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What Can Be Done To Control Acne?

Who hasn't at one time or another been plagued by the unsightly lesions of acne — commonly known as pimples or "zits"? Acne is a common skin disorder predominantly affecting adolescents. Nevertheless, it also affects many adults, especially women undergoing hormonal changes and/or using pore-clogging cosmetics and moisturizers.

Acne is caused by an inherited susceptibility to plugging within the oil gland ducts, preventing oil and debris from reaching the skin's surface. This oil and dead skin eventually become visible as blackheads and whiteheads. Bacteria that normally reside in the oil glands then begin to proliferate, releasing agents that cause inflammation (pimples). When the engorged oil gland ruptures, painful cysts may develop. These inflamed lesions can then heal with the telltale acne scars.

The good news is that acne, a disease with physical and emotional components, can be controlled with medical intervention by a dermatologist. It is not caused by poor hygiene, dietary habits (such as eating chocolate or greasy foods) or bad thoughts. Stress, hormonal disorders and birth-control pills can aggravate the condition by increasing oil output.

Avoid the compulsion to pick and squeeze because that will further irritate the skin and may cause scarring. Moreover, avoid repetitive rubbing and scrubbing because this can promote lesion development.

Eliminate application of any unnecessary pore-clogging creams and lotions — only use products tested and shown to be noncomedogenic. Remember, oily hair, especially if hanging on your face, can act similarly.

A plethora of agents are touted as effective acne treatments. Because the market of patients with acne is so large, sales of over-the-counter products have created a flood of choices that are often confusing to



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the consumer.

All patients with acne should use a topical retinoid (such as Differin, Retin-A, Tazorac), unless they are pregnant or plan to become pregnant. Prescription-only retinoids help loosen the tiny plug in the oil gland duct.

Benzoyl peroxides, many available without a prescription, are also a mainstay of treatment. They work primarily by killing the bacteria that build up in the glands. They will bleach clothing and bed linens, so rub them in well and rinse your hands. Both drugs may cause irritation, often triggered by overzealous use.

Topical antibiotics are often prescribed as well but are best used in combination with a benzoyl peroxide to prevent development of bacterial resistance. Many patients require treatment with the tetracycline family of antibiotics, not because acne is an infection but because tetracyclines help reduce inflammation.

Recent studies show benefit with BLU-U, a therapy that uses visible blue light to kill acne-causing bacteria. Multiple exposures are required, and for more severe cases the addition of a topical photosensitizing agent (Levulan) may be necessary. Blue-light therapy is now offered in some dermatologists' offices but is not approved by the Food and Drug Administration for acne and thus is not covered by insurance.

When nothing else works, severe cases of acne with cysts may require oral Accutane. This is clearly the most effective antiacne agent, but side effects, including birth defects and possible depression, have prompted the FDA to severely restrict its use.



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