

ACNE

What is Acne?

Acne is a disorder of specialized glands on the face, chest, and back. It affects 85% of adolescents and young adults. The cause of acne is unclear but several factors play a role. Beginning at 8 or 9 years old all adolescents produce hormones that start the process of physical maturing (puberty). These hormones cause the special glands in our skin to produce sebum. These hormone levels peak in our teenage years and don't decline until our early 20's. Sebum may help cause dead skin to clog the glands in our skin. Certain bacteria may also grow in these glands using sebum as "food" and inflaming our skin. Some forms of severe acne may be inherited.

Types of Acne

Comedones - "Blackheads" and "Whiteheads" These are visibly blocked glands. Open comedones are blackheads. The color is not dirt but normal skin pigment reflected through dead skin. Closed comedones, whiteheads, contain trapped oils and dead skin cells.

Inflammatory acne - These are inflamed (irritated) comedones that are less than 5mm. They may appear as raised or red nodules.

Cysts - They are inflamed lesions bigger than 5mm. They may lead to scarring.

Myths about Acne

Acne is not caused by dirt! Therefore frequent washing, harsh soaps or abrasive pads don't help. Diet does not usually play a significant role in acne flare-ups. You cannot "catch" acne from someone else.

Treatment of Acne

Remember! Acne is a chronic condition and treatment regimens usually take 4-6 weeks to see noticeable changes. Your goal should be aimed at one or two flare-ups a month. Everything starts with good skin care habits as mentioned above. Always use sunscreen when using acne medications because your skin is more sensitive to sunburn and sun damage.

General Skin Care

Wash your face twice a day with a mild soap without strong perfumes or "scrubs" which may irritate your skin. Women should avoid oil-based make-up and moisturizers. Use products labeled "oil-free," "non-comedogenic," or "non-acne-genic." Avoid getting hair gels and styling products on your skin. Know that hormonal increases before a woman's menstrual cycle may cause acne to flare-up. Do not pick at,

squeeze, or pop comedones because it will inflame the lesion more and may cause scarring.

Take care about wearing clothing or athletic equipment (like chin straps) that are too tight or rub because they can irritate your skin.

Medications

Benzoyl peroxide has anti-inflammatory and anti-bacterial properties. It is a first line drug for mild comedonal inflammatory acne. It comes in over-the-counter creams, lotions, and gels in concentrations of 2.5 - 25%. Always start with a low concentration like 5% and gradually (over weeks) increase the strength as needed. Once a day is usually enough. Gels are generally more effective forms but can be drying to the skin. Apply a thin layer in acne-prone areas while avoiding the eyes and mouth. It also comes in "washes" for larger areas.

Topical retinoids (like Retin-A and Differin) are good for people with large numbers of comedones (whiteheads and blackheads). It works on glands to help reduce plugging. It comes in creams, gels, and liquid. The gel and liquid tend to be more effective. High concentrations can irritate your skin and make it more photosensitive; Benzoyl peroxide inactivates topical retinoids when applied together so use them at different times of the day.



Antibiotics kill bacteria that may inflame comedones. They are used for inflammatory acne. The most commonly used antibiotics contain doxycycline and clindamycin. Trimethoprim-sulfamethoxazole and minocycline are other forms. They are all comparably effective, in combination with other products like benzoyl peroxide or retinoids, the benefit is additive.

Antibiotics come in topical and oral forms. Oral forms tend to be more effective but have more side effects.

Oral retinoids (Accutane) are used for refractory acne. Its use is discouraged because of potentially harmful side effects and its link to birth defects. Specialty referral is required for that.

In general, 5-10% benzoyl peroxide once a day or in combination with a topical retinoid or topical antibiotic will control about 90% of acne patients after 1-2 months of treatment.

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