



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

## CURRENT STANDARD OF CARE FOR ACNE PATIENTS

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Acne vulgaris is a cutaneous chronic inflammatory disorder with complex pathogenesis. Effective management strategy targets multiple pathogenic factors in acne, using retinoids as the foundation. Although retinoids are considered the base of most effective acne treatment strategies, data suggests that all providers need to emphasize their importance in maintenance therapy of acne and in prevention of acne scarring. Additionally, stronger recommendations to limit antibiotic usage in acne are being made worldwide. Moreover, scientific advances are continually improving the knowledge of acne and contributing to the refinement of treatment options; it is important for clinicians to regularly update their practice patterns to reflect current treatment guidelines. However, there are some gaps from guidelines and daily clinical practice. For example, there are no guidelines for the dermocosmetic management of acne, which however is a very important part of the therapy, especially for managing side effects and improving compliance. There are not specific therapeutic indications in guidelines according to skin phototype. In skin of color, inflammatory lesions can more easily promote the development of post inflammatory hyperpigmentation, scarring, and keloids and a more vigorous treatment of acne is needed to minimize these complications. Moreover, there is a lack of clinical guidelines for truncal acne. Truncal acne is difficult to treat, especially due to the extension of the involved area and the difficulties of application. Other gaps between treatment guidelines and clinical practice are: poor adherence that has been correlated with an inadequate response even to a valid therapy; the use of chemical peels, that are a valuable tool in various clinical forms of acne; the role of light and laser device as a useful therapeutic alternative in resistant form or when pharmacological therapy is contraindicated or ineffective and the use of low-glycemic index diet as support to pharmacological therapy in selected acne patients. For these reasons, to analyse different guidelines is useful for health care practitioners in managing patients with acne, but it's also important to focus on areas where the evidence base may be incomplete or need interpretation for daily practice.

