Probiotics in Cosmetology: Revolutionizing Skin Treatment

Venna R Surya Anusha¹; Koppala RVS Chaitanya²*; Amreen Begum¹; Vaishnavi Kasha¹; Mohammed Muzaffar Ali¹

¹Pharmaceutics Department, Gokaraju Rangaraju College of Pharmacy, Bachupally, Hyderabad, Telangana, India
²Department of pharmacology, Sarojini Naidu Vanita Pharmacy Maha Vidyalaya, Tarnaka, Secunderabad, Telangana, India

Publication Date: 2025/03/26

Abstract: Probiotics, widely recognized for their health benefits in gut microbiota regulation, are now emerging as key ingredients in cosmetic formulations aimed at treating various skin conditions. The skin microbiome plays a crucial role in maintaining skin homeostasis, and disruptions in its balance are linked to dermatological disorders such as acne, atopic dermatitis, psoriasis, and rosacea. Probiotics, through their antimicrobial, anti-inflammatory, and immunomodulatory properties, help restore skin microbiota balance, enhance skin hydration, and reduce oxidative stress, thereby improving skin health. Both topical and oral probiotics have shown promising effects, with strains such as *Lactobacillus plantarum*, *Bifidobacterium longum*, *Staphylococcus epidermidis*, and *Bacillus coagulans* being investigated for their potential dermatological benefits. Despite their growing application, the incorporation of probiotics into cosmetics faces challenges related to strain viability, formulation stability, and regulatory constraints. Regulatory bodies, including the U.S. Food and Drug Administration (FDA) and the European Medicines Agency (EMA), mandate strict compliance regarding safety assessment, stability, and labeling to ensure product efficacy and consumer protection. As scientific evidence supporting probiotic-based skincare grows, advances in formulation technology are expected to overcome existing challenges, paving the way for innovative and effective probiotic cosmetic products. This review explores the role of probiotics in dermatology, their mechanisms of action, applications in skincare, and the regulatory landscape governing their use.

Keywords: Probiotics; Skin Diseases; Lactobacillus Plantarum; Bifidobacterium Longum; Staphylococcus Epidermidis; And Bacillus Coagulans;

How to Cite: Venna R Surya Anusha; Koppala RVS Chaitanya; Amreen Begum; Vaishnavi Kasha; Mohammed Muzaffar Ali (2025) Probiotics in Cosmetology: Revolutionizing Skin Treatment. *International Journal of Innovative Science and Research Technology*, 10(3), 1043-1048. https://doi.org/10.38124/ijisrt/25mar962

I. INTRODUCTION

The global cosmetics industry has witnessed a significant shift towards biologically derived products, driven by consumer demand for natural and sustainable alternatives to synthetic formulations [1]. This trend is particularly evident in the burgeoning market for probiotic-infused cosmetics. In 2024, the global probiotic cosmetic products market was valued at approximately USD 313.3 million and is projected to grow at a compound annual growth rate (CAGR) of 12.1% from 2025 to 2030 [2,3]. This growth underscores the increasing consumer preference for products that harness the benefits of probiotics to promote skin health.

Probiotics, defined as live microorganisms that confer health benefits to the host when administered in adequate amounts, have been extensively studied for their positive effects on gut health. Recent research has expanded their application to dermatology, where they are utilized to modulate the skin microbiome, enhance barrier function, and address various skin disorders [4,5]. The integration of probiotics into cosmetic formulations offers a promising avenue for developing products that not only enhance aesthetic appeal but also contribute to overall skin health.

II. DIFFERENT SKIN AILMENTS

The skin, being the body's largest and most exposed organ, serves as a primary defense barrier against environmental insults, pathogens, and allergens. However, various intrinsic and extrinsic factors can disrupt its homeostasis, leading to dermatological disorders. These conditions can affect an individual's quality of life, selfesteem, and overall well-being. Skin diseases may arise due to genetic predispositions, immune dysregulation, infections, or environmental triggers. Some of the most common skinrelated problems include acne vulgaris, atopic dermatitis, psoriasis, rosacea, and xerosis, each with distinct pathophysiology, symptoms, and treatment approaches.

A. Acne Vulgaris

Acne vulgaris is one of the most prevalent dermatological conditions, affecting adolescents and adults alike. It is a multifactorial disorder primarily associated with excessive sebum production, follicular hyperkeratinization, Cutibacterium acnes proliferation, and inflammatory responses [6]. Hormonal fluctuations, stress, diet, and genetics are known to contribute to acne development. The condition manifests as comedones (blackheads and whiteheads), inflammatory papules, pustules, and nodules, often appearing on the face, chest, and back [7]. Severe acne can lead to permanent scarring and post-inflammatory hyperpigmentation. Treatment options include topical retinoids, benzoyl peroxide, antibiotics, hormonal therapies, and isotretinoin for severe cases [8].

B. Atopic Dermatitis (Eczema)

Atopic dermatitis (AD) is a chronic inflammatory skin disease characterized by recurrent episodes of erythema, pruritus, and xerosis. It primarily affects children but can persist into adulthood. The pathophysiology of AD involves an impaired skin barrer, immune dysregulation, and alterations in the skin microbiome, leading to increased susceptibility to infections, particularly by Staphylococcus aureus [9]. Genetic mutations, such as those in the filaggrin (FLG) gene, play a crucial role in barrier dysfunction [10]. Environmental triggers like allergens, irritants, and climate changes can exacerbate the condition. Management involves emollients, topical corticosteroids, calcineurin inhibitors, and biologics targeting interleukin (IL)-4 and IL-13 pathways in refractory cases [11].

C. Psoriasis

Psoriasis chronic autoimmune disorder is а characterized by hyperproliferation of keratinocytes, leading to erythematous plaques with silvery scales. The disease is driven by an exaggerated immune response involving T cells, particularly Th17 and Th1 pathways, which lead to the excessive release of pro-inflammatory cytokines such as tumor necrosis factor-alpha (TNF-α), IL-17, and IL-23 [12]. Genetic predisposition and environmental triggers, including infections, stress, and medications, contribute to disease exacerbation. Psoriasis can also be associated with systemic complications like psoriatic arthritis, metabolic syndrome, and cardiovascular disease [13]. Treatment strategies include topical agents (corticosteroids, vitamin D analogs), phototherapy, systemic immunosuppressants (methotrexate, cyclosporine), and biologics targeting specific immune pathways [14].

D. Rosacea

Rosacea is a chronic inflammatory skin disorder that primarily affects the central face, leading to persistent erythema, telangiectasia (visible blood vessels), papules, and pustules. The exact etiology is unclear, but it is believed to involve dysregulation of the innate immune system, abnormal vascular responses, and microbial influences, particularly Demodex mites [15]. Triggers such as sun exposure, alcohol, spicy foods, and temperature changes can worsen symptoms. Rosacea is often categorized into different subtypes, including erythematotelangiectatic, papulopustular, phymatous, and ocular rosacea. Management involves lifestyle modifications, topical and oral antibiotics (metronidazole, doxycycline), azelaic acid, and laser therapy for vascular lesions [16].

https://doi.org/10.38124/ijisrt/25mar962

E. Dry Skin (Xerosis)

Xerosis, commonly referred to as dry skin, is a condition characterized by inadequate moisture retention, leading to roughness, flaking, and pruritus. It is frequently associated with aging, environmental factors (cold weather, low humidity), and underlying medical conditions such as hypothyroidism and diabetes mellitus [17]. Xerosis disrupts the lipid matrix of the stratum corneum, impairing the skin's natural barrier function. In severe cases, cracks and fissures can develop, increasing the risk of infections. Management focuses on restoring hydration through the use of emollients, humectants (glycerin, hyaluronic acid), and barrier repair formulations containing ceramides and fatty acids [18].

Many of these conditions have profound psychological and social implications, impacting self-confidence and overall quality of life. A combination of lifestyle modifications, and novel therapies continues to improve outcomes for individuals affected by these conditions.

III. PROBIOTICS TO TREAT SKIN RELATED PROBLEMS

The human skin is a complex ecosystem inhabited by a diverse array of microorganisms, collectively known as the skin microbiome. This microbiome plays a pivotal role in maintaining skin health by protecting against pathogens, modulating immune responses, and preserving the skin's barrier function. Disruptions in this delicate balance, often referred to as dysbiosis, have been implicated in various dermatological conditions, including acne, atopic dermatitis, and psoriasis. Probiotics—live microorganisms that confer health benefits to the host—have emerged as a promising avenue for restoring microbial equilibrium and alleviating skin disorders. The efficacy of probiotics in dermatology is highly strain-specific, necessitating careful selection to address particular skin conditions effectively [19, 20].

A. Lactobacillus plantarum

Lactobacillus plantarum is a probiotic strain renowned for its anti-inflammatory and antimicrobial properties. Topical application of *L. plantarum* has been investigated for its potential in managing acne vulgaris, a condition characterized by inflammation and overgrowth of Cutibacterium acnes. Studies have demonstrated that *L. plantarum* can modulate the skin's immune response, leading to a reduction in acne lesion size and overall severity. Additionally, *L. plantarum* has been shown to enhance skin barrier function and hydration, contributing to improved skin health [21].

B. Staphylococcus epidermidis

Staphylococcus epidermidis is a commensal bacterium that constitutes a significant part of the skin's natural flora. It plays a crucial role in inhibiting the colonization of pathogenic bacteria through the production of antimicrobial substances, such as succinic acid. This metabolite has been found to suppress the growth of Cutibacterium acnes, thereby potentially reducing the severity of acne. Furthermore, S.

ISSN No:-2456-2165

epidermidis contributes to the maintenance of skin homeostasis and has been implicated in wound healing processes [22].

C. Lactobacillus rhamnosus GG

Lactobacillus rhamnosus *GG* is a well-studied probiotic strain primarily recognized for its gastrointestinal benefits. However, its influence extends to dermatological health, particularly in the context of atopic dermatitis (AD). Oral supplementation with *L. rhamnosus* GG has been associated with improvements in AD symptoms, which is believed to result from its ability to modulate systemic immune responses. The strain may enhance the production of antiinflammatory cytokines and strengthen the skin barrier, thereby reducing the incidence and severity of eczema flareups [23,24].

D. Bifidobacterium longum

Bifidobacterium longum is another probiotic strain that has garnered attention for its dermatological applications. Topical formulations containing *B. longum* have been shown to improve skin hydration and reduce sensitivity, making them beneficial for individuals with dry or sensitive skin types. The mechanisms underlying these effects include the enhancement of the skin's barrier function and modulation of local immune responses, leading to decreased inflammation and irritation [25].

E. Bacillus coagulans

Bacillus coagulans is a spore-forming probiotic that has been explored for its potential benefits in skin health. Its resilience allows it to survive harsh environmental conditions, making it a viable candidate for both oral and topical applications. Research suggests that *B. coagulans* may exert anti-inflammatory effects and promote wound healing, which could be advantageous in managing conditions such as acne and eczema. However, more studies are needed to fully elucidate its mechanisms of action and efficacy in dermatological contexts [26,27].

The selection of specific probiotic strains is critical, as their effects are highly strain-dependent. Ongoing research continues to uncover the complex interactions between probiotics and the skin microbiome, paving the way for targeted interventions that harness these beneficial microorganisms to promote skin health.

IV. ORAL INGESTION OF PROBIOTICS FOR SKIN DISEASES

While topical probiotic applications provide direct interaction with the skin microbiome, oral ingestion of probiotics offers a systemic approach to improving skin health through the gut-skin axis. This concept is based on the interconnection between the gut microbiota and skin homeostasis, where the composition of gut bacteria influences immune function, inflammatory responses, and overall skin conditions. A well-balanced gut microbiota contributes to reduced systemic inflammation, improved nutrient absorption, and enhanced skin barrier function.

A. Enhancing Skin Hydration and Barrier Function

The skin's ability to retain moisture is crucial for preventing xerosis (dry skin) and conditions such as atopic dermatitis. Oral probiotics have been shown to influence transepidermal water loss (TEWL), which is a critical parameter in skin hydration. Studies indicate that strains such as *Lactobacillus paracasei NCC2461* enhance ceramide production, leading to improved hydration and reduced skin sensitivity. Similarly, *Bifidobacterium* breve supplementation has demonstrated efficacy in increasing skin hydration and elasticity by modulating the composition of fatty acids in the epidermis [28-30].

https://doi.org/10.38124/ijisrt/25mar962

B. Reducing Systemic Inflammation and Oxidative Stress

Inflammatory skin conditions such as acne, psoriasis, and atopic dermatitis are often exacerbated by systemic inflammation. The intake of probiotics can help in regulating inflammatory pathways by modulating proinflammatory cytokines such as tumor necrosis factor-alpha (TNF- α) and interleukins (IL-6, IL-17). For instance, Lactobacillus rhamnosus GG has been shown to reduce inflammation in atopic dermatitis by promoting the production of anti-inflammatory cytokines, such as IL-10, and balancing the Th1/Th2 immune response [28-30].

C. Regulating the Immune System via the Gut-Skin Axis

The immune system plays a central role in various skin disorders. An imbalance in gut microbiota can lead to systemic immune dysregulation, which reflects on the skin. Probiotics contribute to immune modulation by enhancing regulatory T cells (Tregs) and suppressing overactive immune responses. *Bacillus coagulans* is one such probiotic that has been found to promote anti-inflammatory effects by increasing levels of beneficial short-chain fatty acids (SCFAs), such as butyrate, which have systemic benefits for immune regulation [28-30].

D. Reduction of Acne Severity Through Gut Microbiota Regulation

Acne vulgaris has been linked to an imbalance in gut microbiota and increased intestinal permeability. Studies suggest that oral supplementation with *Lactobacillus plantarum* and *Lactobacillus rhamnosus* helps in reducing the severity of acne lesions by controlling sebum production and inflammation. Additionally, probiotics can prevent overgrowth of Cutibacterium acnes, the primary bacterium responsible for acne, by altering the skin's pH and reducing oxidative stress [28-30].

E. Protection Against UV-Induced Skin Damage

Ultraviolet (UV) radiation accelerates skin aging by inducing oxidative stress and inflammation. Some probiotic strains, such as Lactobacillus johnsonii NCC 533, have demonstrated protective effects against UV-induced photodamage, reducing erythema (skin redness) and improving recovery rates from sunburn. Probiotics may exert these protective effects by enhancing the skin's natural antioxidant defenses and improving DNA repair mechanisms [28-30].

F. Improvement in Psoriasis and Rosacea

Psoriasis is an autoimmune-mediated skin condition characterized by excessive keratinocyte proliferation and chronic inflammation. Oral *Bifidobacterium infantis 35624* supplementation has been shown to reduce systemic inflammation markers, such as C-reactive protein (CRP) and TNF- α , which play a role in psoriasis exacerbation. Similarly, rosacea, a chronic inflammatory skin disorder, has been associated with small intestinal bacterial overgrowth (SIBO), and probiotic intervention with *Lactobacillus casei* has demonstrated improvements in rosacea symptoms by restoring gut microbiota balance [28-30].

G. Factors Influencing the Efficacy of Oral Probiotics

While oral probiotics have demonstrated promising benefits for skin health, several factors influence their efficacy:

Strain-Specific Effects: Different probiotic strains exert distinct effects, making it essential to choose the appropriate strain for each skin condition. Dosage and Duration: The effectiveness of probiotics is dose-dependent, with clinical studies suggesting doses ranging from 108 to 1011 CFU/day for therapeutic effects. Host Microbiome Variability: Individual differences in gut microbiota composition can influence probiotic efficacy, highlighting the need for personalized approaches. Combination with Prebiotics: Co-administration of prebiotics (such as inulin and fructo oligosaccharides) can enhance probiotic survival and colonization in the gut, further optimizing their effects on skin health. Oral probiotics represent a promising avenue for managing skin disorders by leveraging the gut-skin axis. Their ability to modulate inflammation, enhance skin hydration, regulate immune responses, and reduce oxidative stress makes them valuable therapeutic agents for conditions such as acne, atopic dermatitis, psoriasis, rosacea, and UV-induced skin damage. However, the effectiveness of oral probiotics is strain-specific and influenced by dosage and host microbiome variability. Future research should focus on personalized probiotic formulations and long-term clinical trials to establish their role as a standardized therapeutic approach in dermatology [28-31].

V. REGULATORY CONSTRAINS

The integration of probiotics into cosmetic products necessitates adherence to stringent regulatory frameworks to ensure consumer safety and product efficacy.

A. Safety Assessment

Probiotic strains used in cosmetics must be nonpathogenic and free from contaminants. The U.S. Food and Drug Administration (FDA) emphasizes that cosmetic products can become harmful if contaminated with pathogenic microorganisms. Therefore, manufacturers are responsible for ensuring their products are free from harmful microbes [32].

B. Stability

Ensuring the viability of probiotics throughout a product's shelf life is crucial. Factors such as formulation composition, packaging, and storage conditions play significant roles in maintaining probiotic stability. The FDA has raised concerns regarding the efficacy, safety, and quality of probiotic-containing cosmetics, particularly questioning whether probiotics remain viable in the presence of preservatives and how they affect product quality and safety [33].

https://doi.org/10.38124/ijisrt/25mar962

C. Labeling

Accurate labeling is essential to inform consumers about the presence and benefits of probiotics in cosmetic products. Currently, there are no specific international guidelines on definitions or terminologies applicable to microbiome claims in cosmetics. The FDA has expressed concerns related to the efficacy, safety, and quality of these products, highlighting the need for clear and accurate labeling to ensure consumer awareness and product transparency [34].

D. Compliance with Regional Regulations

Compliance with regional regulations is mandatory. In the United States, the FDA regulates cosmetic products under the Federal Food, Drug, and Cosmetic Act (FD&C Act). While the FDA does not pre-approve cosmetic products or ingredients, it monitors safety through enforcement mechanisms. In Europe, the European Medicines Agency (EMA) oversees the regulation of cosmetics, requiring that products meet safety standards before they can be marketed. Manufacturers must ensure that their products comply with these regional regulations to guarantee consumer safety and product efficacy. Hence, the integration of probiotics into cosmetics requires careful consideration of safety assessments, stability, labeling, and adherence to regional regulatory frameworks to ensure that products are safe, effective, and transparent for consumers [35].

VI. CONCLUSION

The application of probiotics in cosmetic formulations represents a revolutionary approach to addressing various skin conditions by leveraging the skin-gut microbiome axis. Probiotics have demonstrated remarkable potential in alleviating acne, eczema, psoriasis, and other inflammatory skin disorders by modulating microbial diversity, enhancing immune responses, and strengthening the skin barrier. Both topical and oral probiotic formulations offer distinct advantages, with topical applications targeting localized concerns and oral probiotics exerting systemic effects. However, challenges such as strain viability, formulation and regulatory compliance remain stability, key considerations for the successful development of probiotic cosmetics. Regulatory bodies such as the FDA and EMA impose stringent guidelines to ensure safety, stability, and efficacy, necessitating innovative approaches in formulation science to maintain probiotic potency in cosmetic products. Advancements in encapsulation technologies, fermentation processes, and microbiome research are expected to refine probiotic-based skincare solutions, improving their effectiveness and market viability. As consumer awareness of microbiome-friendly skincare grows, the demand for scientifically validated probiotic formulations will continue to rise. Future research should focus on clinical validation of probiotic strains, optimizing delivery systems, and harmonizing global regulatory standards to ensure consistent and safe use. With continued scientific progress, probiotics ISSN No:-2456-2165

are poised to become a cornerstone in next-generation dermatological and cosmetic treatments.

ACKNOWLEDGMENT

None to Acknowledge

REFERENCES

- [1] Liu JK. Natural products in cosmetics. Natural products and bioprospecting. 2022 Dec;12(1):40.
- [2] Grand View Research. Probiotic cosmetic products market size, share & trends analysis report by product, by distribution channel, by region, and segment forecasts, 2025 - 2030.
- [3] Available from: https://www.grandviewresearch.com/industryanalysis/probiotic-cosmetic-products-market Date of accesion: 21st Jan 2025.
- [4] Desam NR, Al-Rajab AJ. The importance of natural products in cosmetics. Bioactive natural products for pharmaceutical applications. 2021:643-85.
- [5] Yu Y, Dunaway S, Champer J, Kim J, Alikhan A. Changing our microbiome: probiotics in dermatology. British Journal of Dermatology. 2020 Jan 1;182(1):39-46.
- [6] Bindurani S. Probiotics in dermatology. Journal of Skin and Sexually Transmitted Diseases. 2019 Dec 2;1(2):66-71.
- [7] Zaenglein AL, Pathy AL, Schlosser BJ, Alikhan A, Baldwin HE, Berson DS, Bowe WP, Graber EM, Harper JC, Kang S, Keri JE. Guidelines of care for the management of acne vulgaris. Journal of the American academy of dermatology. 2016 May 1;74(5):945-73.
- [8] Di Landro A, Cazzaniga S, Cusano F, Bonci A, Carla C, Musumeci ML, Patrizi A, Bettoli V, Pezzarossa E, Caproni M, Fortina AB. Adult female acne and associated risk factors: Results of a multicenter casecontrol study in Italy. Journal of the American Academy of Dermatology. 2016 Dec 1;75(6):1134-41.
- [9] Thiboutot D. Pathogenesis and treatment of acne. J Eur Acad Dermatol Venerol. 2001;15:91.
- [10] Ng YT, Chew FT. A systematic review and metaanalysis of risk factors associated with atopic dermatitis in Asia. World Allergy Organization Journal. 2020 Nov 1;13(11):100477.
- [11] Drislane C, Irvine AD. The role of filaggrin in atopic dermatitis and allergic disease. Annals of Allergy, Asthma & Immunology. 2020 Jan 1;124(1):36-43.
- [12] Sidbury R, Alikhan A, Bercovitch L, Cohen DE, Darr JM, Drucker AM, Eichenfield LF, Frazer-Green L, Paller AS, Schwarzenberger K, Silverberg JI. Guidelines of care for the management of atopic dermatitis in adults with topical therapies. Journal of the American Academy of Dermatology. 2023 Jul 1;89(1):e1-20.
- [13] Vičić M, Kaštelan M, Brajac I, Sotošek V, Massari LP. Current concepts of psoriasis immunopathogenesis. International Journal of Molecular Sciences. 2021 Oct 26;22(21):11574.

- [14] Takeshita J, Grewal S, Langan SM, Mehta NN, Ogdie A, Van Voorhees AS, Gelfand JM. Psoriasis and comorbid diseases: epidemiology. Journal of the American Academy of Dermatology. 2017 Mar 1;76(3):377-90.
- [15] Erichsen CY, Jensen P, Kofoed K. Biologic therapies targeting the interleukin (IL)-23/IL-17 immune axis for the treatment of moderate-to-severe plaque psoriasis: a systematic review and meta-analysis. Journal of the European Academy of Dermatology and Venereology. 2020 Jan;34(1):30-8.
- [16] Steinhoff M, Schauber J, Leyden JJ. New insights into rosacea pathophysiology: a review of recent findings. Journal of the American Academy of Dermatology. 2013 Dec 1;69(6):S15-26.
- [17] Hu XM, Li ZX, Zhang DY, Yang YC, Zheng SY, Zhang Q, Wan XX, Li J, Yang RH, Xiong K. Current research and clinical trends in rosacea pathogenesis. Heliyon. 2022 Oct 1;8(10)..
- [18] Barco D, Giménez-Arnau A. Xerosis: a dysfunction of the epidermal barrier. Actas Dermo-Sifiliográficas (English Edition). 2008 Jan 1;99(9):671-82.
- [19] Loden M. The clinical benefit of moisturizers. Journal of the European Academy of Dermatology and Venereology. 2005 Nov;19(6):672-88.
- [20] Gao T, Wang X, Li Y, Ren F. The role of probiotics in skin health and related gut–skin axis: A review. Nutrients. 2023 Jul 13;15(14):3123.
- [21] Knackstedt R, Knackstedt T, Gatherwright J. The Role of Topical Probiotics in Skin Conditions: A Systematic Review of Animal and Human Studies and Implications for Future Therapies. Exp Dermatol. 2020;29(1):15-21.
- [22] Cha H, Kim SK, Kook M, Yi TH. Lactobacillus paraplantarum THG-G10 as a potential anti-acne agent with anti-bacterial and anti-inflammatory activities. Anaerobe. 2020 Aug 1;64:102243.
- [23] Maguire M, Maguire G. The role of microbiota, and probiotics and prebiotics in skin health. Archives of Dermatological Research. 2017 Aug;309(6):411-21.Sivamaruthi BS, Kesika P, Chaiyasut C. A Review of the Role of Probiotic Supplementation in Dermatological Diseases. Biomed Pharmacother. 2019;110:537-547.
- [24] Carucci L, Nocerino R, Paparo L, De Filippis F, Coppola S, Giglio V, Cozzolino T, Valentino V, Sequino G, Bedogni G, Russo R. Therapeutic effects elicited by the probiotic Lacticaseibacillus rhamnosus GG in children with atopic dermatitis. The results of the ProPAD trial. Pediatric Allergy and Immunology. 2022 Aug;33(8):e13836.
- [25] Guéniche A, Bastien P, Ovigne JM, et al. Bifidobacterium longum Lysate, a New Ingredient for Reactive Skin. Exp Dermatol. 2010;19(8):e1-e8.
- [26] Majeed M, Nagabhushanam K, Arumugam S, et al. Bacillus coagulans MTCC 5856 Supplementation in the Management of Major Depressive Disorder: A Randomized, Double-Blind, Placebo-Controlled Pilot Study. J Probiotics Health. 2018;6(1):1-5.

ISSN No:-2456-2165

- [27] Majeed M, Nagabhushanam K, Paulose S, Rajalakshmi HR, Mundkur L. A Randomized Double-Blind, Placebo-Controlled Study to Evaluate the Anti-Skin-Aging Effect of LactoSporin–The Extracellular Metabolite from Bacillus coagulans (Weizmannia coagulans) MTCC 5856 in Healthy Female Volunteers. Clinical, Cosmetic and Investigational Dermatology. 2023 Dec 31:769-82.
- [28] De Almeida CV, Antiga E, Lulli M. Oral and topical probiotics and postbiotics in skincare and dermatological therapy: A concise review. Microorganisms. 2023 May 27;11(6):1420.
- [29] Knackstedt R, Knackstedt T, Gatherwright J. The role of topical probiotics in skin conditions: A systematic review of animal and human studies and implications for future therapies. Experimental dermatology. 2020 Jan;29(1):15-21.
- [30] Sodré CS, Vieira MS, Estefan JL, Moraes C, Cavalcante FS, Dos Santos KR, de Carvalho Ferreira D. The effect of probiotics on the clinical status of adult patients with atopic dermatitis: a systematic review. European Journal of Medical Research. 2022 Jun 15;27(1):94.
- [31] Deng K, Fan X, Yuan Z, Li D. Probiotic effects on skin health: comprehensive visual analysis and perspectives. Frontiers in Microbiology. 2024 Dec 3;15:1453755.
- [32] U.S. Food and Drug Administration. Microbiological Safety and Cosmetics. Available from: https://www.fda.gov/cosmetics/potential-contaminantscosmetics/microbiological-safety-and-cosmetics Date of accesion: 21st Jan 2025.
- [33] Jäger R, Mohr AE, Carpenter KC, et al. International Society of Sports Nutrition Position Stand: Probiotics. J Int Soc Sports Nutr. 2019;16(1):62.
- [34] U.S. Food and Drug Administration. Microbiological Safety and Cosmetics. Available from: https://www.fda.gov/cosmetics/potential-contaminantscosmetics/microbiological-safety-and-cosmetics Date of accession: 21st Jan 2025.
- [35] International Probiotics Association. Regulation of Probiotics in the USA: Cosmetics. Available from: https://internationalprobiotics.org/home/regulationprobiotics-usa-cosmetics/ Date of accession: 21st Jan 2025.