

Dedicated Care and Enhancement of Skin

whether you need medical, surgical or cosmetic treatment of the skin trust the Consultant Dermatologists at Skin Care Network®



Acne is a very common skin condition that affects the majority of people at some point in their lives. For most, this will be during puberty (early teens): between the ages of 14 and 17 in girls, and 16 and 19 in boys. However, for five per cent of women and one per cent of men acne will continue after the age of 25.

It is characterised by spots, which range from comedones (blackheads and whiteheads) which are often mild, to pus-filled spots (pustules) and cysts which may be severe. Most adolescents will have a few spots on the face, neck, back and chest, but for some it will cause more significant problems that lead to scarring and a loss of self-confidence.

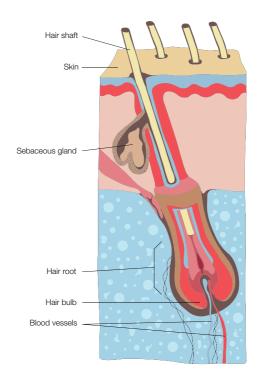
Pharmacists and GPs can provide excellent advice and treatment for mild acne. However, if it is more persistent or severe, then we recommend you make an early appointment to see one of our Consultant Dermatologists at Skin Care Network®. With good dermatological care acne can be controlled and long term permanent scarring prevented. We understand the emotional distress such skin conditions can cause, especially in adolescence, and we offer supportive as well as medical care.

This leaflet will help you understand more about acne: its causes, what can be done about it and the treatments we offer.

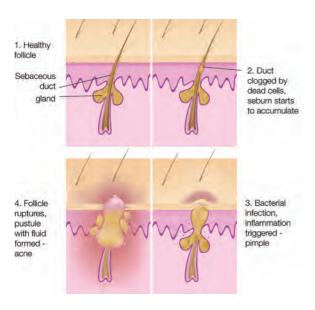
what causes acne?

Our skin has tiny grease glands called sebaceous glands near its surface. These glands are attached to hair follicles, small holes in our skin out of which single hairs grow. The sebaceous glands lubricate the hair and stop the skin drying out by producing an oily substance called sebum.

Grease production by the skin is controlled by the levels of male sex hormone testosterone, which is present in both men and women. In individuals with acne the levels of testosterone are either elevated or the sebaceous glands of people are overly sensitive to normal blood levels of testosterone. These cause the glands to produce an excess of oil.



The excess sebum mixes with dead skin cells and both substances form a plug in the follicle. If the plugged follicle is closed to the surface of the skin, it will bulge outwards, creating a whitehead. Alternatively, the plugged follicle can be open to the skin, creating a blackhead.



Formation of skin pimples and acne

In people prone to acne, the ideal environment is created for comedones to become contaminated and infected by normally harmless bacteria (known as Propionibacterium acnes) that live on the skin, causing papules, pustules, nodules or cysts.

Acne is known to run in families. If both your parents had acne, it is likely that you will also have acne. If one or both of your parents had adult acne, you are more likely to get adult acne too. Hormonal changes, such as those that occur during the menstrual cycle or pregnancy, can also lead to episodes of acne in women.

causes of acne

In mild acne

- The higher levels of sex hormones that occur at puberty are converted in the skin to the male sex hormone (dihydrotestosterone-DHT), which stimulates sebaceous glands to enlarge
- These sebaceous glands produce sebum and the more sebum, the more problems are likely to arise from acne
- If sebum and keratin (dead skin cells) block the skin pores, comedones can develop and the wall of the follicles may rupture
- Bacteria and comedonal debris cause acne pimples or pustules (inflammatory lesions)

In severe acne

- There are genetic factors: family members have bad acne
- Hormonal factors: higher levels of androgenic hormones, due to:
 - Polycystic ovaries (common)
 - Oral androgens (eg body building, medication)
 - Inherited genetic problems such an enzyme deficiencies (very rare)
 - Oral steroids prescribed by doctor (rare)
 - Psychological stress and depression
- Environmental factors such as:
 - High humidity, causing swelling of the skin
 - Cosmetics, especially concealers, moisturisers, foundation and pomades (watch out for lanolin, petrolatum, vegetable oils, butyl stearate, lauryl alcohol and oleic acid)
 - Petroleum oils and hair gels and oils
 - Pressure from headbands and chin straps
 - Dietary factors, such as excessive dairy products (although this is disputed). Research has shown a low glycaemic diet can benefit
- Certain medications

There is no evidence that diet, poor hygiene or sexual activity play a role in acne.

types of spots

Acne causes skin lesions (damaged tissue) that are commonly referred to as spots.



There are six main types of spot caused by acne:

- Blackheads are small black or yellowish bumps that develop on the skin
- Whiteheads have a similar appearance to blackheads but they can be firmer with a white centre, and do not open onto the surface of the skin
- Papules are small red bumps that may feel tender or sore
- Pustules are similar to papules but have a white tip in the centre that is caused by a build-up of pus
- Nodules are large hard lumps that build up beneath the surface of the skin and are often painful
- Cysts are the most serious type of spot caused by acne.
 They are large, pus-filled lumps that look similar to boils

The last two are common in severe acne and carry the greatest risk of scarring if they are not properly treated.

Acne is easily recognised by the appearance of the spots and by their distribution on the face, neck, chest or back. However, there are different types of acne and we will be able to tell you which type you have after examining your skin. The most common type is 'acne vulgaris'.

The severity of your acne is determined by the number of spots you have and how painful and inflamed they are. This is important in planning your treatment.

There are four grades commonly used to measure the severity of acne:

- Grade 1 (mild) acne is mostly confined to whiteheads and blackheads with just a few papules and pustules
- Grade 2 (moderate) there are multiple papules and pustules which are mostly confined to the face
- Grade 3 (moderately severe) there is a large number of papules and pustules as well as the occasional inflamed nodule. The back and the chest are often affected by acne
- Grade 4 (severe) there is a large number of large painful pustules and nodules



your treatment plan

If you just have a few comedones your Dermatologist from Skin Care Network should be able to treat them successfully with gels or creams (topical treatments) that contain benzoyl peroxide (see below).

some self-help techniques

- Do not wash affected areas of skin more than twice a day. Frequent washing can irritate the skin and make symptoms worse
- Wash with a mild soap or cleanser and lukewarm water. Very hot or cold water can make acne worse
- Don't try to clean out blackheads or squeeze spots. This can rupture the follicle into the skin and make the spot worse and cause permanent scarring
- Avoid using too much make-up and cosmetics. Use waterbased products that are described as oil-free, or noncomedogenic (less likely to block the pores in your skin)
- Completely remove make-up before going to bed
- If dry skin is a problem, use a fragrance-free, water-based non-comedogenic makeup and emollients
- Regular exercise cannot improve your acne but it is good for your general fitness. Shower as soon as possible once you finish exercising as sweat can worsen your acne
- Regularly wash your hair and try to avoid letting your hair fall across your face

Treatments can take two to three months to work, so don't expect overnight results.

treating acne

If your acne is severe or does not respond to over-the-counter products then we can help you. We offer an initial consultation where we will discuss your condition and your lifestyle with you. Once a diagnosis is made we will build a holistic treatment plan for you. This will consist of one or more of the following:

- Topical treatments applied directly to the skin
- Antibiotics tablets taken by mouth
- Oral contraceptive pills
- lsotretinoin capsules
- Laser and light based therapies
- Chemical peels and microdermabrassion
- Treatment for acne scarring

Topical treatments

Creams or gels are usually the first choice for those with mild to moderate acne. There are a variety of active anti-acne agents, such as benzoyl peroxide, antibiotics (erythromycin, tetracycline and clindamycin), retinoids (such as tretinoin, Isotretinoin and adapalene), azelaic acid and nicotinamide. They should be applied to the entire affected area of the skin, usually every night or twice daily. Consult your doctor or come to see us if they cause irritation of the skin.

Oral antibiotic treatment

Your doctor may recommend a course of antibiotic tablets, usually erythromycin or a type of tetracycline, which should be taken in combination with suitable topical treatment. Antibiotics need to be taken for a minimum of two months, and are usually continued for at least 6 months and the antibiotics rotated to prevent antibiotic resistance developing.

Chemical peels and Microdermabrassion

At Skin Care Network we offer superficial chemical peels, which are particularly effective in reducing the comedones in acne and improving the quality and texture of the skin. We apply a chemical solution to the skin which causes the top layers of skin to separate and peel off. By removing the superficial skin, a peel leaves your skin smoother with less comedones and fewer new acne lesions. This is left on for a few minutes and then washed

off and neutralised. Peels not only remove the superficial layers of skin but also excite deeper collagen producing cells to form newer, healthier collagen which leads to rejuvenation from inside out thus help minimise scarring.

Pulsed Dye Laser treatment (PDL)

We use the Pulsed Dye 585nm Laser. It gets its name from the use of a liquid dye as the lasing media. It is designed to deliver short bursts of light that last only a fraction of a second and they effectively remove birthmarks and other red blemishes on the skin. Low power PDLs is used to improve the appearance of acne scarring in three ways: by killing the bacteria which cause the condition; secondly, by stimulating new collagen growth thus improving scarring; and thirdly, by causing selective damage to the sebaceous gland, thus reducing sebum (grease) production in the skin.

When used to treat acne the PDL is usually administered by your Dermatologist or Dermatology nurse monthly. It can be used alone or in combination with chemical peels to reduce the comedones that cause the acne and as well helping with the acne scarring.

Oral contraceptive treatments

Some types of oral contraceptive pills help women with acne, as a side effect of birth control. The most effective contain a hormone blocker (for example, cyproterone found in Dianette) which reduces the amount of oil the skin produces. It usually takes at least three to four months for the benefits to show.

Isotretinoin

This powerful and effective treatment has the potential to cause a number of serious side effects and can be prescribed only by a Dermatologist. Isotretinoin can harm an unborn child so it is essential that women enrol in a pregnancy prevention programme. You must have a negative pregnancy test prior to starting treatment; pregnancy tests will be repeated every month during treatment and five weeks after completing the course of treatment. Effective contraception must be used while on treatment, and for four weeks afterwards.

There are concerns that Isotretinoin may cause depression and suicidal feelings. Details about any personal and family history of mental illness will be discussed with you prior to considering treatment with Isotretinoin. Most courses of Isotretinoin last for four months during which time the skin may become red and dry. Often, initially the acne may become a little worse before improvement occurs.

Despite the above concerns, many thousands of people have benefited from treatment with Isotretinoin without serious side effects

Photodynamic Therapy (PDT)

PDT can be effective in patients in certain circumstances:

- Those with recalcitrant acne, in whom Roaccutane is contraindicated or ineffective
- Those with inflammatory acne, including papular, pustular and nodular acne
- Those with nodulo-cystic acne that has failed to respond to other treatments

PDT usually requires between two and five treatments, two to four weeks apart.

The treatment is painful and patients will need to avoid sunlight for 36 hours. Your skin will go bright red and peel, so the treatment is more suitable for young adults than teenagers. People with Mediterranean or Asian skin types will get some post inflammatory hyper-pigmentation lasting three months. While effective, PDT is expensive treatment and requires significant recovery time. However, we think these are a small price to pay for the improved quality of life.

Severe acne can result in scarring when the most serious types of spots – nodules and cysts – burst and damage nearby skin. Scarring can also result from picking or squeezing your spots, so it is important not to do this.

acne scarring

There are three main types of acne scars:

- ice pick scars: the skin looks like it has been punctured with a sharp object
- rolling scars: the surface of the skin has a rolling and uneven appearance caused by bands of scar tissue formed underneath
- boxcar scars: round or oval depressions, or craters, in the skin

treating scarring

Radiofrequency

State of the art radiofrequency rejuvenation

The Fractionated Radiofrequency (FRF) is a non-laser, non-light fractional device. Its energy source is radiofrequency, which effectively delivers a safe amount of heat energy to your skin. Its advantage is that it can dramatically improve your skin tone, wrinkles and scars in less time than traditional treatments. There is an increase in new collagen formation, skin tightening and overall rejuvenation.

A full-face can be completed in approximately 15 to 20 minutes. During treatment you will feel a warm, prickly sensation as energy enters your skin. A pink or red sunburn appearance is common afterwards. Topical anaesthetic ointments and cooling are used to reduce any discomfort during treatment and this subsides within a few hours. There is little downtime with the FRF: by the following day you can wear make-up.

Normally we would recommend one to three sessions at four to six week intervals, but acne scarring may need more. Results will usually start to show after four weeks. We will discuss this with you as part of your holistic treatment plan.

See our leaflets on Facial Rejuvenation and Chemical Peels for further information on these treatments.

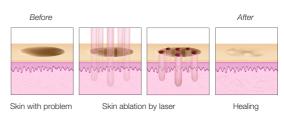
UltraPulse Encore Active Fx and Deep Fx

Active Fx is a major advance in the treatment of acne scarring. The Encore uses a CO_2 laser in three different modes to produce precise resurfacing of the skin resulting in smoother skin with a more even colour. CO_2 laser resurfacing has become the gold standard for the treatment of acne scarring giving excellent results for many years.



By using the latest fractional resurfacing techniques the skin heals much quicker than before, resulting in an excellent safety profile. To ensure the best possible healing we will give you a care sheet which details the pre-procedure care and after care recommended. Treatment takes one hour.

Post treatment you can expect some redness and pinpoint scabs which usually last three to five days.



Fractional laser skin resurfacing

The **Deep Fx**, as its name suggests, targets the deeper supporting structures which have been damaged by many years of sun exposure. It reaches deep within the scars to produce a pronounced skin elevation and smoothing of the skin texture. Optimal results can be achieved with one to three sessions.

With the Deep Fx there is some immediate bleeding, crusting and swelling which lasts for two to four days. Redness will disappear within a week although the skin may be pink for longer. This can easily be covered with a little make-up. Most people will return to work in four to six days.

The **Total Fx** is a combination of both Active FX and Deep FX performed on the same day. It helps with both superficial and deeper skin scarring. Post treatment there is some pinpoint bleeding, redness and swelling. The scabs peel off about a week later.

Typical treatment is one to three sessions, four to six weeks apart. The total number of treatment sessions you need will depend on the severity of scarring.

Punch techniques

We offer punch techniques to treat acne scarring. There are three types:

- Punch excision is used to treat mild ice pick scars. The scar is surgically removed and the remaining wound is sealed. After the wound heals, it will leave a smoother and more even area of skin.
- Punch elevation is used to treat boxcar scars. The base of the scar is surgically removed leaving the sides of the scar in place. The base is then reattached to the sides but lifted up so that it is level with the surface of the skin. This makes the scar more even and much less noticeable.
- Punch grafting is used to treat very deep ice pick scars. As with a punch excision, the scar is removed, but the wound is then plugged with a sample of skin that is taken from elsewhere on the body (usually from the back of the ear).

Subcision

Subcision is a surgical treatment that we offer to treat rolling scars. The upper layer of the skin is removed from the underlying scar tissue, which allows new collagen to form under the affected area. This new collagen helps form connective tissue that pushes up the rolling scar so that it is level with the rest of the surface of the skin.

Once subscision has been completed, we may suggest additional treatment such as fractionated ${\rm CO_2}$ laser treatment and fractionated radiofrequency devices. These can be used to further improve the appearance of the scar.

why choose us?

Skin Care Network® is a group of specialists who diagnose and treat problems of the skin, hair, mouth and nails. Our clients range from infants to the elderly. Using the latest medical and surgical solutions we pride ourselves on delivering the best results for our patients with the utmost care and support.

Whether you need medical or cosmetic treatment you will be seen by a team of Consultant Dermatologists and Dermatology Nurses. We do not employ beauticians or aestheticians. Our experts have completed UK training and they continue their professional development on an ongoing basis with training in the most current treatments and techniques.

We have invested in the most modern and effective laser equipment. At the Skin Care Network we are committed to recommending only those treatments that have proven clinical benefits.

Our promise to you is treatment from experienced professionals you can trust.

Skin Care Network is registered with the Care Quality Commission for the provision of services for private medical and surgical dermatological practice, including skin cancer treatment.

referrals

You can come to us with or without a referral from your GP. If your treatment is covered by medical insurance you will need a referral from your GP.



you can find us



By road

Easily accessible from the M25 (Junction 23), following the A1081 towards Barnet. Pay & Display car parks are indicated on the map and Pay & Display parking bays are also available on local roads.

By underground

High Barnet Station, London Underground, Northern Line then head northeast towards Barnet Hill by turning right and continue along the A1000.

private dermatology appointments

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