# DERMATOLOGY



# Acne Related Disorders

DONE BY Meshaal AlOtaibi TEAM LEADER Meshaal AlOtaibi









FROM SLIDES



DOCTOR'S NOTES



TEAM'S NOTES



FROM BOOK



#### Neonatal Acne

First four weeks of life
Develops a few days after birth
Facial papules or pustules
(inflammatory comedones on nos

(inflammatory comedones on nose and cheeks)

Cases that persist beyond 4 weeks or have an onset after R/O acne cosmetic, acne venenata, drug-induced acne

Cause unknown but some believed is due to passing of Transplacental androgen, other suggest due to increased sensitivity of the infant's sebaceous glands to maternal hormones during pregnancy which also leads to a variety of skin conditions in the newborn



# **SAPHO Syndrome**

- Synovitis, Acne, Pustulosis, Hyperostosis, and Osteomyelitis = SAPHO Syndrome
- o Acne fulminans, acne conglobata, pustular psoriasis, and palmoplantar pustulosis
- o Chest wall is most site of musculoskeletal complaints
  - ✓ Nothing specific expect a combination of all these conditions at the same time

# Acne Conglobata

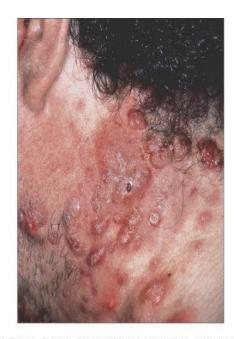
Conglobate: shaped in a rounded mass or ball Occurs most frequently in young men Heals with scarring

Severe form of acne CHARACTERIZED BY:

- large abscesses with sinuses
- grouped inflammatory nodules (found on the chest, the shoulders, the back, the buttocks, the upper arms, the thighs, and the face)
- numerous comedones

#### Suppuration

Cysts on forehead, cheeks, and neck Follicular Occlusion Triad: acne conglobata, hiradenitis suppurva, cellulitis of the scalp



© 2003 Elsevier - Bolognia, Jorizzo and Rapini: Dermatology - www.dermtext.com

#### **Treatment**

- o oral **ISOTRETINOIN** for 5 months
- o systemic STEROIDS if systemic symptoms are evident

#### Acne Fulminans

Rare form of extremely severe cystic acne Teenage boys, chest and back Rapid degeneration of nodules leaving ulceration

Fever, leukocytosis, arthralgias are common

#### Treatment:

a combination of oral steroids and isotretinoin



© 2003 Elsevier - Bolognia, Jorizzo and Rapini: Dermatology - www.dermtext.c)

The primary features of this disease include SUDDEN ONSET, severe and often ulcerating acne, fever, polyarthritis, and failure to respond to antibacterial therapy

# **Tropical Acne**

Nodular, cystic, and pustular lesions on back, buttocks, and thighs Face is spared Young adult military stationed in tropics

✓ Tropical acne arises in tropical climates because of heat, humidity, sun and sweat. Sometimes called summer acne

#### Acne Venenata

CONTACT WITH acnegenic CHEMICALS can produce comedones Chlorinated hydrocarbons, cutting oils, petroleum oil, coal tar Radiation therapy

#### Acne Cosmetica

Closed comedones and papulopustules on the chin and cheeks,

✓ triggered by the use of cosmetics e.g makeup

May take months to clear after stopping cosmetic product Pomade Acne; blacks, males, due to greases or oils applied to hair

When a cosmetic product accumulates within the follicle, the pore becomes blocked. Excess skin oil builds up, clogging the pore and creating an acne .

#### Acne Detergicans

Patients wash face with comedogenic soaps

**Closed comedones** 

TX; wash only once or twice a day with non-comedogenic soap

(Acne patients generally over wash, hoping to moderate the disease by removing oil. Occasionally it is harmful, for some soaps contain comedogenic substances)

#### Acne Aestivalis

Aka; Mallorca acne
Rare, females 25-40 yrs
Starts in spring, resolves by fall
Small papules on cheeks, neck, upper body
Comedones and pustules are sparse or absent
Treatment: retinoic acid, antibiotics don't help

✓ characterized by a rash that mainly affects the trunk and the root of the upper limbs and appears few days after intense EXPOSURE TO THE SUN in these areas. so >>> can be avoided with the use of sunscreens

#### **Excoriated Acne**

Aka; picker's acne

GIRLS, minute or trivial primary lesions are made worse by squeezing

Crusts, scarring, and atrophy

TX; eliminate magnifying mirror, r/o depression

- ✓ When a person spends hours in front of a mirror squeezing and picking at every blemish, the condition is termed "excoriated acne."
- ✓ Usually leads to permanent scarring

# **Acneiform Eruptions**

Originate from skin exposure to various industrial chemicals

Papules and pustules not confined to usual sites of acne vulgaris

Chlorinated hydrocarbons, oils, coal tar

Oral meds; iodides, bromides, lithium, steroids (steroid acne)

✓ Usually lack comedones clinically.

# **Gram Negative Folliculitis**

Occurs in patients treated with ANTIBIOTICS for acne over a long-term Enterobactor, Klebsiella, Proteus

Anterior nares colonized

Tx; isotretinoin, Augmentin

✓ may occur as a complication in patients with acne vulgaris

#### Acne Keloidalis

Folliculitis of the deep levels of the hair follicle that progresses into a perifolliculitis Occurs at nuchal area in blacks or Asian men

Not associated with acne vulgaris

Hypertrophic connective tissue becomes sclerotic, free hairs trapped in the dermis contribute to inflammation

Tx; intralesional Kenalog, surgery

## Hiradenitis Suppurativa

Disease of the apocrine gland

Axillae, groin, buttocks, also areola

Obesity and genetic tendency to acne

Tender red nodules become fluctuant and painful

Rupture, suppuration, formation of sinus tracts

Most frequently axillae of young women

Men usually groin and perianal area

Follicular keratinization with plugging of the apocrine duct; dilation and inflammation

Oral antibiotics, culture S. aureus, gram-negatives

Intralesional steroids, surgery

Isotretinoin helpful in some cases

# Dissecting cellulitis of the scalp

Uncommon suppurative disease

Nodules suppurate and undermine to form sinuses

Scarring and alopecia

Adult black men most common, vertex and occiput

Tx; intralesional steroids, isotretinoin, oral abx, surgical incision and drainage

# Pyoderma Faciale

Post-adolescent girls, reddish cyanotic erythema with abscesses and cysts

Distinguished from acne by absence of comedones, rapid onset, fulminant course and absence of acne on the back and chest

Tx; oral steroids followed by ISOTRETINOIN

# **SUMMARY**

- Acne Conglobata is characterized by \_large abscesses and grouped inflammatory nodules and treated with oral ISOTRETINOIN for 5 months and systemic STEROIDS
- Acne fulminans has sudden onset, severe and often ulcerating acne, fever, polyarthritis, and treated with a combination of oral steroids and isotretinoin
- When a person spends hours in front of a mirror squeezing and picking at every blemish, the condition is termed "excoriated acne."
- o Iodides, bromides, lithium, steroids can aggravate acneiform eruption

# **MCQs**

- 1- A patient has fever & polyarthritis with acne on his trunk:
  - a) Acne conglobata.
  - b) Acne fulminans.
  - c) Acne chemical.
  - d) Acne tropical.
  - e) Acne vulgaris
- 2- Drugs aggravate acneiform eruption:
  - a) Clonidine gold.
  - b) Captopril arsenicals.
  - c) Steroid lithium.
  - d) Beta blockers.
  - e) Thiazid -bismuth..

ANS: