ACNE, ROSACEA, AND RELATED DISORDERS (INCLUDING HIDRADENITIS SUPPURATIVA)

ULTRA LOW WEEKEND PULSE DOSE OF ISOTRETINOIN IN MODERATE TO SEVERE ACNE

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Introduction: Acne is the most common disorder of pilosebaceous unit. Oral isotretinoin is used in cases of moderate to severe acne in a dose of 0.2-1 mg/kg/day.

Objective: To evaluate the efficacy of an ultra-low dose weekend pulse of isotretinoin combined with topical retinoids compared with 20 mg daily isotretinoin in moderate to severe acne and observe the incidence of adverse reactions.

Materials and methods: 36 patients of moderate to severe acne were randomized into two groups after acquiring a consent. Group A received isotretinoin 20mg daily for 26 weeks and group B received isotretinoin 20mg on weekends combined with topical retinoids applied daily for 26 weeks. Clinical and laboratory evaluation was done at baseline, 2 weeks, 6 weeks, 10 weeks, 18 weeks and 26 weeks. Global acne grading system (GAGS) was used to evaluate the clinical improvement.

Results: 31 patients completed the study and 5 were lost to follow up. At week 2, 6 and 10; patients in group A responded better to therapy with a higher decrease in GAGS scores. However, from week 18 onwards both the groups showed a similar response. The incidence of adverse reactions to oral isotretinoin were much lower in group B. Elevated transaminases & triglyceridemia were the 2 most frequently encountered findings on standard laboratory investigations in group A. No abnormal findings of laboratory investigations were noted in group B. Dryness of skin and oral mucosa was the most common cutaneous adverse effect which was more severe in group A.

Conclusion: Ultra-low weekend pulse dose of isotretinoin is effective in moderate to severe cases of acne when combined with topical retinoids with lower incidence of adverse effects. Laboratory monitoring may not be needed for every case. Higher doses should be restricted for very severe cases only.