

# Acne guidelines adapted from PCDS

Original guideline at [www.pcds.org.uk/clinical-guidance-and-guidelines](http://www.pcds.org.uk/clinical-guidance-and-guidelines)

**All treatments should be used for 3 months before assessing response**

## I) Treatment of comedonal acne

- First line
  - Patients can buy Benzoyl peroxide 2.5-10% (e.g. **Panoxyl**) over the counter
  - Topical retinoid e.g. adapalene (**differin**), isotretinoin (**Isotrex**) or tretinoin (**Retin-A**). Once at night
  - Treatments will normally dry the skin. Start 2-3 nights a week and gradually increase the frequency of applications. A non-oil based moisturiser can also be used
- Other options
  - Azelaic acid (**Finacea, Skinoren**)

## II) Treatment of mild papular/pustular acne

- Use a topical anti-microbial with/without a topical retinoid
- Topical anti-microbials including clindamycin and 5% benzoyl peroxide (**Duac**), erythromycin and zinc (**Zineryt**), clindamycin 5% (**Dalacin T**)
- A separate retinoid and anti-microbial can be used at opposite ends of the day or use combined preparations e.g. tretinoin and erythromycin (**Aknemycin Plus**), or 2.5% Benzoyl Peroxide gel and adapalene (**Epiduo**)

## III) Treatment of moderate inflammatory acne

- **Combine systemic antibiotics with topical agents**
- First choice of antibiotic: tetracyclines should be taken 60 minutes before or after food. Tetracyclines are contra-indicated in pregnancy and in patients aged under 12
  - Lymecycline 408mg OD (Terallysal 300)
  - Alternatives. Oxytetracycline 500mg BD, Doxycycline 100mg daily.
  - Tetracyclines can cause a photo sensitive eruption
  - Minocycline is seldom used due to the increased risk of hepatotoxicity and lupus-like conditions
- Other antibiotics
  - Erythromycin 500mg BD
- Topical preparations to use
  - Topical retinoids
  - Topical antimicrobials e.g. benzoyl peroxide
  - It is not advisable to prescribe oral and topical antibiotics of different chemical groups simultaneously

## IV) Moderate-severe acne in a woman

- consider adding in cyproterone acetate 2mg, ethinylestradiol 35mcg ( **Dianette**) to the topical/systemic treatments to provide triple therapy
- Dianette may be of particular value in patients with significant endocrinopathies such as polycystic ovarian syndrome. Dianette takes 3-6 months to work. Once sustained improvement for 9-12 months consider changing to a COCP favourable for acne eg desogestrel 150mcg/ethinylestradiol 30mcg (**Yasmin**)

## Referral Criteria

- Severe acne – refer early
- Moderate acne only partially responding to treatment and starting to scar
- Inadequate response to at least two systemic antibiotics PLUS topical treatments, each given for a minimum of 3 months
- Patients with associated and severe psychological symptoms, regardless of the physical signs
- All patients need to have LFT and fasting lipids prior to starting isotretinoin and Female patients will need adequate contraception.

For any clinical and non-clinical queries, please contact the BICS Dermatology Team on: **0300 303 8060**