



ACNE

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Acne is a common skin condition that afflicts most people, to a varying degree, during the teen years. However, the disease is by no means restricted to this age group; adults in their 20's or 30's may have acne. Don't think that because acne is common, treatment is unnecessary. Waiting to "outgrow" acne can be a serious mistake. Medical treatment can improve your appearance and self esteem, and prevent the development of lifelong scars.

The Cause of Acne

Acne is actually caused by a combination of several factors:

1. Rising hormone levels during adolescence cause enlargement and over activity of the oil glands in the skin.
2. The canals that bring this oil to the surface become blocked with keratin (a protein that is part of the skin).
3. When these oil glands are overactive and the canals are blocked, the bacteria that normally live on the skin and in the oil become trapped. They subsequently multiply, and cause inflammation and irritation.

Cleansing and Cosmetics

Even though you may be told to wash frequently, acne is not a disease caused by dirt. For example, the blackness of a blackhead is not dirt, but is due to the accumulation of the normal skin pigment in the oil gland ducts.

Wash your face with a mild antibacterial soap recommended by your dermatologist twice a day. If one's skin is very oily, it may be washed more often. Over washing or scrubbing tends to irritate the skin and will make acne worse. Therefore, do not use any abrasive cleaners or cleansing pads.

Shampooing is also important in acne therapy. The oilier your hair is, the more often you should shampoo it. Also, it is best to keep hair off the face as much as possible to avoid hair oils.

For covering blemishes, many preparations have been formulated to match skin color. These cosmetics should be water based (i.e. the first ingredient on the label should be water). Most cosmetics and skin products that are safe to use on acne-prone skin will say "non-comedogenic", "oil free" or "won't clog pores."

Look for these labels on your facial products. Greasy applications such as Vaseline, cocoa butter, cold cream, and vitamin E oil should be avoided. If the face is dry, your dermatologist can recommend a moisturizer for your type skin.

Diet

The idea that acne can be brought on by an unhealthy diet has been debated for years. For the last 30 years the conventional wisdom has been that diet plays no role in most cases of acne. While many Dermatologists still believe this to be true, another view is emerging. Doctors were surprised to learn that acne is virtually unknown in some remote jungle tribes. These people live off the land without the modern staples of beef, dairy, wheat and sugar. On the other hand, the age when acne first emerges is getting younger for teens in the USA along with the age of puberty.

Could something in the modern diet be the culprit? Some say yes, because eating the wrong things can let loose the wrong kind of hormones. These hormones activate the oil glands in your face. High levels of hormones are present in cows milk, since most dairy cattle are pregnant. The idea that milk is an essential part of everyone's diet is probably wrong. You can easily get your

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calcium, vitamin D and protein from other foods, or from supplements. It may take 6 months off all dairy products before any improvement can be seen, but about 1 in 3 say this helps their acne quite a bit.

Another theory blames sugar and excess carbohydrates. These push your body to pump out insulin, which can throw off other hormones as a result. Some overweight women with acne have hormone imbalances and excess insulin. In these women bringing the insulin level down corrects the hormone levels and acne. While there is no proof sugar and carbohydrates are important in most cases of acne, there is also no doubt sugar and excessive carbohydrates are not good for you. Eating healthy foods is a good idea for acne sufferers.

There are still others who blame particular foods for their acne. Chocolate and nuts are commonly mentioned, but these don't seem to play a role in most people's acne. The importance of diet may vary between individuals, but the idea that diet plays no role in acne is probably on the way out.

Treatment of Acne

Acne need not be feared as something untreatable. In recent years many effective forms of therapy have been developed. Dermatologists want to prevent scars that acne can leave. Years of untreated acne can leave a lifelong imprint on a person's face and can have an effect on his or her self-image. While acne may not be curable, it is usually controllable.

Since acne has many forms, your dermatologist designs an individual approach to care for successful control. Thus, the course of therapy will vary according to such factors as type of acne, its severity and extent, and the patient's day-to-day activities.

Mild acne is treated with one or a combination of topical medications. The purpose of these is not only to treat existing acne lesions, but to prevent new blemishes from forming. Therefore, these are applied over most of your face, not just directly on the present pimples. In addition, in some people these creams may cause the face to become a little dry, pink or feel tight. This is normal. If your face becomes too irritated or 'raw' feeling, **don't** stop the creams, just decrease the frequency of application (i.e. apply every second or third day).

Moderate and severe acne is usually treated by topical medicines with the addition of oral antibiotics. Since different combinations work better for some patients than others, you are usually evaluated every four to six weeks until the acne is well controlled.

In addition to this conventional therapy, your dermatologist may recommend one or more of these treatments to speed healing and clearing of your acne:

Acne Surgery: This procedure greatly speeds acne clearing and appearance by manually removing blackheads and whiteheads. A round loop extractor is used to apply uniform smooth pressure to dislodge the material. Inserting a pointed instrument to carefully expose the contents loosens lesions that offer resistance. This may be combined with microdermabrasion, which helps to remove dead skin on the face and open up smaller blocked pores.

Intralesional Corticosteroid Therapy: If one or several painful acne cysts develop, fast relief is available with this relatively painless procedure. Each cyst is given a single injection of a dilute cortisone solution, using a very tiny needle.

Accutane Therapy: In 1982 a new oral medication, isotretinoin (**Accutane**), became available for the treatment of patients with severe acne not responsive to conventional treatments. The duration of treatment is usually five to six months, and one such

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course is often curative of severe acne forever. Use of this medication does require a thorough understanding of its side effects and precautions (e.g. the prevention of pregnancy).

Treatment of Acne Scarring

Prior to correcting acne scarring, it is generally advisable to wait until acne activity has been low or absent for several months. Scars improve with time as the body softens their appearance. The color contrast is often the most troublesome aspect of resolving large acne blemishes. These lesions may leave a flat or depressed red scar that is so obvious, patients mistake the mark for an active lesion. The color will fade and approach skin tones in 4 to 12 months. Many patients are self-conscious about the pitted and crater like scars that do not fade. These remain as a permanent record of previous severe acne. Your dermatologist may a variety of procedures to you to remove or revise these marks:

Chemical Peel: Superficial acne scarring, and irregular pigmentation of the skin are easily treated with this technique. Chemical agents are applied to the skin, which cause the outer layer to be removed. Different chemicals and concentrations are used, depending on ones skin type and degree of scarring.

Laser Resurfacing: More prominent scarring from acne is best treated by this technique. The top several layers of skin are removed with this high energy light. This action evens out the skin to give it a smoother, more pleasing contour.

Punch Excision and/or Grafting: Some narrow pitted scars are too deep to be removed by dermabrasion. These can be removed with a surgical instrument called a punch. The resulting defect is closed, either primarily or with a tiny skin graft, with gratifying results. Sometimes this procedure is followed by chemical peel or laser resurfacing for patients with a mixed type of scarring.

Collagen Implantation: Patients with a few soft depressed scars with smooth edges respond well to collagen. This natural protein is injected under the lesion to elevate it to the level of the skin.

A Final Word

Treatment of acne is a continuing process if the disorder is to be controlled successfully. You must follow your dermatologist's instructions, since you are the only one who can accomplish the necessary daily care. If you are willing to spend the time and extend the effort, you can expect a pleasing result.

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