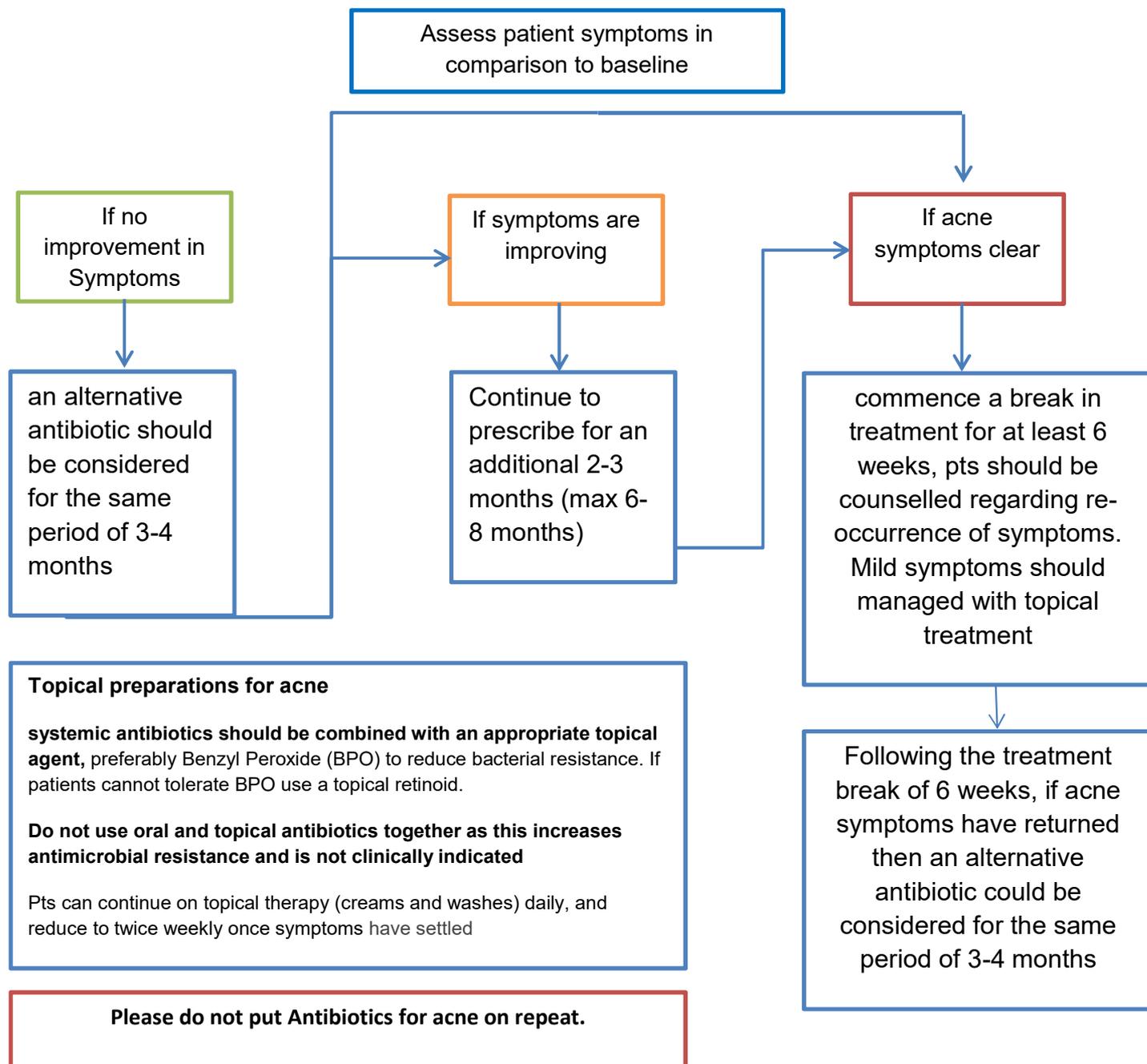


Review of patients (12yrs+) who have been prescribed their first course of Oral antibiotic treatment for acne for 4 months or longer



Referral criteria

if AB options are exhausted or if Acne is - severe, cystic, causing scarring or severe emotional distress consider referral to Dermatology for potential initiation of Isotretinoin (Roaccutane) if suitable

Patients that have undergone 6 - 8 months of acne treatment with GP with little or no results may also warrant a referral to dermatology.

Treatment Choices

Topical treatments

Benzoyl peroxide 5% Gel with antimicrobials	Acnecide - £5.44 x 30g, £10.68 x 60g	
	Benzoyl peroxide 5%, clindamycin 1% gel (Duac® Once Daily) - £13.14 x 30g	
Azelaic acid	Azelaic acid 20% cream (Skinoren®) - £7.48	
Topical retinoids and related preparations for acne	Adapalene 0.1% cream or gel (Differin®) - £16.43	Topical retinoids are contraindicated in pregnancy
with benzoyl peroxide with antimicrobials	Adapalene 0.1%, benzoyl peroxide 2.5% gel (Epiduo®) £19.53	
	Tretinoin 0.025%, clindamycin 1% gel (Treclin®)	£11.94 x 30g
Topical antibacterials for acne	Clindamycin 1% topical solution (Dalacin T®) - £4.34 Erythromycin 40mg with zinc acetate 12mg/mL topical solution (Zineryt®) £9.25 x 30ml	Use non-antibiotic antimicrobials (such as benzoyl peroxide or azelaic acid) to avoid development of resistance to erythromycin and clindamycin

Choices for Oral antibacterials for acne

Lymecycline 408mg capsules – Once Daily

Doxycycline 100mg capsules – Once Daily

Oxytetracycline 250mg tablets – 500mg Twice Daily - *(please note bacterial resistance is greater with first generation tetracyclines)*

Erythromycin 250mg tablets – 500mg Twice Daily – *(please note macrolides should generally be avoided due to high levels of P.acnes resistance, but they are first line in pregnancy and in children under the age of 12 years (in both groups tetracyclines are contraindicated))*

Letter to pt to initiate 6 week break from antibiotic treatment

Dear Patient

As part of a review in line with national guidance and Heywood, Middleton and Rochdale's dermatology service we have identified that you have been taking an oral antibiotic to treat Acne for longer than the recommended length of time with no review or break in treatment.

We recommend that if patients are clear from symptoms they should have a break of at least 6 weeks following their course of antibiotic treatment.

The reason for this is because clinical evidence tells us that there is little benefit from taking antibiotics longer than the course length recommended and prolonged use increases the risk of antibiotic resistance.

With this in mind your prescription forhas been removed from your repeat medication.

During this time you may experience some symptoms of acne we would recommend that you continue to use topical treatments (cream/ointment that you apply directly to the skin)

Following your six week treatment break we can re-assess your acne and your treatment options if required.

Yours Sincerely

The Practice

Information for patients re: Initiation of Antibiotic therapy for acne

Dear patient

Following your consultation today you have been initiated onto antibiotic therapy for the treatment of your acne.

The purpose of this letter is to re-iterate the information given to you from your health care professional so you should have a good idea about what to expect from your treatment.

Antibiotics for acne treatment are recommended as a treatment option for patients with moderate acne which can present as comedones (blackheads and whiteheads) and pus-filled spots (pustules)

Antibiotics are used in acne to treat inflammation (not infection) They are initially advised to be taken for a period of around 4 months. They have little benefit being used in long periods because they can increase the risk of antibiotic resistance – (this means that they will no longer work)

After completing your treatment and your acne symptoms have cleared you will need to stop taking the antibiotics for a period of at least 6 weeks. This is because the prolonged use of antibiotics is not recommended.

Topical therapy (creams/ointments you apply directly to the skin) that do not contain antibiotic can be used alongside your treatment and afterwards.

If you have any questions or queries please contact the practice

Yours sincerely

The practice

References:

<http://www.pcds.org.uk/clinical-guidance/acne-vulgaris>, <http://gmmmg.nhs.uk/docs/formulary/ch/Ch13-complete.pdf>,
<http://www.bad.org.uk/for-the-public/patient-information-leaflets>, NHSBSA Drug Tariff – July 19