

# Thoughts on Acne and Rosacea

In this era of blurred lines of demarcation and separation between specialties and even between disparate degreed groups of health care providers (ie, MD, DO, PharmD, DC, DPM, ARNP, OD, etc), the subject of *core competency* often is raised. So, what is core competency?

It all depends on who you ask. Really, I am not kidding here, nor am I trying to be coy or disingenuous. The sands of core competency are ever changing, shifting over time to adjust to market realities, patient demand, technological advances, reimbursement, and even media exposure. What was yesterday's closely held specialty core competence can quite literally become a widespread phenomenon overnight. Recent examples in the delivery model are perhaps best exemplified by the proliferation of "medspas." Once the domain of dermatologists and plastic surgeons, medspas are now found in every specialty, every nook and cranny of the office, shopping mall, health club, gym, and even in the dentist and podiatrist office. Another example, on a technique level, includes liposuction. Again, what was once the procedure of "core specialists" now has become (with the assistance of lasers) a primary care procedure in many offices.

Clearly, the concept of what procedure, disease state, diagnosis, or elective procedure belongs to whom is a matter of subjective opinion. In the field of primary care, there now has evolved a subspecialty track of cosmetic medicine (there is even a designated director of primary care cosmetic training at one major West Coast university).

So what does this have to do with an editorial on acne and rosacea? Well, here is the connecting point: core competency. Yes, the nebulous term of what belongs to which specialty is at work here. Dermatology remains the specialty in which acne and rosacea are widely regarded as core competencies. The decades of investigation, research, clinical trials, publications, and teaching all have culminated in a knowledge base that exceeds all other specialties, and justifies the possession of acne and rosacea by dermatology and dermatologists.

While it is true that today the single largest grossing skin care product in the "acne franchise" is an over-the-counter infomercial-marketed skin care system developed

by dermatologists, the true medical management of acne is still considered the purview of dermatology. Ditto for rosacea.

There is an old axiom in medicine "easy to treat; difficult to manage." A more apt description could not be found for the totality of expertise required to truly manage both conditions. While many primary care providers, pediatricians, estheticians, and even school nurses regularly and routinely manage acne, they do so based on guidelines, protocols, and regimens that were developed by dermatologists. The pathogenic factors have been addressed and elucidated by decades of investigation, years of clinical trials, and hours upon hours of collegial interaction.

As dermatologists, we do have the responsibility to teach all of those involved in the care of skin disease the best and safest way to manage their patients. That is the grand tradition of American medicine, as it should be. Our patients expect that we would do this, as would our brethren in the larger house of medicine. However, it doesn't mean that we abdicate the diagnosis and disease state to another group or specialty; no, indeed it means that we should continue to expand the frontier of understanding and knowledge until it is complete. We are the experts, and that is what experts do.

I am reminded of an analogy in the automotive world: It is said that the designers dream the concept, the engineers make it practical, the technicians assemble the product, and the mechanics keep it running. It takes all groups working together to make the (customer) driver happy.

Interestingly, from my perspective we are the designers and engineers for the disease states of acne and rosacea. They are in the core competencies of dermatology, and while many follow, they do not lead.

In this special issue, dedicated to acne and rosacea, read from the key thought leaders latest communications on one of our favorite areas of dermatology, the complex issues of acne and rosacea. Deepen your knowledge base and appreciate what we can do for our patients as the "Masters of the Universe of Acne and Rosacea."

Enjoy. ■

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