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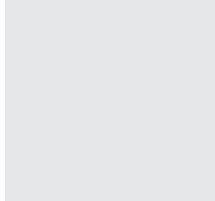


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## Research Highlights

### Advances in Acne Management Post-NICE: Evidence-Based Updates and Expert Consensus (2024) <sup>1</sup>

Acne is a chronic, inflammatory, and multifactorial condition. Managing both truncal and facial acne requires early intervention to reduce long-term physical and psychological impact. The UK Acne Working Group reviewed and expanded on the 2021 NICE guidelines, integrating new evidence, expert insights, and real-world experience.

#### 1. Acne Severity, Truncal Acne & Sequelae

- Stratify severity by **site** (face/trunk) and quality of life (**QoL**) impact
- Scarring & hyperpigmentation** (PIH) are common, especially in darker skin types
- Risk factors: **delayed treatment, frequent relapse, genetics, intense inflammation**
- Emphasize **early therapy, maintenance regimens, and scar prevention**
- Persistent scars: Consider **CO<sub>2</sub> laser, glycolic peels, punch elevation**, etc.

#### 4. Holistic Skincare: CMP Routine

Endorsed by Asia-Pacific Delphi panel for improving adherence:

- Cleansing:** Twice daily with pH-balanced, non-comedogenic cleansers
- Moisturizing:** Daily use of **non-comedogenic, barrier-supportive moisturizers** to minimize dryness and irritation, especially when using topical retinoids or benzoyl peroxide

#### 2. Hormonal & Medical Therapies in Women

- Combined Oral Contraceptives (COCs) preferred over progestogen-only pills when contraception is needed
- Consider **off-label spironolactone** for resistant hormonal acne
- Refer women with **PCOS signs** (e.g. hirsutism, irregular cycles)

#### 3. New Treatment Evidence

- Trifarotene:** Effective for truncal acne; 12-week trials show lesion reduction
- Topical dapsone:** Reduces inflammation (~55% over 12 weeks); avoid with benzoyl peroxide due to discoloration risk

- Photoprotection:** Oil-free, broad-spectrum SPF suitable for acne-prone skin
- Avoid occlusive makeup, minimize trauma (e.g. picking)
- Assess **psychosocial burden**; offer mental health referrals if needed



#### 5. Updated Antibiotic & Isotretinoin Guidelines

- First-line:** Fixed topicals (e.g. adapalene + benzoyl peroxide; clindamycin combos)
- Moderate/severe acne:** Combine topicals with 12-week oral **doxycycline/lymecycline**
- Isotretinoin:**
  - Start: 0.5–1 mg/kg/day
  - Target cumulative dose: 120–150 mg/kg
  - Early stop possible if strong response
  - Mental health & pregnancy monitoring mandatory
- Limit antibiotic use to ≤6 months, with regular reviews

#### Summary Table:

Key Area	Updates & Insights
Severity & Sites	Stratify by site + QoL
Sequelae Prevention	Early therapy; scar prevention
New Treatments	Trifarotene, dapsone
Female Hormonal Acne	COCs, spironolactone, PCOS pathway
Antibiotics & Isotretinoin	Clearer regimens, durations, monitoring
Holistic Skincare	CMP routine to support adherence



Advanced Acne Moisturizer



Reduces dark spots | Evens skin tone | Restores glow



2.5%  
5%  
Clears Acne...Restores Confidence



Cleanse, Hydrate, Maintains

## Combining Topical Therapies, Skincare, and Corrective Interventions for Enhanced Acne Management<sup>2</sup>

This review article introduces a patient centered, holistic framework for managing **acne alone or combined with sensitive skin**, emphasizing skin quality, barrier health, and long term satisfaction, as well as reducing sequelae like scarring and irritation.

Patients with both acne and sensitivity often suffer more irritation and decreased treatment tolerance. Yet only a small minority (~11%) are prescribed supporting skincare regimens along with pharmacotherapy

### Treatment Strategy

#### Topical Retinoids as Core:

- Dermatologists consider **topical retinoids** (e.g. adapalene, trifarotene, tazarotene, tretinoin) the preferred **first-line treatment**.
- Beyond lesion clearance, adapalene, trifarotene, and tazarotene have demonstrated **improvements in skin quality and acne scarring** in clinical studies.



#### Corrective Procedures:

- **Injectable non-animal stabilized hyaluronic acid (NASHA) fillers** have shown value in improving atrophic acne scars, especially when combined with topical retinoids such as trifarotene. This synergy can enhance patient satisfaction and appearance outcomes.

### Adjunctive Skincare Support

- Daily use of gentle **cleansers, moisturizers and sunscreen**, selected for acne prone/sensitive skin, helps:
  - ✦ Minimize treatment-related irritation,
  - ✦ Maintain skin barrier and hydration,
  - ✦ Reduce risk of scarring and post-inflammatory hyperpigmentation (PIH),
  - ✦ Improve overall skin tone and appearance,
  - ✦ Increase adherence and satisfaction.
- Key ingredients include **niacinamide (vitamin B3), glycerin or pro vitamin B3, and hyaluronic acid**, all shown to reduce TEWL and promote barrier repair while hydrating skin.

### Why It Matters: Benefits of the Holistic Approach

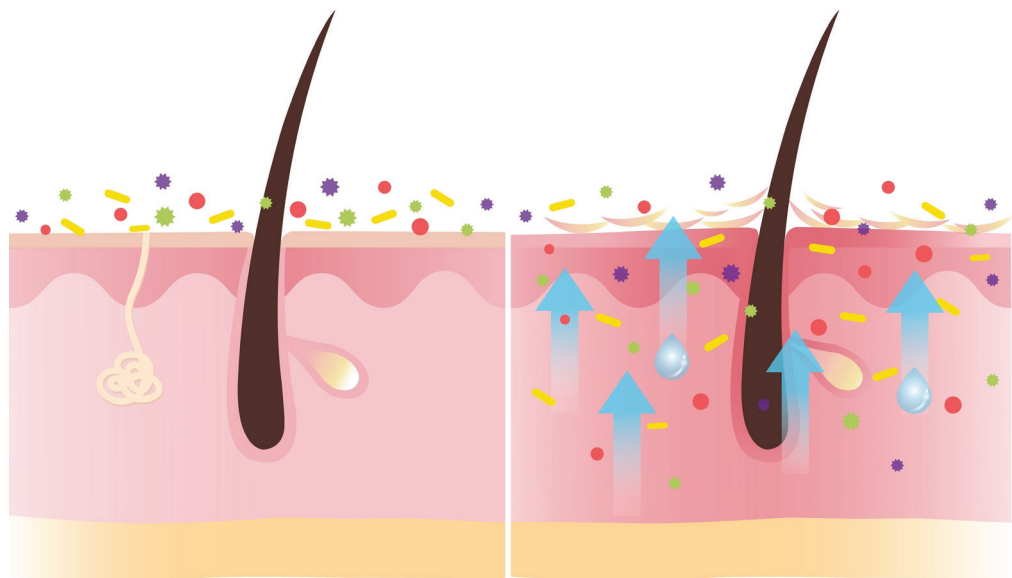
- **Integrates medical treatments and skincare** throughout the patient's acne journey for a unified strategy.
- **Enhances tolerability** - especially in sensitive skin - by proactively preventing irritation when using potent agents like retinoids.
- **Addresses acne sequelae** head-on, with early retinoid therapy and corrective modalities to reduce long-term effects like scarring.
- **Improves outcomes** by optimizing skin hydration and tone even in non-lesional areas.
- **Promotes adherence and satisfaction** - patients are more likely to stay on treatment when skin comfort and overall quality are preserved.

### Clinical Roadmap Summary

Component	Approach	Key Outcome Benefit
Topical Retinoids quality	Adapalene, trifarotene, tazarotene, tretinoin	Acne lesion reduction, improved skin
Corrective Modalities	NASHA fillers + retinoids	Scar improvement and patient satisfaction
Skincare Regimen	Cleanser + Moisturizer + Sunscreen with ceramides, niacinamide, glycerin, hyaluronic acid	Barrier support, hydration, reduced irritation, enhanced tone



Adult Female Acne and Epidermal Barrier Impairment<sup>3</sup>



Skin Microbiome balance / imbalance

Clinical Challenges & Skincare-Based Solutions:

**Background:** Adult acne, especially in women over 25, is common and often more emotionally distressing than adolescent acne. Persistent breakouts affect self-esteem, social life, and professional image. Skincare can play a vital supportive role alongside medical treatments.

Expert Consensus: 7 Key Points

1. Adult Female Acne is Common & Impactful

Often continues into later life with real psychosocial and professional consequences.

2. Unique Presentation

Typically affects the lower face, with inflammation, few comedones, and minor hormonal imbalances.

3. Long-Term Skin Effects

Scarring, dark spots (PIH), and redness often remain after breakouts heal, contributing to emotional distress.

4. Treatments Can Harm the Barrier

Topical acne meds often worsen dryness, irritation, and water loss (TEWL).

5. Skincare Can Reduce Side Effects

Use fragrance-free, non-comedogenic cleansers and moisturizers daily.

**Aquaxyl (3%) boosts hydration, strengthens the barrier, and reduces irritation without affecting acne treatment results.**

6. Barrier Repair Is Essential

Supporting the skin barrier should be part of every acne regimen-regardless of medication.

7. Better Barrier = Better Outcomes

Healthy skin tolerates treatment better, improving adherence and long-term results.

Evidence for Skincare Support:

12 - Week Clinical Study Highlights

- Acne meds + ceramide skincare vs. meds + basic cleanser
- Results with ceramides:
  - ↓ TEWL and dryness by Week 1
  - ↓ Redness by Week 4
  - ↑ Comfort and tolerability
  - ↑ Acne control unchanged (no efficacy loss)



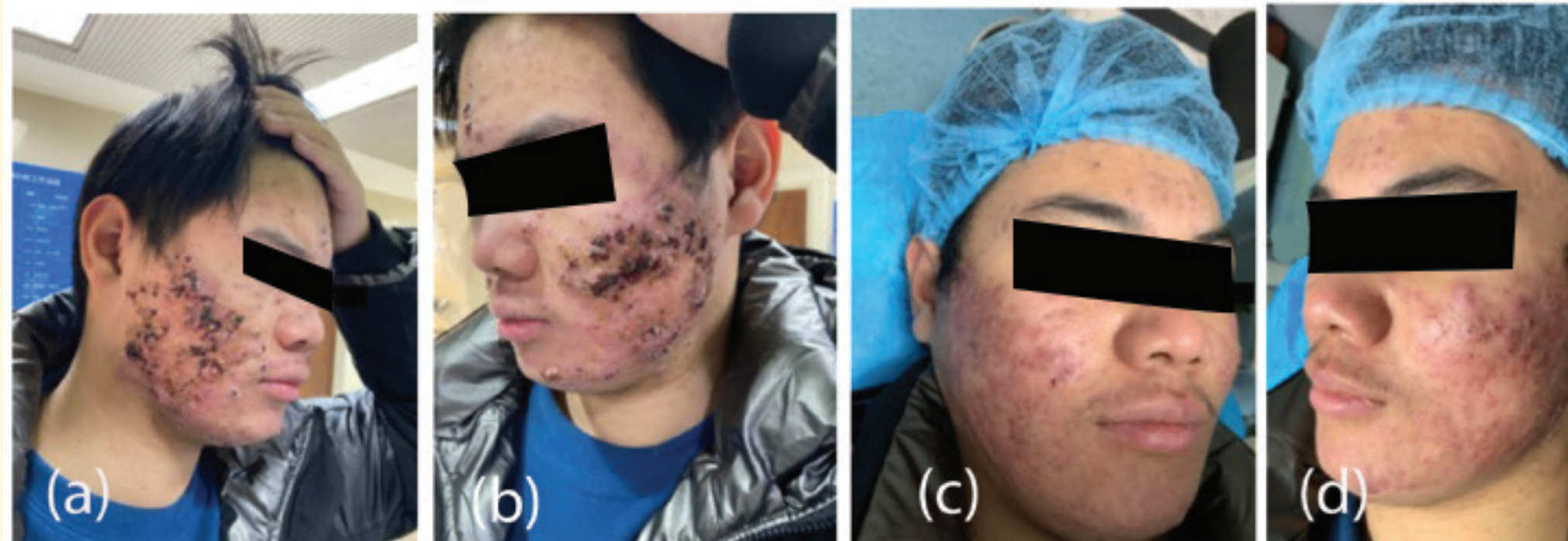
Practical Guidance for Adult Acne Management:

Component	Recommendation
Cleanser	Fragrance-free, non-comedogenic, surfactant-based (1–2x/day)
Moisturizer	<b>Aquaxyl in skincare would be scientifically consistent and practically valuable, especially for patients experiencing treatment-induced dryness or irritation.</b>  Ceramide-containing, non-comedogenic, fragrance-free formula to support barrier restoration.
Sunscreen	Broad-spectrum, gentle mineral or chemical sunscreen to prevent PIH
Medications	Continue standard treatments (e.g., adapalene + BPO) with skincare support
Patient Counseling	Emphasize consistency, realistic expectations, and skin barrier care

**Conclusion:** Adult female acne requires more than just prescriptions. A tailored skincare regimen that protects and repairs the skin barrier improves comfort, adherence, and outcomes-supporting clearer skin and better quality of life.



CASE CHALLENGE



Severe Refractory Acne Vulgaris <sup>4</sup>

Presentation: An 18-year-old male patient presented with recurrent papules and nodules on the face persisting for 2 years. The patient had severe acne and had been treated with doxycycline 100 mg BD orally then isotretinoin 20 mg per day, and topical (Fusidic acid BID, and Tretinoin OD) along with fire acupuncture. Four weeks later, administration of prednisone tablets 25 mg per day for a week and isotretinoin 20 mg OD improved the condition.

The prednisone dose was gradually reduced to 10mg/day for a week and isotretinoin 20 mg/day, but the condition suddenly aggravated. The prednisone dose was increased to 25 mg/day for a week and isotretinoin 20 mg/per day was again administered, but the condition continued to aggravate.

➤ Choose an optimal treatment plan for acne treatment based on evidence-based guidelines.

➤ Provide expert comments explaining the best approach.

References:

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3. Baldwin et al. Challenges in adult acne and role of skin care in managing the condition J Drugs Dermatol.2024; 23 (8):674-679

4. Ping Y, Jian Bo Z, Xing Yun Z, Ali K, Jun C, Xu Lou I and Wu LM(2023) Case report – Acne vulgaris treatment with Aminolaevulinic acid photodynamic therapy and adalimumab: a novel approach. Front Med.2023

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Clears Acne... Restores Confidence

Gentle Daily Cleanser for Oily and Sensitive Skin

Cleanse, Hydrate, Maintains