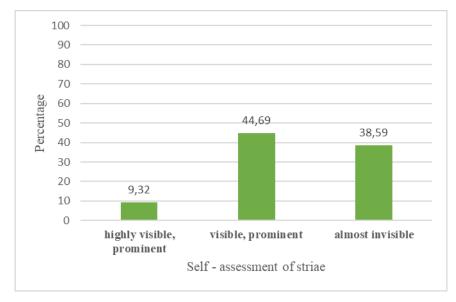


Figure 14. Respondents' self – assessment of striae

Karhade et al. (2021) also examined how women perceive the condition of their skin affected by stretch marks as one of the analyzed aspects in their study. Respondents could rate their stretch marks as "highly visible," "visible," and "almost invisible." Out of the 116 women who participated in the study, 21% of respondents rated their stretch marks as highly visible, 49% of women stated that their stretch marks are visible, and 30% indicated that their stretch marks are almost invisible [6]. We compared the results of the mentioned studies (see Table 6).

Striae self - assessment	Our survey (%)	Karhade et al., 2021 (%)
highly visible,	9,32	21
prominent		
Prominent,	44,69	49
visible		
Almost invisible	38,59	30

Having compared the research data, we can conclude that the majority of women participating in the studies perceive their stretch marks as visible and prominent.

During our survey, women were asked to evaluate how stretch marks affect their emotional state and quality of life. Five statements regarding emotional states were presented: "Lack of self-confidence", "Embarrassment about one's body", "Emotional disappointment", "Reluctance to socialize". They were asked to assess how stretch marks affect each emotional state. The rating options were: "Significantly affects", "Affects", "Does not affect" (see Table 7).

Emotional state	Significantly affects %	Affects %	Does not affect %
Lack of self- confidence	22,86	30,58	34,02
Embarrassment about one's body	21,58	34,76	29,20
Emotional disappointment	27,72	32,19	26,27
Reluctance to socialize	26,11	21,25	38,17

Table 7. The affect of striae on women emotional state and life quality

22.86% of women stated that stretch marks significantly affect their self-confidence. 30.58% (n = 94) believe that stretch marks affect their self-confidence, and 34.02% (n = 89) believe that stretch marks do not affect their self-confidence. 73 women (21.58%) with stretch marks on their skin feel very embarrassed about their bodies, 34.76% (n = 89) feel embarrassed, and 29.20% (n = 75) indicated that stretch marks do not cause them embarrassment about their bodies. 27.72% of women (n = 70) believe that stretch marks significantly contribute to their emotional disappointment, 32.19% (n = 81) believe they contribute, and 26.27% (n = 69) stated that stretch marks do not contribute to emotional disappointment. 26.11% of women (n = 68) stated that stretch marks significantly affect their reluctance to socialize. 68 women (21.25%) believe that stretch marks affect their reluctance to socialize, and 38.17% (n = 102) of respondents stated that stretch marks do not affect their reluctance to socialize. Statistically significant correlations were identified, revealing that women who rated their stretch marks as highly visible and prominent believe that stretch marks significantly affect their quality of life: lack of selfconfidence ( $\chi$ 2 = 30.36; df = 3; p = 0.00), embarrassment about their body ( $\chi$ 2 = 23.25; df = 3; p = 0.00), experiencing emotional disappointment ( $\chi 2$  = 28.39; df = 3; p = 0.00), reluctance to socialize ( $\chi 2 = 22.67$ ; df = 3; p = 0.00), avoiding daily activities ( $\chi 2 = 66.77$ ; df = 4; p = 0.00), avoiding leisure activities ( $\chi 2 = 45.13$ ; df = 4; p = 0.00), choosing to wear concealing clothes ( $\chi 2$ = 33.20; df = 4; p = 0.00), and worrying that their partner will lose interest in them ( $\chi^2$  = 46.25; df = 4; p = 0.00).

The data from the study conducted by Karhade et al. (2021) also reveal correlations between how women perceive their stretch marks and their quality of life assessment. Women who rated their stretch marks as highly prominent reported experiencing embarrassment, choosing more conservative clothing, lacking self-confidence, neglecting their social life, and encountering communication issues [6].

One of the aspects we aimed to explore in the conducted study was the impact of stretch marks on women's social life, relationships with others, and quality of life. The participants were asked to evaluate how stretch marks affect their social life and interpersonal relationships (see Table 8).

Table 8. The impact of stretch marks on	n social life and relationships with others
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Life quality aspects	Very often %	Often %	Rarely %	Never %
avoid daily activities	2,57	3,22	14,15	67,52
avoid leisure activities	3,54	4,82	16,72	62,38

choose to wear concealing clothes	28,33	30,50	11,58	21,80
worry that their partner will lose interest in them	17,40	35,79	8,01	26,27

Women were asked to assess how often they refuse everyday and leisure activities, choose to wear more covered clothing to hide stretch marks on their skin, and worry that their partner will lose interest in them. 2.57% of women (n = 8) who have stretch marks on their skin refuse everyday activities very often. 3.22% (n = 10) do it often, 14.15% (n = 44) do it rarely, and 67.52% (n = 210) never refuse daily activities. 3.54% (n = 11) of respondents very often refuse leisure activities. 4.82% of women (n = 15) often refuse leisure activities, 16.72% (n = 52) rarely do so, and 62.38% (n = 194) of women with stretch marks on their skin never avoid leisure activities. When asked how often they choose to wear more covered clothing to hide stretch marks, 18.33% of respondents (n = 78) said they do it very often, 30.50% (n = 115) often choose more covered clothing, 11.58% (n = 36) rarely do it, and 21.80% (n = 98) never do it. 17.40% of respondents said they very often worry that their partner will lose interest in them. 35.79% of women (n = 138) often worry, 8.01% (n = 28) rarely worry, and 26.27% (n = 135) of women never worry that their partner will lose interest in them because they have stretch marks. It is statistically significant that women who have stretch marks on their thighs choose more covered clothing to hide them ( $\chi 2$  = 74.57; df = 4; p = 0.00).

Gaber and Elshafie (2021) conducted a study aiming to explore the impact of stretch marks acquired during pregnancy on women's quality of life. The study involved 323 women who were asked questions about how intensely they felt certain negative emotions or how stretch marks affected their quality of life during the past week. Women were asked whether stretch marks influenced their refusal of daily activities. 4.3% of women stated that it greatly influenced, 27.6% said it influenced, 40.6% of respondents said it slightly influenced, and 27.6% claimed that stretch marks did not influence the refusal of women's daily activities. When asked if stretch marks affected women's clothing choices over the past week, 43.3% of respondents said it greatly affected, 51.7% said it affected, 0.6% of respondents indicated that it affected only slightly, and 4.3% thought it did not affect at all. Responses to the question of whether stretch marks affected the refusal of leisure activities over the past week were distributed as follows: greatly affected - 43.3%, affected - 52.3%, slightly affected - 0%, and not affected at all - 4.3%. The authors of the study wanted to ascertain how stretch marks affected women's sexual lives over the past week. 2.2% of women claimed it greatly affected, 41.8% said it affected, 51.7% of respondents stated it affected slightly, and 4.3% indicated that it did not affect at all.

Comparison of our research results with Gaber and Elshafie (2021) conducted research results is presented in table 9.

Our survey				Gaber, Elshafie (2021)					
Quality of	Very	Ofte	Rarel	Neve	Quality	Affect	Affec	Slightl	Does
Life Indicator	often %	n %	у %	r %	of Life Indicato r	greatl y %	t %	y affect %	not affec t %
Refuse daily activities	2,57	3,22	14,15	67,52	The impact of stretch marks on refusal of daily activities in the past week	4,3	27,6	40,6	27,6
Refuse leisure activities	3,54	4,82	16,72	62,38	The effect of stretch marks on refusal of leisure activities in the past week	43,3	52,3	0	4,3
Choose to wear concealin g clothes	28,4 0	30,50	11,58	21,80	The impact of stretch marks on clothing choice in the past week	43,3	51,7	0,6	4,3
worry that their partner will lose interest in them	17,4 0	35,78	8,01	26,27	The impact of stretch marks on sexual life in the past week	2,2	41,8	51,7	4,3

Table 9. The comparison of data on striae impact on life quality

Having compared the results of the studies, we see that the majority of our study participants (67.52%) never refuse daily activities due to stretch marks on their skin, while according to Gaber and Elshafie (2021), the majority of their study respondents believe that stretch marks either affect or slightly affect the refusal of daily activities. Most of our study participants stated that stretch marks do not influence the refusal of leisure activities. However, the majority of Gaber and Elshafie (2021) study participants believe that stretch marks significantly affect the refusal of leisure activities (43.3%) and that they affect it – indicated by 52.3% of respondents. Respondents from both studies mentioned that stretch marks on the skin lead to choosing more covered clothing. More than a third of our study respondents often worry that their partner will lose interest, with 17.40% even experiencing this very often. Meanwhile, the majority of participants in the Gaber and Elshafie (2021) study acknowledge that stretch marks negatively or partially affect their sexual life.

Overall, both studies indicate that stretch marks have an impact on women's daily activities, clothing choices, leisure activity refusal, and sexual life.

CONCLUSIONS:

- 1. There is a wide range of stretch mark correction procedures available in modern cosmetology, but women often lack knowledge about them. Most women opt for oils and creams for stretch mark correction.
- 2. Stretch marks do not cause physical discomfort or pose a threat to health, but they do lead to psychological dissatisfaction and negative emotions, affecting the quality of life for women. Women who perceive their stretch marks as very prominent or prominent tend to experience more negative emotions and feelings. Due to stretch marks on their skin, women feel ashamed of their bodies, choose to wear more covered clothing, and worry that their partner will lose interest in them.

# References

- Al-shandawely AA, Eldawla RE, El\_Zahraa F, El\_Deen SY, Aboeldahab S. An update in the etiopathogenesis of striae distensae: A review article. Sohag Medical Journal. 2021; 3(25):39 – 44.
- 2. Gaber MA, Elshafie AFM. The Impact of Stria Gravidarum On Quality-of-Life Issues. The Egyptian Journal of Hospital Medicine. 2021; 82 (1):31 36.
- 3. Gaižauskaitė I, Mikėnė S. SOCIALINIŲ TYRIMŲ METODAI: APKLAUSA. Vilnius: Mykolo Romerio universitetas; 2014.
- 4. Huang Q, Xu L, Wu T, Mu Y. New Progress in Therapeutic Modalities of Striae Distensae. Clinical, Cosmetic and Investigational Dermatology. 2022; 15:2101–2115.
- 5. Kardelis K. Mokslinių tyrimų metodologija ir metodai. Vilnius: Mokslo ir enciklopedijų leidybos centras; 2016
- 6. Karhade K, Lawlor M, Chubb H, Johnson TRB, Voorhees JJ, Wang f. Negative perceptions and emotional impact of striae gravidarum among pregnant women. International Journal of Women's Dermatology. 2021; 7:685 691.
- Kordi M, Fakari FR, Mazloum SR, Layegh P. Quality of Life Evaluation in Iranian Postpartum Women With and Without Striae Gravidarum. Iran J Psychiatry Behav Sci. 2016; 10 (2):1 – 5.
- 8. Lokhande AJ, Mysore V. Striae Distensae Treatment Review and Update. Indian Dermatology Online Journal. 2019; 10(4):380 395.
- 9. Mendes N, Alves PJ, Barros M, Jorge Magalhães Rodrigues JM, Machado J. A Narrative Review of Current Striae Treatments. Healthcare. 2022; 10, 2565:2 7.
- 10. Oakley A, Patel B. Stretch Marks. StatPearls. 2023.
- 11. Rupšienė L. Kokybinio tyrimo duomenų rinkimo metodologija. Klaipėda: Klaipėdos universitetas; 2007.
- Shen Y, Pang Q, Xu J. Comprehensive pathogenesis and clinical therapy in striae distensae: an overview and current perspective. Chinese Journal of Plastic and Reconstructive Surgery. 2022; 4:203 – 207.
- 13. Silva V, Schukow CP, Restini CBA. Striae distensae as a diagnostic indicator for eating disorder pathologie. International Journal of Dermatology. 2023; 62:715 722.
- 14. Tidikis R. Socialinių mokslų tyrimų metodologija. Vilnius: Lietuvos teisės universitetas; 2003.
- 15. Türkmen H, Yörük S. Risk factors of striae gravidarum and chloasma melasma and their effects on quality of life. Journal of Cosmetic Dermatology. 2023; 22:603–612.
- Ud-Din S, McGeorge D, Bayat A. Topical management of striae distensae (stretch marks): prevention and therapy of striae rubrae and albae. Journal of the European Academy of Dermatology and Venereology. 2016; 30:211 – 222.
- Wang JV, Kream EJ, Munavalli GS, Geronemus RG. Experiences and Perspectives of Patients With Striae: A Survey With Treatment Implications. Dermatology Surgery. 2021; 47/10: 1408 – 1410.
- 18. Židžiūnaitė V. Baigiamojo darbo rengimo metodologija. Klaipėda: Klaipėdos valstybinė kolegija; 2011.

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