

General Management advice

- Treatment is determined by severity of the acne and the extent to which it affects the individual.
- Debunk myths about acne – diet, washing, sunbeds are unlikely to make much difference to the clinical course
- Offer a good information leaflet, such as this <http://www.patient.co.uk/health/acne>
- Give the following SELF-CARE advice:

Self-care advice

Advise about washing and skin care. In general, it is recommended that people with acne:

- Do not wash more than twice a day.
- Use a mild soap or cleanser and lukewarm water (as very hot or cold water may worsen acne).
- Do not use vigorous scrubbing when washing acne-affected skin; the use of abrasive soaps, cleansing granules, astringents, or exfoliating agents should be discouraged (advise use of a soft wash-cloth and fingers instead).
- Should not attempt to 'clean' blackheads. Scrubbing or picking acne is liable to worsen the condition.
- Ideally, should avoid excessive use of makeup and cosmetics. If they must be used, advise that a non-comedogenic, water-based product should be used sparingly (details of cosmetic ingredients are displayed on the product label), and that all makeup should be removed completely at night.
- Use a fragrance-free, water-based emollient if dry skin is a problem (several topical acne drugs dry the skin). The use of ointments or oil-rich creams should be avoided as these can clog pores.

Advise about non-prescription treatments. Benzoyl peroxide is a useful topical drug available over-the-counter. Brands include: Acnecide®(gel), Brevoxyl®(cream), PanOxyl® (aquagel, cream, gel, wash)

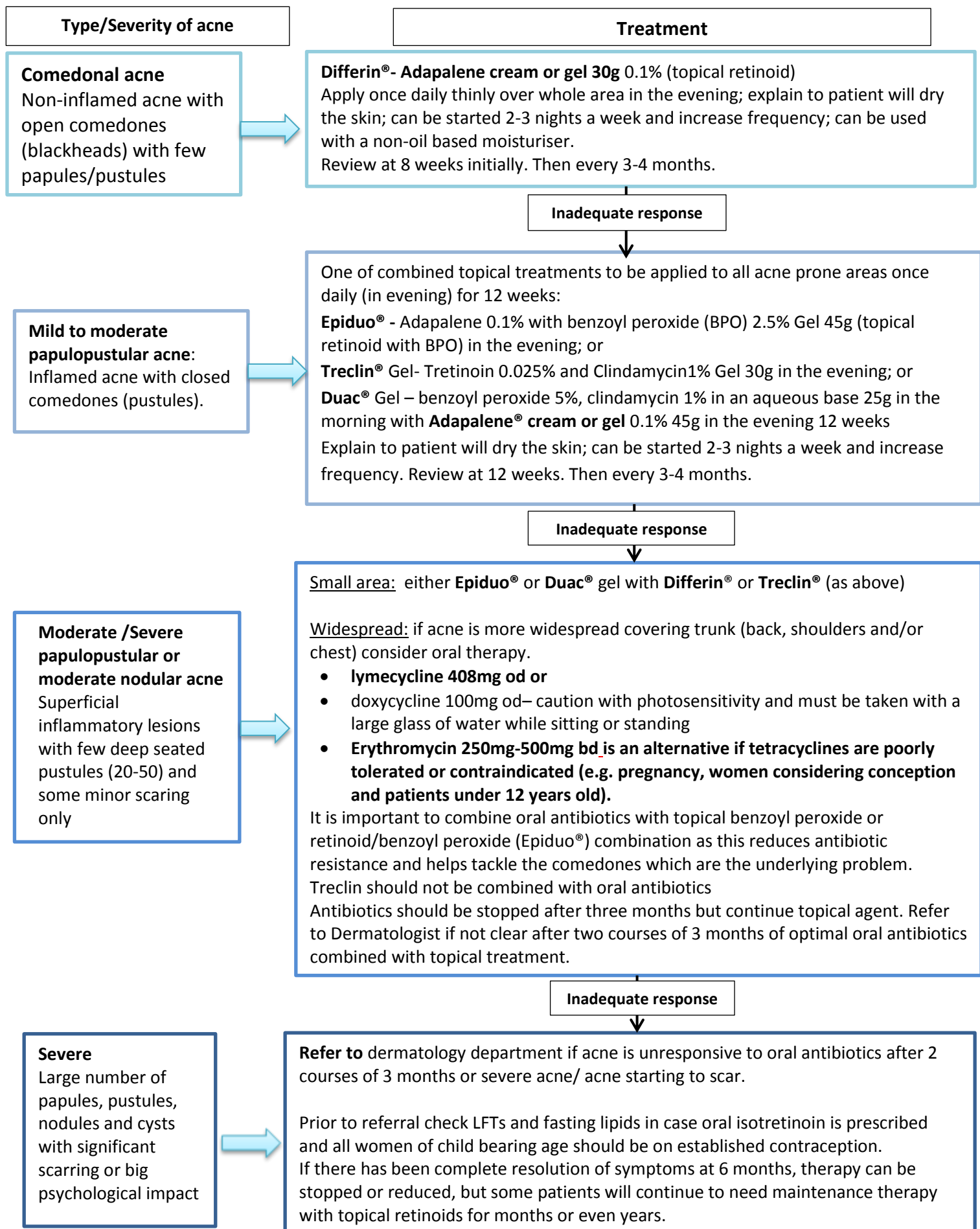
There is a lack of evidence of benefit for other over-the-counter drugs.

Encourage patients to buy their own benzoyl peroxide products over the counter.

- Explain the realistic timescale for improvement – weeks rather than days. Review topical therapy at 2-3 months and if no improvement at all, then change to second line, but if improving advise that full improvement may take up to 6 months
- Topical treatments for acne need to be applied to all skin ever affected by spots, not just on individual spots. The main mechanism of action is preventing the formation of new spots.
- Patients should be advised that benzoyl peroxide products can bleach fabrics.
- The evidence suggests that there is little additional benefit in using antibiotics for more than three months, and in addition, prolonged use increases the resistance of Propionibacterium acnes
- It is therefore recommended that antibiotics should be stopped after three months; however, the patient should remain on their topical agent.
- Minocycline is rarely used due to the increased risk of hepatotoxicity and lupus-like conditions and is considered by NHS England as an item which should not be prescribed in primary care.
- The antibiotic course could be repeated in the future if needed
- Don't forget to assess the psychological impact of the acne. You can use a standardised questionnaire for this if you wish <http://www.dermatology.org.uk/quality/dlqi/quality-dlqi-questionnaire.html>
- In women who also wish to receive oral contraception co-cyprindiol may be considered. Co-cyprindiol (Dianette®) is licensed for severe acne, after topical therapy or systemic antibiotic treatments have failed. The EMA found evidence from observational studies suggesting that co-cyprindiol has a 1.5–2 times statistically significant increase in venous thromboembolism risk compared with levonorgestrel-containing pills. It is thought that this risk is similar to that of contraceptives that contain desogestrel, gestodene, or drospirenone.

See <http://www.pcds.org.uk/clinical-guidance/acne-vulgaris> for pictures of the different stages

Acne Prescribing Guidelines



Do not prescribe single agent tretinoin gel (0.025% or 0.05%) It is an unlicensed high cost special order product. If requested for acne - substitute with single agent retinoid Adapalene cream or gel 0.1%. If for cosmetic anti-ageing properties this is not supported for prescribing – patients should self-purchase.

Title	Acne prescribing guidelines
Document reference	AcneGUI202001V2.0FINAL
Author	Mid Essex CCG Medicines Optimisation Team
References	Acne Clinical Knowledge summaries guidance https://cks.nice.org.uk/acne-vulgaris Primary Care Dermatology Society Acne Vulgaris Guideline. Updated 29/4/19. http://www.pcds.org.uk/clinical-guidance/acne-vulgaris
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Previous version	Key changes
N/A	New guidance – produced following addition of Treclin® to formulary (agreed at APC May 2016)
V1.0 March 2017	Addition of 3 months duration for oral antibiotics being sufficient due to increased risk of resistance. Addition of sentence on minocycline prescribing not being supported.