



Acne referral guidelines

November 2021

Record any detail on

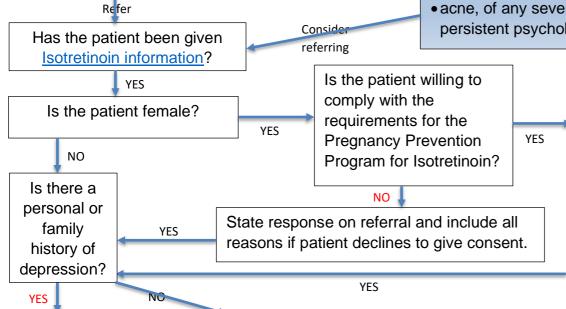
referral

(See here for examples of skin conditions)



Refer as URGENT people with <u>acne fulminans</u> on the same day to the on-call hospital dermatology team, to be assessed within 24 hours.

- Acne that has inadequately responded to at least twelve weeks of oral tetracycline (lymecycline or doxycycline) plus topical acne treatment (Epiduo, Treclin, Adapalene, or Duac
- Severe acne (> 5 nodules and cysts with scarring OR
- >125 lesions (comdeones/inflammatory papules / cysts /nodules)
- Mild to moderate Acne that has not responded to 2 completed courses of treatment (see table on treatment choices for mild to moderate and moderate to severe acne vulgaris)
- Moderate to severe Acne which has not responded to previous treatment which contains an oral antibiotic (see table on treatment choices for mild to moderate and moderate to severe acne vulgaris)
- Acne with scarring
- Acne with persistent pigmentary changes.
- acne, of any severity, or acne-related scarring, is causing or contributing to persistent psychological distress or a mental health disorder



Ensure fasting lipids (including triglycerides) and

liver function profile within the last 3/12

Isotretinoin Pregnancy Prevention Program

- Ensure patient is established on contraception (oral, coil or implant) for at least one month.
- Record method of contraception on referral
- Female patients must use *TWO forms of contraception* (e.g. condoms plus OCP) and attend the clinic monthly for urinary pregnancy tests throughout treatment.

NB unopposed progesterone may exacerbate acne and make it more difficult to treat

Refer to consultant dermatologist-led team