

Acne Grading System and Treatment Guideline

A full assessment is necessary to grade the severity of the acne, its impact on the individual's life and form an appropriate treatment plan:

History

- Duration of acne.
- Treatments tried and response, including OTC preparations.
- Psychological effects: school/ work/social activities
- Female patients- possibility of pregnancy.

Examination

- Site of acne: face/back/front/shoulders.
- Type of lesions: comedones/papules/pustules/nodules/cysts/scars/hyperpigmentation.
- Number of lesions at each site: few/many/confluent.

Discuss with patient

- Natural history of acne/range of treatment available.
- How to use treatment/ when to expect results.

In all patients: Review regularly and consider changing treatment if no response at 3 months.
Consider stepping up to the next level if treatment fails.

MILD	MILD/ MODERATE	MODERATE	MODERATE/ SEVERE	SEVERE
Comedones only. Localised to face.	Comedones and scattered inflammatory papules. Localised to face.	More widespread inflammatory lesions, affecting face+/-back and chest. No significant scarring.	Numerous inflammatory pustules. Limited scarring may be present. small number of pustules or cysts.	Widespread inflammatory pustules, nodulocystic lesions and often scarring.

<ol style="list-style-type: none"> 1. Topical Retinoid in evening (avoid in pregnancy) 2. Benzoyl peroxide/ Azelaic acid applied in the morning. 3. Combination product of above. 	<ol style="list-style-type: none"> 1. Topical retinoid evening + topical antibiotic morning 2. Topical retinoid + oral antibiotic. <ol style="list-style-type: none"> a. Lymecycline 408mg od/ doxycycline 100mg/day or Oxytetracycline 500mg bd. b. Erythromycin 500mg bd c. Minocycline 100mg od <p>consider Dianette in females if appropriate</p>	<p>Oral antibiotic (as prev) for 6 months with review every 2-3 months</p> <p>Continue topical retinoid/Benzoyl peroxide/ azaleic acid.</p> <p>Consider Dianette in females.</p> <p>Refer if fails to respond to 2 different antibiotics.</p>	<ol style="list-style-type: none"> 1. Consider high dose antibiotic eg Minocycline 100mg bd (check LFT's) or trimethoprim 300mg bd. 2. Continue topical treatment if beneficial. 3. Consider adding Dianette . 4. Discuss referral for oral retinoid. 5. Discuss contraception if female. 	<p>Optimise antibiotic and refer urgently.</p> <p>Discuss future options.</p> <p>Discuss contraception if female patient considering Roaccutane.</p>
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