http://www.aocd.org

Spironolactone is currently being used in dermatology as an antiandrogen or anti-male hormone therapy for the treatment of acne, diffuse hair loss in females, and hirsutism. This drug has a minor estrogen effect on the scalp, hair, skin and body.

**Acne** improves within 2 to 4 months and skin oiliness decreases. The dose of spironolactone for acne in females is 50 - 150mg a day for at least 1 to 2 years with periodic rest periods, to determine if the drug is still needed.

**Hirsutism** or increased facial and body hair is treated with doses of 100 - 200mg a day for 2 years with minimal rest periods. The first change in the body hair is decreased growth rate, then finer hair and ultimately decreased hair.

The specific actions of spironolactone as an antiandrogen are not well understood. It appears to act at two sites: it blocks androgens at the hair follicle/sebaceous gland and it reduces the secretion of androgens from the adrenal gland. To check the effectiveness of this therapy, the hair growth and/or acne are assessed at 2 to 4 month intervals.

Spironolactone is an antihypertensive drug which does not affect the blood pressure of those with normal blood pressure.

**Contraindications:**
Spironolactone should not be used by pregnant women. The drug should be used only in conjunction with reliable birth control. Spironolactone should also not be used by patients with significant impairment of kidney function.

**Side Effects:**
Mild gastrointestinal upset or headache may occur. **Urticaria** (hives) occur rarely. As a diuretic, spironolactone can increase urination and induce disturbances in fluid and electrolyte balance with increased potassium levels. If potassium levels increase, anticipated symptoms would include cardiac irregularities, leg cramps, dryness of mouth, thirst, lethargy, drowsiness, and headaches. Since spironolactone acts as a mild estrogenic drug, it may in some females who have anovulatory cycles, induce ovulation and possibly fertility.