

HKSDV Dinner Symposium on New Advancement in Rosacea and Acne

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 Organiser: Hong Kong Society of Dermatology and Venereology

New advancement in rosacea management

Speaker: Giuseppe Micali
 Department of Dermatology, University of Catania, Italy

Rosacea has been traditionally classified into the following four subtypes: erythematotelangiectatic rosacea, papulopustular rosacea, phymatous rosacea and ocular rosacea. However, clinically these features may frequently overlap. According to the Rosacea Consensus, rosacea is now newly classified into phenotypes instead. The diagnostic features include fixed erythema in characteristic pattern and phymatous changes. The major features consist of inflammatory papules and pustules, flushing, telangiectasia and ocular manifestation, while the secondary features are encompassed by burning and stinging sensation, oedema and dryness.

Ivermectin 1% cream is a new treatment for the inflammatory lesions of rosacea and is used once daily at bedtime for four months. It works by suppressing the innate immune response, reducing the *Demodex* mite density and reducing the expression of cutaneous

inflammatory biomarkers. Several clinical trials have shown that ivermectin 1% cream was significantly more efficacious than 15% azelaic acid gel and 0.75% metronidazole cream. In a study in which 20 patients were treated with ivermectin daily over a period of 8-20 weeks, complete response was observed in 31.6% at week 8, while at 20 weeks, additional improvement in terms in complete response was seen in 12 (42%), 16 (47%) and 20 (58%) weeks respectively were observed.

Brimonidine 0.33% gel is a novel treatment for symptomatic background erythema in erythematotelangiectatic rosacea. It is an α -2 adrenergic receptor agonist and is a potent vasoconstrictor of human subcutaneous blood vessels with diameter less than 200 μ m. Clinical trials have shown a positive response to Brimonidine gel in 85% of patients and with effect lasting up to 12 hours after application. The most common adverse effects are often mild to moderate local reactions, including flushing (9.1%), worsening of papules & pustules (3.6%), burning (3.3%), irritation (3.1%), contact dermatitis (2.2%) and pruritis (2%). Telangiectasias could also be treated with various lasers including Pulse Dye Laser, Nd: YAG laser and Intense Pulsed Light.

Learning points:

Recent therapeutic advances with combined treatment could be used to achieve treatment responses in the different phenotypes of rosacea.

Update on acne: guideline and case sharing

Speaker: Johnny Chan

Hong Kong Sanatorium and Hospital, Hong Kong

Acne is a common skin problem, the prevalence of acne in mainland China is estimated to be 50% in primary and secondary school students and 45% in undergraduates. It is also a chronic disease which can have an impact on the quality of life comparable to asthma and epilepsy. In 2016, European Academy of Dermatology and Venereology (EADV) and American Academy of Dermatology (AAD) published guidelines on acne management. Later the Global alliance to Improve Outcome in Acne also published an update to the management of acne in 2018. Under the new update in 2018, patients with inflammatory or comedonal acne should use a topical retinoid plus benzoyl peroxide as first-line treatment. Also, the role of antibiotics in acne treatment has changed: neither topical nor systemic antibiotics should be used as

monotherapy. Further, retinoids are again emphasized as having an essential role in the treatment of acne. Oral retinoids should be the first-line treatment for severe acne including cystic and conglobate acne. It is recommended that oral isotretinoin therapy should be given until full clearance of acne, and a rule of thumb is to treat until full remission plus an additional month. Most patients with acne should receive maintenance therapy with a topical retinoid with or without topical benzoyl peroxide. Lastly, an early and effective treatment is important to minimize potential risk of scarring.

Learning points:

Acne is a common skin problem and an early and effective treatment is required to achieve good clinical response, decrease its impact on the quality of life and reduce complications.