

Recognition of sunscreens, moisturisers as essential medicines: a welcome step forward in prioritising skin health

The inclusion of sunscreens and moisturisers on the WHO's Essential Medicines List is both a symbolic victory and a practical tool to reduce inequities in skin health. This move reflect a growing global recognition that chronic skin diseases, which affect billions, deserve the same attention as other noncommunicable diseases

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Recognising sunscreens and moisturizers as essential medicines paves the way for improving quality of life, particularly for chronic and lifelong conditions, experts say. Photograph used for representational purposes only | Photo Credit: Getty Images/iStockphoto

On September 5, 2025, the World Health Organization (WHO) announced a landmark update to its Essential Medicines List (EML), adding sunscreens for individuals with **albinism** and moisturising creams containing urea and glycerin for patients with atopic dermatitis. This decision comes after the **adoption of a resolution on skin diseases** at the World Health Assembly earlier this year, and signals a profound shift, with skin health being deemed not a luxury or cosmetic concern, but a fundamental part of human well-being.

Affordability and access

Rashmi Sarkar, director- professor of dermatology, Lady Hardinge Medical College, New Delhi and regional director, International League of Dermatological Societies (ILDS), called the announcement ‘transformative’. “At present, dermatology medicines are rarely covered by insurance. For many families, especially daily wage earners, the costs are prohibitive. Recognising sunscreens and moisturisers as essential medicines paves the way for improving quality of life, particularly for chronic and lifelong conditions,” she said.

Prof. Sarkar stressed that making this recognition meaningful would require coordinated efforts at the national level. “We need strong partnerships among governments, NGOs, and the private sector, coupled with patient awareness and education. Ultimately, the skin which is the body’s

largest organ, must be treated with the same seriousness as any other organ system,” she emphasised.

Hope and grassroots momentum

Jennifer Austin, CEO of GlobalSkin, a global alliance serving patient organisations to improve the lives of dermatology patients worldwide, described these developments as historic steps forward for patients, “Access to basic skin health has been minimal, especially in low- and middle-income countries. After receiving a diagnosis, patients often cannot afford treatment, meaning they suffer not for days or months, but for a lifetime. The inclusion of sunscreens and moisturisers is an important first step, but we want to see healthcare systems expand coverage to include a wider range of essential dermatology medicines at affordable prices.”

Ms. Austin emphasised that wide-ranging recognition of skin diseases as seen in the recently-adopted WHO Resolution is just the beginning, not the end. “We are now helping to shape a global action plan with patient groups, dermatologists, and others in civil society. By the third quarter of next year, the framework will be submitted by the WHO for consideration to the WHO Executive Board. The aim of the framework will be [to] operationalise the resolution to make its commitments a reality.”

Advocacy behind the scenes

The advocacy behind this milestone has been civil society-driven in close collaboration with member states. The World Skin Health Coalition, co-founded by GlobalSkin and the ILDS, is a patient-led, multi-stakeholder network that brings together patient advocates, clinicians, researchers, and industry. With over 4.86 billion cases of skin and subcutaneous diseases reported globally, the coalition's mission is to ensure that skin health is recognised as integral to overall health and that those affected have equitable access to effective care. The coalition played a pivotal role in championing the 2025 World Health Assembly resolution recognising skin diseases as a global health priority. Together, the resolution and the new EML inclusions lay a foundation for long-term change, both in global policy and in the lived experiences of patients.

Everyday guidance

For patients and families, knowing how to use these essential medicines is just as important as having access to them. In tropical climates such as South India, lightweight, non-greasy moisturisers are often most comfortable. Urea- or glycerin-based creams can be applied twice daily, ideally after bathing, to lock in hydration. In humid weather, gels or lotions may be preferable, while thicker creams or ointments provide better relief during drier months.

When it comes to sunscreens, it's important to choose a broad-spectrum sunscreen (SPF 30 or higher, with UVA, UVB and blue light protection). In Chennai's hot and humid conditions, gel-based or matte-finish sunscreens are well tolerated, especially for oily or acne-prone skin. Apply generously, 15–20 minutes before sun exposure, and reapply every 2–3 hours when outdoors, after sweating, or after wiping the face. Daily use, even on cloudy days is critical to prevent long-term sun damage and to control conditions such as melasma or post-inflammatory pigmentation. By choosing the right formulations and using them consistently, patients can maximise the benefits of these essential medicines. Skin patient organisations, including GlobalSkin members based in India, can be great resources in educating patients on self-care.

Looking ahead

The inclusion of sunscreens and moisturizers on the WHO's EML and the adoption of the resolution are both a symbolic victory and a practical tool to reduce inequities in skin health. These moves reflect a growing global recognition that chronic skin diseases, which affect billions, deserve the same attention as other noncommunicable diseases.

The next challenge is implementation: ensuring that these essential medicines are available, affordable, and understood by the patients who need them. This will require sustained advocacy,

education, and collaboration among governments, NGOs, dermatology professionals, and critically, patient-led organisations.

As Jennifer Austin put it: “This is a hopeful start. But we must ensure the momentum is not lost. With sustained advocacy and collaboration, we can expand access, reduce suffering, and affirm health systems’ prioritisation of skin health.”

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