We understand that your child is suffering with acne and that you are concerned.

- You are taking the right action by bringing your child to the doctor.
- Your Primary Care Provider can treat Acne and provides care based on best practices of Rady Children's Dermatologists.

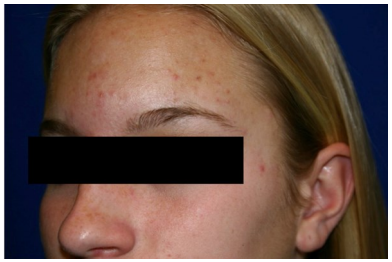
Acne Management Guidelines were created by Rady Children's Specialists of San Diego Dermatologists

- Your Primary Care Provider is using these Guidelines to treat mild to moderate acne.
- The Dermatologists created Acne Guidelines to make care consistent across all doctor's offices. **This is the exact same treatment and information that you would get if you went to a Dermatologist,** without the wait and extra cost of another appointment.
- If your child now, or at another point meets the symptoms to see a Dermatologist, they will be referred.

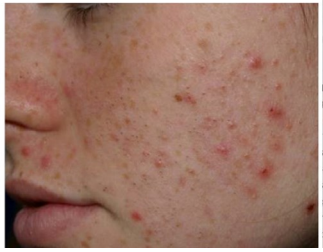
Different Types of Acne

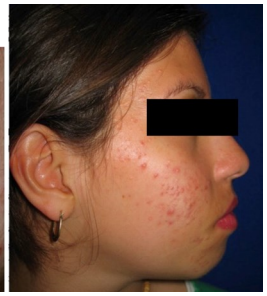
(Mild, Moderate and Severe Acne will initially be treated by your Primary Care Provider)

Mild Acne

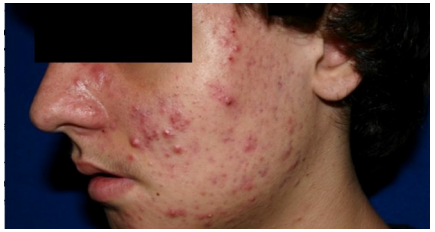


Moderate Acne



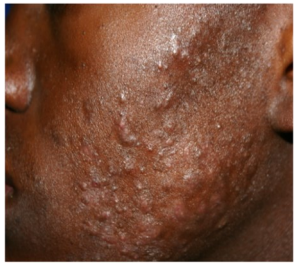


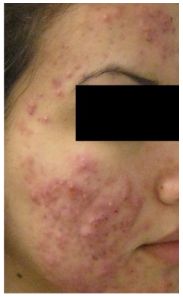
Severe Acne



Nodulocystic Acne

(Treated by a Dermatologists)





UNDERSTANDING YOUR CHILD'S ACNE TREATMENT

This handout was created in partnership with your Primary Care Provider and the Rady Children's Dermatology Department to help guide you through your child's acne treatment with your Primary Care Provider.

Acne Management Tips

There are specific directions for applying acne medications:

- Use medication over the whole face, not just on acne spots.
- Use a "pea-sized" amount of topical medication for the entire face.
- Apply several small dollops to the forehead, chin, nose, and each cheek, then the medication should be gently massaged into the entire face.

Does it seem like your acne is getting worse, even though you've been using your medication!?

- Most forms of topical therapy can lead to redness, drying and irritation that may be confused with "worsening" acne. This usually happens within 2 weeks of starting a topical medication and is an expected reaction.

Examples of Over the Counter Benzoyl Peroxides

- Many patients will find that they can avoid excessive irritation by starting to apply topical medications "every other day," increasing to "daily" as tolerated. Also, adding a moisturizer daily can help with irritation and dryness

Prescription Costs

- Every insurance company covers different medications, and these can change without notice.
- If, when you go to the pharmacy, either you are told the medication is not covered, or there is a very high co-pay, contact your doctor. There may be another option which is covered or available with a lower co-pay.

All patients are encouraged to use skin moisturizers and sun protection while on acne treatment.

- Moisturizers should be "non-comedogenic" (meaning they will not clog pores or worsen acne).
- Sunscreen should be at least SFP 30.
- Sunscreen-moisturizer "combination" products are particularly helpful choices for busy teenagers! Examples are: Neutrogena Daily Defense SPF 50; Cetaphil Daily Facial Moisturizer SPF 50+; and CeraVe AM Facial Moisturizing Lotion SPF 30.

Did You Know?

Your Pediatrician will consider a referral to Dermatology if your child:

- Has significant acne before the age of 9.
- Does not have satisfactory improvement after 12 weeks of regular therapy.
- Has scar-inducing cysts or nodules present or scarring is actively occurring despite treatment.
- Has excessive body hair, bald spots, dark skin on his or her neck, or an irregular period in addition to acne.

Topical therapies typically take 6-8 weeks to start seeing results.

This is necessary because of the time it takes "for the skin to grow out" and show

Your child is not alone. 80% of people will have acne during adolescence, making it one of the most common conditions seen by Pediatricians.

Only a small percentage of children and adolescents diagnosed with acne need to see a Dermatologist. Most are evaluated and treated by their Primary Care Provider.