

Acne: From the Cradle to the Grave

Nanette B. Silverberg, MD

While most adults think of acne as an affliction in teenagers, it can affect patients virtually from birth until death. The types and causes of acne tend to shift somewhat with age, but one thing is certain: no patient wants to walk around with acne. In the last 2 years, some remarkable concepts on the understanding and treatment of acne have been introduced. This light overview of these topics is intended to invite physicians to consider changes in paradigms of acne vulgaris. After reading the new data, dermatologists will find that there are still lessons to be learned in the evaluation and treatment of patients with acne.

On Hormones

Obesity in teenagers, particularly those with amenorrhea and large waist circumference, is still most suggestive of hormonal abnormalities in ethnic minority adolescent girls.¹ In terms of diet, patients who are obese with high body mass indices benefit from a low glycemic diet, both by losing weight and reducing acne lesions.² Dermatologists may be the first physicians to identify and prevent the rudiments of diabetes mellitus.

On Reality and Quality of Life

In a study of 217 adolescents, only 74% who reported acne were diagnosed as having acne by a physician. The lack of a realistic self-evaluation makes it difficult for teenagers to cope with acne.³

Quality of life is negatively impacted in patients with acne, both males and females in all age groups. Self-esteem (as tested by the Culture Free Self-esteem Inventory—Adult Version), in particular, is grossly affected as compared with healthy controls. In patients aged 18 years, it has been corroborated that self-esteem is affected by acne, even in the absence of obesity or depression.⁴ Consideration of the psychological well-being should be of importance in patients with long-standing disease.⁵

Reality is a 2-way street in acne therapy. Chronicity of illness—a 14-year-old boy who presents with acne that may sustain for a decade or a woman with acne and no end in sight—should play a central role in patient education. We should set realistic goals for our patients by informing them of the chronicity of illness, the slow onset of therapeutic results, and the need for months of therapy before complete clearance in many cases.⁶ By not trivializing disease, dermatologists may gain more respect from patients who often are unhappy with primary care physician interactions on skin disease.⁷

On Treatment

No matter what treatment is chosen—topical therapy or oral isotretinoin—patients with acne may be depressed. Offering treatment and successful improvement of the disease seems to improve quality of life, depression, and anxiety symptoms.⁸

On Resistance

Antibiotic resistance has been discussed for decades, as erythromycin resistance emerged soon after its usage for acne vulgaris. Newer prescription agents are less likely to select for resistant organisms. Subantimicrobial antibiotics⁹ and new topical agents lacking topical antibiotics (eg, dapson, ¹⁰ adapalene with benzoyl peroxide¹¹), or pairing antibiotics with retinoids (eg, tretinoin with clindamycin), help to prevent resistance. Adding benzoyl peroxide washes to a treatment regimen has been found to reduce bacterial resistance.¹²

On Scarring

Prevention of scarring using both topical and oral retinoids (ie, isotretinoin) is still the mainstay of therapy for more severe forms of acne. However, facial resurfacing with ablative lasers is out of vogue for residual scars. Newer modalities of correction for facial acne scars include nonablative laser therapy, pulsed dye laser, and fractional laser resurfacing. Usage of injectable fillers for acne scars is gaining popularity, particularly with longer acting fillers that may stimulate collagen production.¹³⁻¹⁵

From the Department of Dermatology, St. Luke's-Roosevelt Hospital Center, New York, New York; Beth Israel Medical Center, New York; and Columbia University College of Physicians and Surgeons, New York.

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Conclusion

Acne remains an exciting field in dermatology. Scientific advancement and technology can pair to improve global outcomes of disease, but ultimately patients want a sympathetic ear from their dermatologist. Good outcomes may aid in growth and development of teenagers, but self-esteem and depression are issues to be explored in all age groups.

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