

Acne

What can I Expect from Acne Treatment?

Our goal is to *improve your acne by 60-70% within 3-4 months*. It takes time before you see changes, be patient and persistent! Most people see little or no benefit during the first month of therapy and you may actually find that your acne seems worse, this is normal. Patients often don't see maximal benefit until 3-4 months of therapy.

Acne Medications

It is very important to use these medications to treat all acne prone areas, *do not "spot treat"*.

Benzoyl peroxide:

Use this in the morning and apply to all acne prone areas. Benzoyl peroxide can have a bleaching effect on clothing.

Retinoids (Retin-A, Differin, Tazorac):

Apply a pea-sized amount to the entire face at night. Avoid application to the upper or lower eyelids, creases of the nose, corners of the mouth or upper lip as these areas are more prone to irritation. To reduce irritation start out using it every third night and gradually, over about 1 month, increase the frequency until you can tolerate nightly use. Use only at night since it is inactivated by sunlight.

Topical antibiotics (Clindamycin, Erythromycin, Dapsone):

Apply to all acne prone areas typically in the morning, do not "spot treat".

Oral antibiotics (Doxycycline, Minocycline):

Oral antibiotics reduce the number of inflammation-causing bacteria. Patients with acne may make the mistake of deciding each morning whether or not they need their antibiotic. You should not take the antibiotic in an on-again-off-again manner. Oral antibiotics are typically used for a few months not indefinitely.

- Doxycycline: May cause sensitivity to the sun so wear sunscreen and avoid intense sun exposure. May cause irritation of the esophagus so don't "dry swallow" the pills, take them with a glass of water. May cause upset stomach which is reduced by taking the medicine with food, try not to take the medicine right before bedtime and remain upright for 30-60 minutes after taking the medication.
- Minocycline: Minocycline is generally well tolerated. Some people may experience dizziness. Rarely can cause symptoms of headache or joint aches. In very rare cases a "hypersensitivity" syndrome with flu-like symptoms, fever, skin rash and inflammation of the liver occurs. If you experience any of these symptoms stop the medication and call us immediately.
- Hormonal therapy (birth control pills):
Hormonal therapy can help acne especially when there is a component related to the menstrual cycle.

Female Patients

- Before starting any medication, even topical medications, you must inform your doctor if you are pregnant or are planning to become pregnant.
- Regular menstrual cycles should occur once a month, every month and last approximately one week. Please tell your doctor if you DO NOT have regular menstrual cycles as described above.

Skin Care Guidelines While on Prescription Acne Medications:

- We recommend you stop over-the-counter acne products. When combined with prescription products these are often too drying and irritating.
- We recommend a gentle skin cleanser such as Cetaphil DermaControl face wash or Cerave foaming facial cleanser. Avoid abrasive soaps or scrubs.
- Picking and popping may feel gratifying but can cause scarring, "just say no".
- We recommend you use a facial moisturizer with sunscreen (SPF 15-30) for example Cetaphil DermaControl, Cerave moisturizing lotion AM, Neutrogena or Aveeno.

Acne 101

- Purely comedonal acne: topical retinoid such as Tretinoin 0.05% cream nightly
- Mild acne: Topical retinoid + BPO for example 1) EpiDuo once daily or 2) OTC BPO wash in the AM and Tretinoin 0.05% cream in the evening
- Moderate acne: add topical clindamycin 1% lotion qAM or doxycycline 100mg po bid
- Severe or scarring acne: consider evaluation for Isotretinoin/Accutane
- Women: consider initiation of OCP

Evidence Based Pediatric Acne Guidelines: *Free PDF via Pediatrics website. Pediatrics Vol. 131 No. Supplement 3 May 1, 2013 pp. S163 -S186*