

Treatment of Acne Vulgar in Adolescents

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ABSTRACT

the review presents an analysis of modern concepts of etiology, pathogenesis and treatment of vulgar acne. Special attention is paid to the central role of local manifestations in the cascade of hormonal, immunological and microbiological changes leading to the appearance of acne. The treatment of acne is described, evidence-based medicine approaches are used to determine the most effective treatment methods.

Introduction. Vulgar acne (acne, acne) is one of the most common diseases that affects up to 90-95% of the world's population (Kalamkarian A.A. et al., 1984; Araviyskaya E.R. et al., 1998; Kornevaya T.A., 2003; Orlova N.A., 2006; Cordian L., 2002). The peak incidence is observed at the age of 12 to 25 years. However, approximately 7% of patients may experience late acne (adult acne), including after 40 years. In the majority of acne patients with severe course, irreversible post-inflammatory skin changes are formed, which bother patients no less than the manifestations of acne themselves, require long and complex treatment (Korcheva T.A., 2003; Zabnenkova O.V., 2004; Polonskaya N.A., 2005). The presence of cosmetic defects negatively affects the psychoemotional state of patients, reduces self-esteem, causes depressive disorders, leads to social maladaptation (Araviyskaya E.A., 2004; Korsunskaya I.M., 2007; Lepine A.M., Briley M., 2004). In recent years, some progress has been made in the study of the pathogenesis of acne. According to modern concepts, the occurrence of acne occurs against the background of several interrelated pathogenetic mechanisms. The most significant of them are the violation of keratinization processes, pathological follicular hyperkeratosis, hyperproduction of sebaceous secretions, accompanied by lipid imbalance and reproduction of microorganisms, among which *Propionibacterium acnes* play the main role (Masyukova S.A., 1997; Polonskaya N.A., Fedorov S.M., 2003; Yutskovskaya Ya.A. et al., 2005; Plewig G., Kligman A.M., 1993; Leone G., 2004). An important role in the pathogenesis of acne is occupied by immune disorders characterized by activation of cell-mediated reactions of the leukocyte system and a dysfunctional state of the humoral link of immunity (Kalamkarian A.A. et al., 1977; Temnikov V.E., 1987; Kotova N.A., 1999; Orlova N.A., 2006; Plewig G., Kligman A.M., 2001). The development of adequate therapy is determined by the pathogenetic mechanisms of acne and includes external and systemic medications (antibiotics, synthetic retinoids, antiandrogenic and immunotropic drugs), physiotherapy, peels, etc. However, there is often a need for long-term therapy, which leads to serious side effects, complications and resistance to the drugs used (Polonskaya N.A., 2005; Anfimova N.A., 2005). Considering these problems, it is interesting to develop an integrated

approach to the treatment of the most common forms of acne using topical antibacterial and anti-inflammatory agents, immunomodulators (Smirnov B.C., Sosyukin A.E., 2003; Smith D.L., Cai J., Zhu S. et al., 2003), preventing the development of resistance and contributing to the restoration of nonspecific defense mechanisms and antidepressants with a pronounced vegetative stabilizing effect (Smulevich A.B. et al., 2003).

Aim: To determine the effectiveness of the use of a complex method for the treatment of vulgar acne

Materials and methods: To carry out our work, 52 patients with vulgar acne who were admitted and treated on an outpatient basis at the regional dermatovenereological dispensary of the city of Samarkand were examined. the average age of the examined patients was 26.27 ± 12.6 years. 41 (73%) were examined men and 11 (27%) women. The duration of the disease in patients ranged from 1 year to 3 years. The criteria for inclusion of patients in the observation group were: the presence of clinically confirmed vulgar acne, the presence of informed consent of the patient to participate in the study with clinical and laboratory studies and compliance with the doctor's instructions regarding the prescribed therapy.

The criteria for excluding patients from the examined group were: complicated forms of vulgar acne, malignant neoplasms, chronic diseases of the internal organs of an infectious and allergic nature, the presence of an established diagnosis of hepatitis, including viral, alcoholic and fatty hepatitis, the last treatment for vulgar acne carried out less than 1 month ago, as well as a violation of the treatment regimen.

Results and discussions:

All examined patients were divided into 2 groups main and control the main group included patients receiving standard treatment of vulgar acne

The control group included patients receiving combined treatment with drugs: lacto ji 1 capsule per day 3 times for 20 days, Trichapol 1 tablet 3 times a day for 10 days, fucartsin for quenching 1 time a day at night, 2% mupiroban ointment for 15 days before bedtime, and wiping with a solution of zinirid in 1 week 2 times.

The patients were treated inpatient for 10 days, after which the patients continued outpatient treatment for 1 month, at the time of outpatient treatment, every 10 days the patients visited the attending physician to assess the effectiveness of treatment.

To identify the effectiveness of treatment, we used the following criteria: a positive effect on therapy at the beginning of treatment, the timing of sowing bacterial pathology in foci, the period of clinical recovery.

In the main group, positive dynamics was observed on day 10 in 4 patients, the treatment approach was changed in 5, positive dynamics was observed on day 20 in 15 more patients, complete clinical recovery in 2 patients, positive dynamics was observed on day 30 in 3 patients, complete clinical recovery was observed in 12 patients. On the 40th day of treatment, out of 26 patients, complete clinical recovery was observed in 16 patients, and treatment was continued in 10 patients. There were no visible changes in the patients, as a result of which the patient was

In the control group consisting of 26 patients, positive dynamics was observed on day 10 in 10 patients, on day 20 of treatment, positive dynamics was observed in 20 more patients, complete clinical recovery in 15 patients, on day 30 treatment of 26 patients, complete clinical recovery was observed in 24 patients, and treatment was continued in 2 patients.

Conclusions

Thus, the proposed treatment complex turned out to be more effective in the treatment of vulgar acne. In all 26 observed cases, a positive effect was observed and this method increased the activity of speedy recovery and reduced complications (post acne).

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