



HOW-TO GUIDE • SCALP

How to clear flakes without overwashing your scalp

For anyone brushing white or yellowish scales off dark tops and wondering which bottle to reach for. After reading, you will be able to match symptoms to the right active, wash on a rhythm that holds, and know when to book care.



Know flakes

Greasy yellow, dry white, or thick silver points to different care.



Time actives

Leave medicated lather on minutes, not seconds, then rinse well.



Stay steady

Give a new shampoo two to four weeks before you judge it.

By Ellen Sloane · Updated Aug 23, 2026 · 9 min read

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You shake a dark sweater by the bathroom sink and the same pale dust falls again. The scalp itches by midday, the hairline feels oily or tight, and every shampoo promises calm but the flakes return. Once the cause is clear dandruff, dry scalp or psoriasis, the choice of active, contact time and wash rhythm starts to make sense.

01

Tell flakes apart before you treat

Start with what the mirror and the fingertips tell. Dandruff linked to seborrheic dermatitis tends to cause greasy, yellowish scaling and does not typically cause thick scaling like scalp psoriasis. The itch often sits where oil collects along the part, crown and behind the ears, and the scalp may look pink or oily between washes.

Dry scalp behaves differently. Dry skin can lead to small flakes on the scalp and people will probably have dry skin all over the body. Here the flakes are smaller, whiter and drier, shins or hands may feel tight after a shower, and harsh washing leaves the scalp pulled rather than soothed.

Scalp psoriasis has its own pattern. Check around the hairline, forehead, neck or ears for scalp psoriasis, which can appear as fine scaling like dandruff in mild cases or as thick, red inflamed plaques with silvery white scales that may extend beyond the hairline. Psoriasis is chronic with flare ups and remission, is more scaly than flaky, may spread past the hairline, and is an autoimmune disease. "The scalp is a very sensitive area with many nerve endings, so inflammation and itch can be particularly bothersome," said Dr. Rebecca Gaffney, board-certified dermatologist.

Malassezia yeast lives on every scalp and overgrowth linked to excess oil, stress or genetics can trigger irritation and flakes. That detail matters because both under washing and over washing can feed the cycle. Washing too frequently with a harsh formula can strip oil and trigger more sebum that Malassezia feeds on, while skipping washes allows oil, dead cells and residue to build up.

Use this first week to observe. Note colour and texture of scale, where redness sits, whether flakes stay inside the hairline, and whether skin elsewhere is dry or oily. Photos in the same light every three days help more than memory when a pattern shifts.

02

Pick an active that matches the scalp

For mild to moderate dandruff, zinc pyrithione is commonly used for mild to moderate dandruff and for regular dandruff control. A 48 week randomized controlled study found a 1 percent zinc pyrithione shampoo maintained significant efficacy versus placebo with no evidence of diminished response. Itch relief may begin within the first 1 to 2 washes and visible flake reduction may follow within 1 to 2 weeks of consistent use with 1 percent zinc pyrithione. "The best dandruff shampoo is one that people will use consistently over time," said Dr. KC Locker, Head & Shoulders Senior Scientist.

When flakes keep returning or feel tied to yeast, ketoconazole is often chosen for persistent or recurring dandruff linked to *Malassezia* yeast and for seborrhoeic dermatitis. For dandruff, NHS guidance says use ketoconazole shampoo twice a week for 2 to 4 weeks then once every 1 to 2 weeks to stop it coming back. For seborrhoeic dermatitis, NHS guidance says use ketoconazole shampoo twice a week for 2 to 4 weeks until symptoms clear then once every 1 to 2 weeks.

Selenium sulfide may be more suitable for oily scalps with thicker, stubborn flakes and it slows cellular turnover while targeting scalp yeast. A 350 participant randomized double blind study found a tested 1 percent selenium sulfide shampoo reduced adherent scalp flaking more than a tested 2 percent ketoconazole shampoo after 4 and 6 weeks. That result supports control of stuck flakes, while zinc pyrithione has longer maintenance data, so choice depends on whether the goal is lift off or steady control.

Thick scale needs softening before antifungals can reach skin. Salicylic acid, lactic acid and urea act as scale softeners that help remove thick scaling and improve absorption of other treatments but overuse can worsen irritation. Coal tar can slow rapid skin cell growth and reduce redness and scaling and is found in shampoos, gels and scalp oils. Use one scale softener at a time, spaced from strong antifungals on alternate washes if stinging appears.

Topical corticosteroids such as betamethasone, clobetasol and fluocinolone are considered first line for scalp psoriasis but long term use can cause skin thinning and other effects. Those belong to prescription care for psoriasis, not to routine dandruff washing. "Therapies that address multiple dimensions of scalp health and irritation may provide advantages over reliance on antifungal potency alone," said Dr. Divya Shokeen, board-certified dermatologist and hair transplant surgeon.

SCALP PATTERN	LIKELY CAUSE	FIRST ACTIVE TO TRY
Greasy yellowish flakes, oily itch	Dandruff or seborrheic dermatitis	Ketoconazole or zinc pyrithione
Small white flakes, dry skin elsewhere	Dry scalp	Gentle zinc pyrithione plus hydrating rotation
Oily scalp, thick stuck flakes	Stubborn seborrheic scaling	Selenium sulfide, then salicylic acid to soften
Silvery powder or thick red plaques past hairline	Possible psoriasis	Scale softener for comfort, then clinician care

FROM THE EDITORS

Zinc pyrithione supports regular control, ketoconazole supports persistent yeast linked flakes, and selenium sulfide supports oily scalps with thicker flakes. Salicylic acid softens scale but does not treat yeast on its own. Evidence for oils and personalised blends beyond these actives is lacking.

03

Wash the right way without overwashing

Technique decides how much work an active can do. Wet hair fully with lukewarm water, then pour a coin sized amount into palms before spreading. Lather into scalp with fingertips, not nails, working in four sections from front to crown to sides to nape. Leave the lather where flakes live rather than piling foam on lengths.

Contact time counts. Cleveland Clinic guidance says to massage ketoconazole shampoo into a lather and leave in place for 5 minutes before rinsing thoroughly. NHS guidance says to leave ketoconazole shampoo on for 3 to 5 minutes then wash off with water. WebMD guidance says to leave dandruff shampoo in for 5 to 10 minutes per bottle instructions then rinse, and to rotate dandruff shampoo with a regular moisturizing shampoo. Set a timer, detangle ends or shave while waiting, then rinse until water runs clear before conditioning mid lengths and ends only.

Find a rhythm that cleans and calms

3 to 4 washes per week with dandruff shampoo is a sweet spot, with daily or every other day for 1 to 2 weeks during an active flare then taper. Wash 3 to 4 times per week for regular care and use ketoconazole twice weekly for 2 to 4 weeks when that is the diagnosis, since

frequency depends on product and diagnosis. Read the label for the formula in hand and stay with the lower medicated frequency when the scalp feels stripped.

Rotate rather than stack. Alternate a medicated wash with a mild moisturizing shampoo to keep the barrier comfortable, especially for curls, coils, bleached lengths or a beard that touches the hairline. Noticeable improvement with a medicated shampoo usually takes 2 to 4 weeks of consistent use. Rinse after sweaty workouts, pat dry instead of rubbing, and clean brushes and pillowcases weekly so oil and scale do not resettle.

04

Run a four week flake plan

Week one sets the baseline. Choose one active based on the pattern above, take a photo, and wash 2 to 3 times with the medicated shampoo or 3 to 4 times if oil builds fast. Keep contact time full on each medicated wash and use lukewarm water throughout. Note itch at night and flakes on clothing rather than judging after one wash.

Weeks two and three build control. Continue the same active without adding oils, scrubs or a second medicated shampoo. During an active flare some routines use daily or every other day washing for 1 to 2 weeks then taper, while ketoconazole routines often stay at twice weekly for 2 to 4 weeks. Either path allows 2 to 4 weeks before judging, which matches trial timelines for flake reduction. If itching eases but scale stays stuck, add a salicylic acid wash once weekly on a non antifungal day instead of increasing strength everywhere.

Week four moves to maintenance. Once symptoms clear, taper ketoconazole style care to once every 1 to 2 weeks to stop flakes coming back, or keep zinc pyrithione in regular rotation for dandruff control. Keep the hydrating shampoo for the in between washes and keep conditioner off the scalp. Take a second photo in the same light and compare edges of the part, not just shoulders.

If nothing shifts after four steady weeks, pause and reassess rather than cycling through five bottles. Thick plaques, spreading redness or cracking need a different plan, covered below. Consistency matters more than potency for most dandruff, which is why a tolerable formula used on schedule often beats a stronger one used twice.

05

Oils, personalised bottles, food and stress

Scalp oils feel soothing in the moment but evidence does not show that scalp oils improve flakes beyond standard actives. Use oil only as a short pre wash softener for thick scale, not as a leave on treatment for dandruff. Massage in a thin layer an hour before washing or overnight

once weekly at most, then shampoo out fully with the timed lather. Home oils and baking soda pastes can calm symptoms at the sink, but check with a doctor and keep amounts light since too much can worsen irritation. Stop any oil that increases itch, odour or yellowish buildup.

Personalised shampoos promise a match to a quiz or a photo, yet there are no trials showing they beat ketoconazole, zinc pyrithione or selenium sulfide. Whether personalised shampoos improve flakes beyond standard actives remains unproven. They may help if the base is gentle and used regularly, but they cannot promise to treat psoriasis or seborrheic dermatitis. Keep one proven active in rotation even when trying a custom cleanser.

Daily habits carry quiet weight. Gentle brushing lifts loose scale, lukewarm water protects the barrier, and fingertip massage supports even spread of shampoo. Which diet changes reliably improve seborrheic dermatitis is unproven, as evidence is observational and self reported. In a case control study of 267 participants including 59 seborrheic dermatitis patients, 49.2 percent reported no flare ups with any kind of food. In the same study, commonly reported exacerbating foods were spicy food at 16.9 percent, sweets at 16.9 percent, fried food at 13.5 percent, dairy at 11.9 percent and citrus fruits at 10.2 percent.

Stress fits the same pattern. Sources name stress as a factor without dosing or outcome data, so how stress management affects flake severity is not established. Sleep, regular washing after sweat, and a steady routine support scalp comfort while stronger claims wait for data. Diet and stress care remain adjunctive, not curative, alongside antifungal and scale softening care.

06

The checklist

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- ☐ Photograph part and hairline in same light on day one
 - ☐ Match flakes to likely cause by colour, thickness and spread
 - ☐ Choose one proven active for four weeks
 - ☐ Time medicated lather for label minutes with a timer
 - ☐ Rinse fully then condition lengths and ends only
 - ☐ Rotate medicated wash with mild moisturizing shampoo
 - ☐ Wash 2 to 4 times weekly, taper once clear
 - ☐ Use salicylic acid once weekly only if scale is thick
 - ☐ Limit oil to short pre wash softening, then wash out
 - ☐ Track itch and flakes weekly, not daily
 - ☐ Wash brushes, caps and pillowcases weekly
 - ☐ Book care if no change after four weeks
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07

Sources and further reading

- Ketoconazole Shampoo (Nizoral): How to Use · my.clevelandclinic.org
- Association Between Diet and Seborrheic Dermatitis: A Case-Control Study · pmc.ncbi.nlm.nih.gov
- Scalp Psoriasis vs. Dandruff: How to Tell the Difference · webmd.com
- Scientific Review Finds Ingredients in Head & Shoulders Shampoos – 1% Selenium Sulfide and 1% Zinc Pyrithione – As the Strongest Evidence-Ba · finance.yahoo.com
- Scalp psoriasis: What to know about this uncomfortable inflammatory skin condition · health.harvard.edu
- How and when to use ketoconazole · nhs.uk

For information only, not medical advice. Hair loss, a scalp that will not settle, eczema flares and anything on a baby's skin belong with a dermatologist or a pediatrician.



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Ellen looks after the brands Body of Work works with and makes sure every sponsored page says so. She spent years in salon education for a professional hair care company, so she can tell a demonstration from a claim.
