

# ACNE

## **Introduction:**

Acne, also known as acne vulgaris, is thought to be caused by multiple factors. Overproduction of a type of normal oil on the skin, called sebum, increases under the influence of hormones. This, coupled with insufficient shedding of exfoliating dead skin cells, plugs hair follicles. The plugged follicle can become inflamed and have increased growth of normal skin bacteria, *Propionibacterium acnes*. Medications such as lithium, cortisone, hormones, some seizure medications, or some antibiotics can also cause acne lesions.

There is no cure for acne, but certain measures can help prevent more breakouts. Acne can result in scarring, so minimizing breakouts is important.

Acne affects 85–100% of people at some point in their lives, and it usually begins at puberty. Acne can persist into the 30s and beyond. In fact, 5% of people over 45 still have acne. People of all ethnic backgrounds get acne.

## **Causes:**

Acne results in a variety of lesions. The most common acne locations include the face, neck, chest, and back, where the most sebaceous glands are located. Along the jaw line is a common location in adults. "Blackheads" (open comedones) and "whiteheads" (closed comedones) are follicular plugs that are either sitting below the skin surface (whitehead) or oxidized from being exposed to the air (blackhead). Papules are small pink to reddish-brown bumps, pustules are pus-filled lesions, and nodules or cysts are deeper pus-filled lesions. Mild acne consists of a few papules/pustules and/or comedones. Moderate acne has an increased number of lesions. Severe acne has numerous comedones, papules, pustules, and may have painful nodules.

## **Treatment:**

Traditional treatments can help prevent acne. Cleanse the acne-prone areas with gentle soaps or cleansers. Avoid irritants, such as rubbing and other alcohols, and abrasive scrubs and greasy products on the skin and in the scalp.

Products labeled "water-based" or "noncomedogenic" will help reduce clogged pores.

There are also a variety of over-the-counter medications that may help. These are meant to be preventative therapies and should be applied in a thin layer to the entire area on a regular basis. If applied consistently, you may see small improvements quickly, but results are generally seen after a few months.

Benzoyl peroxide (most effective), is available in a variety of forms and strengths.

Benzoyl peroxides tend to dry the skin, though, so if you have dry skin, use a weaker-concentration product; for oily skin, consider higher strengths.

It can also bleach your clothing and towels. Peeling agents (exfoliants) such as salicylic acid, sulfur, resorcinol, and alpha-hydroxy acids (glycolic, lactic, pyruvic, and citric acid) can also help but will also cause some dryness of the skin.

Microdermabrasion performed every 7–10 days ("lunchtime peel") has been a popular way to control mild acne and can be done by a health care professional.

The same types of peeling agents are available in over-the-counter products, which can be used at home at much less cost. If you have moderate or severe acne that has not improved enough with self-care, seek medical help.

Topical (or external) treatments for acne include one or more creams, washes, or gels that include:

- Antibacterial agents and antibiotics such as benzoyl peroxide, clindamycin, erythromycin, sulfur, sodium sulfacetamide, and azelaic acid.
- Retinoids – vitamin A-derived products such as tretinoin, tazarotene, and adapalene.

#### **Treatments for Acne oral and procedural :**

##### ***Oral treatments may include:***

- Antibiotics such as tetracycline, minocycline, doxycycline, erythromycin, ampicillin, clindamycin, trimethoprim-sulfamethoxazole, azithromycin, or cephalosporins.
- Oral contraceptives and spironolactone have been found to help regulate hormones.
- Isotretinoin, a powerful drug with potential side effects, for severe acne unresponsive to the above treatments, or with acne that causes scarring.

##### ***Procedures:***

- Special "blue light" treatments are being investigated to treat acne but are usually not covered by insurance but some private insurance may cover
- Several types of laser treatments also help acne and are often used with other treatment methods; treatments are expensive, must be repeated for several months, and have variable efficacy. private Insurance may cover laser therapy.
- Laser resurfacing, plastic surgery, and/or dermabrasion may help reduce the prominence of old acne scars.

*Quick tips about acne:*



**Don't** pop! Picking and squeezing leads to more bacteria being distributed and more acne.

**Do** wash your face! ONCE or twice daily with proper acne washes to help keep acne at bay.



**Do** apply sunscreen! Skin is much more sensitive to UV rays when you use acne products

**Don't** stress out! Stress can indirectly worsen acne by affecting your hormones.



**Do** use oil-free makeup. Look for noncomedogenic products – they don't contain ingredients that clog pores. **Don't** wear makeup! Take a break to let your skin breathe and heal (at least once a week!)

**Don't** feel alone. Nearly everyone in the world gets pimples.



**Do** wash your pillow case and sheets often. They absorb oil and reapply the dirt and oil on your skin. **Do** wash your make-up brushes with antimicrobial soap. Makeup applicators can store bacteria.

**Don't** scrub too much! It won't work and can irritate your skin and aggravate your acne.

*5 myths about acne*

**Myth #1:** Eating greasy food makes acne worse.

Certain foods such as chocolate, French fries, and other greasy foods have long been suspected of aggravating acne but scientific studies have not been able to find a connection.

**Myth #2:** Poor hygiene can cause acne.

Acne is not a consequence of dirty skin and isn't a reflection of anyone's hygiene habits. And blackheads aren't

dirt-filled pores. They're black because the protein in them (keratin) is oxidized when it comes into contact with air. In fact, washing too often and vigorously can actually make acne worse.

**Myth #3:** Acne will clear up on its own in time.

It may clear up eventually but acne can get a lot worse before it gets better. And the longer you have acne, the greater the chances of permanent scarring. The most effective way to get rid of acne is not to wait and see but to treat it. Talk to your doctor about what treatment is right for you.

**Myth #4:** You can get acne from contact with someone who has it.

Acne may be unsightly and embarrassing for the sufferer but it is absolutely not contagious.

**Myth #5:** Sun exposure and tanning clear up skin.

Neither outdoor nor indoor tanning will help acne over the long run. Being in the sun can help acne initially by drying up skin lesions and surface oils a bit but the effect is just temporary. More often, people will experience an acne flare-up after UV exposure. In addition, sun exposure greatly raises the risk of skin cancer.

For booking and consultation:

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