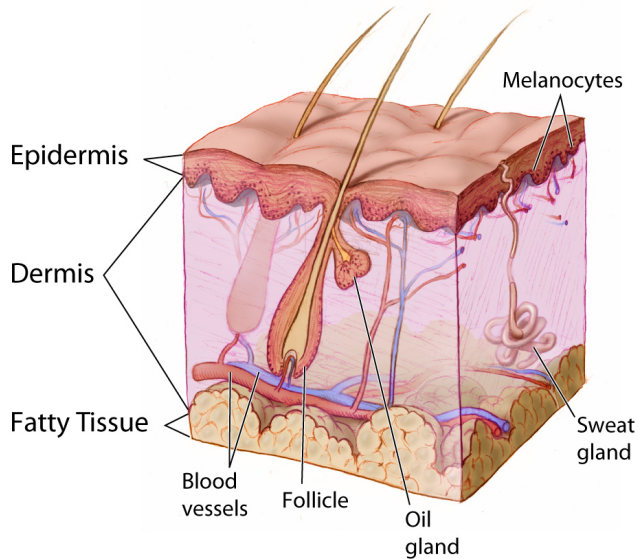


432 Teams

Dermatology



Acne related disorders



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Objectives



The information in
this box from
Fitzpatricks

Neonatal Acne:

First four weeks of life. Develops a few days after birth. Facial papules or pustules (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.

Acne fulminans, acne conglobata, pustular psoriasis, and palmoplantar pustulosis .

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, hidradenitis suppurva, cellulitis of the scalp.



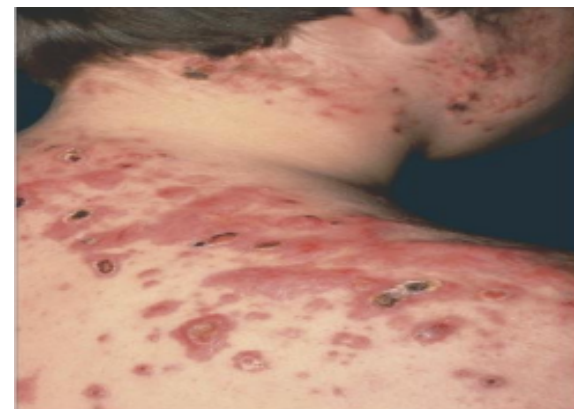
Treatment:

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

Acne conglobate: sever cystic acne with more involvement of the trunk than the face. Coalescing nodules, cyst, abscess, and ulceration .occurs also on buttocks.

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.

The primary features of this disease include **SUDDEN ONSET**, severe and often **ulcerating acne**, **fever**, **polyarthriti**s, 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.

Tropical acne with severe folliculitis, inflammatory nodules, draining cyst on trunk and buttocks in tropical climates. Secondary infection with **staphylococcus aureus**.

Acne Venenata :

- Contact with **acnegenic chemical** 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

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 medications: 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

Enterobacter, 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 (Intralesional steroid injection involves a corticosteroid, such as triamcinolone acetonide or betamethasone suspension, which is injected directly into a lesion on or immediately below the skin).
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.”
- 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 : 1- B
2- C