Dutch College of General Practitioners’ Guideline on ‘Acne’

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• Just like the 1999 and 2014 evaluations, the present assessment has to conclude that ‘too few randomised double-blind studies into the efficacy of various therapies have been published and that the available studies have had limited sample sizes and have suffered from methodological shortcomings.’
• The argument for changing from a ‘step-up’ treatment policy to a policy based on the severity of the acne is not presented. Perhaps the new system is easier to manage.
• Prescribing minocyclin for acne is discouraged.
• If a woman requires reliable and safe contraception, with high compliance rate, for instance to reduce bleeding problems, a combined oral contraceptive with 30 ug ethinyl estradiol and levonorgestrel should be considered, rather than a pill with 20 ug.31 A combined pill with cyproteron (generic or Diane-35®) should not be prescribed.

Literature references

19. Parish LC, Parish JL, Routh HB, Witkowski JA. The treatment of acne vulgaris with


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