My Acne Plan

Morning treatment:
Wash Face with gentle cleanser then apply a thin layer of ____________________ all over the face. Then apply your moisturizer and sunscreen.

Evening Treatment:
Wash face with gentle cleanser then apply a dime sized amount of ____________________ all over the face. Do not spot treat. Start by applying it every other night for 1-2 weeks and then increase to every night as tolerated. Finish by applying your moisturizer on top. Expect some dryness.

Back/Chest Treatment:
Wash chest and back with 10% benzoyl peroxide wash (Oxy or Panoxyl: over the counter) in the shower. Apply your night time prescription cream all over the back.

Take oral medication:

Return for evaluation in ________________ months.

Acne Information
Acne is a very common condition that effects up to 85% of people 12-24 years old. While normally a problem for teens it can unfortunately continue into adulthood. Factors in the development of acne include genetic predisposition, increasing oil production during teen years as well as hormonal influences and diet.

Cleansers
Treatment of acne begins with the use a mild cleanser such as Vanicream facial cleanser and Elta MD foaming cleanser. If very inflamed cysts are present, use Neostrata antibacterial cleanser, especially if you are trying to avoid oral antibiotics. If you are on prescription acne treatment you should avoid cleansers that have acne medicine such as benzoyl peroxide or salicylic acid in them as this can cause over drying and irritation

Moisturizers
Everyone getting acne treatment needs a moisturizer because treatment will cause dryness and irritation. Ensure that your moisturizer states on the bottle that it is non-comedogenic and oil-free. Example: CeraVe PM

Sunscreen
If you are going to be using a retinoid or taking antibiotics such as doxycycline, your skin will be more sensitive to the sun and a daily sunscreen is highly recommended. Elta MD UV Clear is made for acne and rosacea prone skin because it contains an anti-inflammatory called niacinamide. Make sure your sunscreen is at least SPF 30 (those daily moisturizers with SPF 15 are not enough) and is oil-free and non-comedogenic. CeraVe AM is another good one.

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Prescription Treatment Options

**Retinoids (tretinoin, adapalene/Differin, tazarotene/Tazorac, Differin, Atralin, Retin-A)**

Retinoids reduce plugged pores and prevent the development of new acne. It is the mainstay treatment for acne. Topical retinoids can also help improve uneven pigmentation, minimize fine lines, improve scars and even prevent the development of skin cancers. The most common side effects are dryness, irritation and sun sensitivity. To avoid this, start using the medication every 3rd day for 1-2 weeks and gradually increase to every other day and finally every day. It should be applied at night before bed all over the face. **Dryness is not a reason to stop the medication.** If dryness and irritation are severe, you should apply the medication less frequently and increase the frequency of your moisturizer. There is usually an initial worsening of acne the first few weeks of use. You should expect results after 10-12 weeks of continuous use. It is important to avoid being in the sun a lot and to use sunscreen while using topical retinoids. Woman who are pregnant or plan to become pregnant should not use this medication.

**Topical Antibacterial and Anti-inflammatory agents**

Examples: Clindamycin, Benzoyl Peroxide, Dapsone (Aczone), Azelaic acid (Finacea)
These medications are often prescribed for acne when there are pink inflammatory papules or pustules. These medications kill bacteria that cause acne and work to reduce inflammation. Benzoyl peroxide can bleach clothing and sheets. The most common side effect is dryness and irritation. Sodium sulfacetamide is also an anti-inflammatory that reduces redness.

**Some combo for once daily dosing include:**
Ziana/Veltin: clindamycin and tretinoin; Epiduo: adapalene and benzoyl peroxide

**Oral Antibiotics : Doxycycline (Acticlate. Doryx), Minocycline (Solodyne)**

When acne is moderate to severe, oral therapy may be indicated. Oral antibiotics such as doxycycline and minocycline are often prescribed. The most common side effect of doxycycline is nausea and stomach upset so it is best to take with a full glass of water or food (but not milk or other dairy products). Another common side effect of doxycycline is sensitivity to the sun. Minocycline can cause dizziness. There are other more rare but serious side effects associated with Minocycline such as darkening of the teeth, blue-black pigmentation within scars, lupus-like reaction, and autoimmune hepatitis. Do not take these medications if you are pregnant.

**Isotretinoin (Several brands, commonly known as Accutane) “BIG GUNS”**

For severe acne that is nodulocystic in nature and is causing scarring, the treatment of choice is Isotretinoin. Formerly known as Accutane, this medication is taken by mouth for 5-7 months. Because this medication causes severe birth defects when taken by pregnant women, the FDA has mandated that anyone taking this medication enroll in a program called IPLEDGE. Both men and women must enroll in the program. For women, two forms of birth control are required. Your blood lipid levels and liver function tests must be measured each month while on this medication and monthly office visits are required. Dry skin, eyes, and lips are the main side effects associated with isotretinoin. Other potential side effects include headaches, muscle aches/pains, blurred vision, mood changes. **Monthly visits, Monthly blood work required.**
**Hormonal Acne (women only)**

Deep cystic acne along the jaw-line that persists into adulthood is frequently caused by hormones and should be treated differently.

**“The Pill” is not just for pregnancy prevention**

Taking an oral contraceptive pill can be very helpful to acne but it is important to choose the right birth control as some types actually make acne worse. Several birth control pills are FDA-approved to improve acne. These are Ortho-Tri-Cyclen, Estrostep, Yaz, Loryna, and Beyaz. There is clinical date to support the use of Alesse, Diane-25, Yasmin, Syeda, Zarah, Safyral and Natazia. Talk to your OB/GYN and they can help you decide which is right for you. Expect improvement after 10-12 weeks of treatment. Birth control has been shown to increase risk of blood clots, particularly in women over 35 who smoke.

Birth control methods that may worsen acne: Depo Provera shot, Mirena IUD

**Spironolactone**

Spironolactone is an androgen receptor blocker, meaning it blocks the effect of male hormones. It has been shown to decrease oil production and improve acne. Side effects include menstrual irregularities, breast tenderness, lower blood pressure and potentially high potassium levels. Bloodwork is required prior to treatment and then annually to monitor for high potassium if you are over 40. Pregnant women should not take this medication and using birth control is required. The results are seen best after 3 months of treatment. This is a great treatment but only works while you take the medication, therefore it is for long-term maintenance.

Acne while Pregnant? If you become pregnant or are trying to get pregnant, stop everything and contact the office for a new plan. We can use safer treatments such as glycolic acid cleanser and prescription Azelaic Acid (Finacea).

**General Acne Tips**

Avoid picking or squeezing at your pimples because this can cause scarring. While we do have a laser for scarring, I'd prefer not to have to use it!

Keep in mind that it can take 8-12 weeks before you notice improvement in your skin. Be patient and consistent with your treatment. Sometimes a tweaking of your treatment plan can be helpful but do not give up hope on a particular plan until it has been at least 3 months.

Skin discoloration from previous acne is common and will eventually fade with time (months to years). It is important to wear sunscreen as the sun can worsen discoloration. This is especially important for people of color.