



ACNE

This leaflet has been written to help you understand more about acne - what it is, what causes it, what can be done about it, and where you can find out more about it.

What is acne?

Acne is a very common skin condition. It usually starts at puberty and most adolescents will have a few spots at some time. Acne is based on the sebaceous (oil-producing) glands that lie close to the hair follicles, and its characteristic spots are seen where these are common - on the face, neck, chest and back.

What causes acne?

The sebaceous glands of people who get acne are especially sensitive to normal blood levels of a hormone called testosterone. This causes the glands to pump out an excess of oil. At the same time, the dead skin cells lining the openings of the hair follicles are not shed properly and clog up the follicles. These two effects combine to cause a build up of oil within the hair follicles.

The acne bacterium (known as *P. acnes*) lives on everyone's skin, usually causing no problems. But in those who are prone to acne, the build up of oil creates an ideal environment in which these bacteria can multiply. This triggers a chemical reaction and the formation of red or pus-filled spots.

Sometimes the blocked follicles do not become inflamed. The term 'blackhead' is used when the blockage can be seen as a dark plug at the skin surface. A bumpy and flesh coloured blocked follicle lying just under the skin is called a 'whitehead'.

Is acne hereditary?

Acne can run in families, but this does not necessarily mean that if your parents had acne you will get it too.

What does acne look like and what does it feel like?

The typical appearance of acne is a mixture of the following: a greasy skin, blackheads, whiteheads, red spots and bumps, yellow pus-filled spots, and scars.

Some of the larger spots may be very tender and stay this way until they either burst or start to heal on their own.

How is acne diagnosed?

Acne is easily recognised by the appearance of the spots, and by their distribution on the face, neck, chest or back. However there are several varieties of acne and your doctor will be able to tell you which type you have after examining your skin. The most common type is called acne vulgaris.

Can acne be cured?

No treatment will completely 'cure' acne. The aims of treatment are to prevent new spots forming, to improve those already present, and to prevent scarring.

How can acne be treated?

If you have acne, but have had no success with over-the-counter products, then it is probably time for you to visit your doctor. However it is unrealistic to expect overnight cures. In general, most treatments take two to four months to produce their maximum effect.

Acne treatments fall into the following categories:

- Those that are applied directly to the skin (topical treatments)
- Oral antibiotics (tablets taken by mouth)
- Oral contraceptive pills (O.C.P.s)
- Isotretinoin capsules
- Other treatments

Topical treatments

These are applied directly to the skin and include a variety of active anti-acne ingredients such as benzoyl peroxide, nicotinamide, antibiotics, azelaic acid, and retinoids. Topical treatments are usually the first choice for people with mild to moderate acne. They should be applied to the whole of the affected area and not just to the spots themselves.

Oral antibiotic treatment

Your doctor may recommend a course of antibiotic tablets, which will be taken in combination with suitable topical treatment. Oral antibiotics help the inflamed spots of acne but have no effect on uninfamed ones such as blackheads. They are suitable for widespread acne because topical treatments may then be difficult to apply properly to all of the affected areas.

Antibiotics need to be taken for at least two months, and are usually continued until there is no further improvement. Some should not be taken at the same time as food, so read the instructions carefully.

Oral contraceptive treatments

Some types of oral contraceptive tablets help women who have acne. The most effective contain a hormone blocker (for example cyproterone), which reduces the amount of oil the skin produces. These may take up to four months before they start to work.

Isotretinoin

This powerful treatment acts directly on the oil producing glands and can be prescribed only by a dermatologist. Isotretinoin can harm an unborn child. A pregnancy test will therefore be performed, and must have been shown to be negative, before you can start the treatment. You must also use effective contraception whilst on the treatment, and for four weeks afterwards.

Most courses of isotretinoin last for four months, during which time the skin may flare up and become red. Recent concerns regarding depression and suicidal feelings may worry some patients. A careful in-depth consultation should take place before a course of treatment starts.

Other treatments

Recent advances in acne treatment include light and laser therapy, and chemical peels. At present, only very limited light treatment, or none at all, is available on the NHS. However trials of light and laser treatments for acne have shown promising results.

What can I do?

- However your acne affects you, it is important to take action to control it as soon as it appears. This helps to avoid permanent scarring, and reduces embarrassment.
- Expect to use your treatments for at least two months before you see much improvement. Make sure you understand how to use them correctly so you get the maximum benefit.

- ❑ Some topical treatments may dry or irritate the skin when you start using them. An oil-free moisturiser should help, but you may also have to cut down the frequency with which you put the treatment on.
- ❑ Wear oil-free, water-based make-up, and choose products that are labelled as being “non-comedogenic” (should not cause whiteheads or blackheads) or “non-acnegenic” (should not cause acne). Remove them at night with mild soap or gentle cleanser and water. Scrubbing too hard can irritate the skin and make your acne worse.
- ❑ Remember that squeezing spots usually aggravates them.
- ❑ There is little evidence that any foods cause acne but it may be sensible for you to avoid foods that you think make your acne worse.

Where can I get more information?

The Acne Support Group is a source of independent support and advice. Contact them on 0870 870 2263 or on www.stopspots.org

www.aad.org/pamphletsacnepamp.html

www.skincarephysicians.com/acnenet/

(Whilst every effort has been made to ensure that the information given in this leaflet is accurate, not every treatment will be suitable or effective for every person. Your own doctor will be able to advise in greater detail.)

PATIENT INFORMATION LEAFLET PRODUCED AUGUST 2004