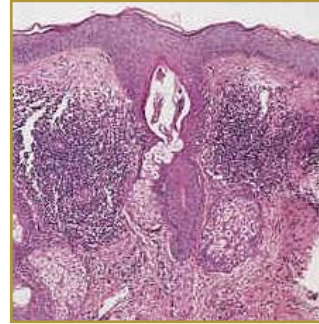


ACNE VULGARIS



EPIDEMIOLOGY: Affects nearly 85-100% of the population at some point in life

ETIOLOGY: Obstructed pilosebaceous units with plugs of sebum and desquamated keratinocytes

PATHOGENESIS: Four key factors are responsible: follicular epidermal hyperproliferation with subsequent plugging of the follicle, excess sebum, the presence and activity of *Propionibacterium acnes*, and inflammation.

CLINICAL: Noninflammatory follicular papules or comedones and by inflammatory papules, pustules, and nodules in its more severe forms

HISTOLOGY: Dilated follicle with a plug of loosely arranged keratin

ACNE VULGARIS is also known as common acne, pimples, spots, or zits. This common skin disease affects 85% - 100% of people at some point of their lives. Acne Vulgaris can lead to physical pain and scarring as well as psychosocial suffering. Comedones, papules, pustules, and nodules in a sebaceous distribution characterize acne. A comedone is a whitehead (closed comedone) or a blackhead (open comedone) without any clinical signs of inflammation. Papules and pustules are raised bumps with obvious inflammation. Although it is usually located on the face, acne may also involve the chest, back, upper arms. Treatment should be directed toward the known pathogenic factors involved. The grade and the severity of the acne help in determining which of the following treatments alone or in combination are most appropriate. The treatments available include Topical (apply to affected area) or Systemic (affects cells in body).

BIBLIOGRAPHY

1. "Acne Vulgaris" (Online) January, 2007. <http://www.emedicine.com/derm/TOPIC2.HTM> (visited: March 12, 2008)