

NICE Acne guideline visual summary



Managing acne vulgaris

Throughout the infographics and guideline, 'acne' refers to 'acne vulgaris' unless otherwise stated.

Offer a 12-week course of one the following first-line treatment options, taking account of the severity of their acne and the person's preferences, and after a discussion of the advantages and disadvantages of each option.

First line treatment options	Form	Acne severity	Advantages	Disadvantages	Use in pregnancy
Fixed combination of topical adapalene with topical benzoyl peroxide	once daily in the evening	Any severity	<ul style="list-style-type: none"> Topical Does not contain antibiotics 	<ul style="list-style-type: none"> Can cause skin irritation, photosensitivity, and bleaching of hair and fabrics 	
Fixed combination of topical tretinoin with topical clindamycin	once daily in the evening	Any severity	<ul style="list-style-type: none"> Topical 	<ul style="list-style-type: none"> Can cause skin irritation and photosensitivity 	
Fixed combination of topical benzoyl peroxide with topical clindamycin	once daily in the evening	Mild to Moderate	<ul style="list-style-type: none"> Topical 	<ul style="list-style-type: none"> Can cause skin irritation, photosensitivity, and bleaching of hair and fabrics 	with caution
Fixed combination of topical adapalene with topical benzoyl peroxide, plus either oral lymecycline or oral doxycycline taken once daily	once daily in the evening once daily	Moderate to Severe	<ul style="list-style-type: none"> Oral component may be effective in treating affected areas that are difficult to reach with topical treatment (such as the back) 	<ul style="list-style-type: none"> Topical adapalene and topical benzoyl peroxide can cause skin irritation, photosensitivity, and bleaching (topical benzoyl peroxide) of hair and fabrics 	
Topical azelaic acid applied twice daily, plus either oral lymecycline or oral doxycycline taken once daily	once daily in the evening once daily	Moderate to Severe	<ul style="list-style-type: none"> Treatment with adequate courses of standard therapy with systemic antibiotics and topical therapy is a MHRA requirement for subsequent oral isotretinoin 	<ul style="list-style-type: none"> Oral antibiotics may cause systemic side effects and antimicrobial resistance Oral tetracyclines can cause photosensitivity 	
Topical benzoyl peroxide*	once daily in the evening	Any severity	<ul style="list-style-type: none"> Topical Does not contain topical retinoid or antibiotic Available over the counter 	<ul style="list-style-type: none"> Can cause skin irritation, photosensitivity, and bleaching of hair and fabrics 	with caution

*consider if above treatments options are contraindicated or person preference

Referral to specialist care

Urgently refer people with acne fulminans on the same day to the on-call hospital dermatology team, to be assessed within 24 hours.

Refer people to a consultant dermatologist-led team if any of the following apply:

- Diagnostic uncertainty
- Conglobate acne
- Nodulo-cystic acne

Consider referring people to a consultant dermatologist-led team if they have:

- mild to moderate acne that has not responded to 2 completed courses of treatment
- moderate to severe acne which has not responded to previous treatment which contains an oral antibiotic
- acne with scarring
- acne with persistent pigmentary changes
- acne or acne-related scarring causing or contributing to persistent psychological distress or a mental health disorder

Consider referral to mental health services if a person with acne experiences significant psychological distress or a mental health disorder, including those with a current or past history of:

- suicidal ideation or self-harm
- a severe depressive or anxiety disorder
- body dysmorphic disorder

Consider condition-specific management or referral to a specialist (for example a reproductive endocrinologist), if a medical disorder or medication (including self-administered anabolic steroids) is likely to be contributing to a person's acne.

12 week review

	Acne has completely cleared	Consider maintenance options
	Acne has improved but not cleared	Continue with treatment including oral antibiotics; for up to 12 more weeks.
	If acne failed to respond to 12-week course of treatment:	
	Mild to moderate acne	Offer another option from first-line treatment options
	Moderate to severe acne	If option did not include oral antibiotic, offer another option that includes an oral antibiotic If option included oral antibiotic, consider referral to consultant dermatologist-led team

Maintenance options

Appropriate skincare

Consider in people with a history of frequent relapse after treatment

Fixed combination of topical adapalene with topical benzoyl peroxide

*if fixed combination is not tolerated or contraindicated.

Topical adapalene *

Topical azelaic acid *

Topical benzoyl peroxide *

Skin care advice

Advise people with acne to use a non-alkaline (skin pH neutral or slightly acidic) synthetic detergent (syndet) cleansing product twice daily on acne-prone skin.

Advise people that persistent picking or scratching of acne lesions can increase the risk of scarring.

Advise people with acne who use skincare products (for example, moisturisers) and sunscreens to avoid oil-based and comedogenic preparations.

Advise people with acne who use make-up that they should avoid oil-based and comedogenic products, and they should remove make-up at the end of the day.

Relapse

Acne with previous adequate response to a first-line option

- 12-week course of the same treatment, or
- an alternative 12-week treatment from first-line options

Acne with previous adequate response to oral isotretinoin

Mild to moderate

- 12-week course of an appropriate first-line treatment options

Moderate to severe

- 12-week course of an appropriate first-line treatment option, or
- re-referral, if the person is no longer under the care of the consultant dermatologist-led team

Additional management options in specialist care

Please see full NICE guideline for recommendations on oral isotretinoin treatment, use of oral corticosteroids in addition to oral isotretinoin and use of intralesional corticosteroids

Physical Treatments

Consider photodynamic therapy for people aged 18 and over with moderate to severe acne if other treatments are ineffective, not tolerated or contraindicated.

Acne related scarring

If a person's acne-related scarring is severe and persists a year after their acne has cleared:

- Refer the person to a consultant dermatologist-led team with expertise in scarring management
- In a consultant dermatologist-led team setting, consider CO2 laser treatment (alone or after a session of punch elevation) or glycolic acid peel.

