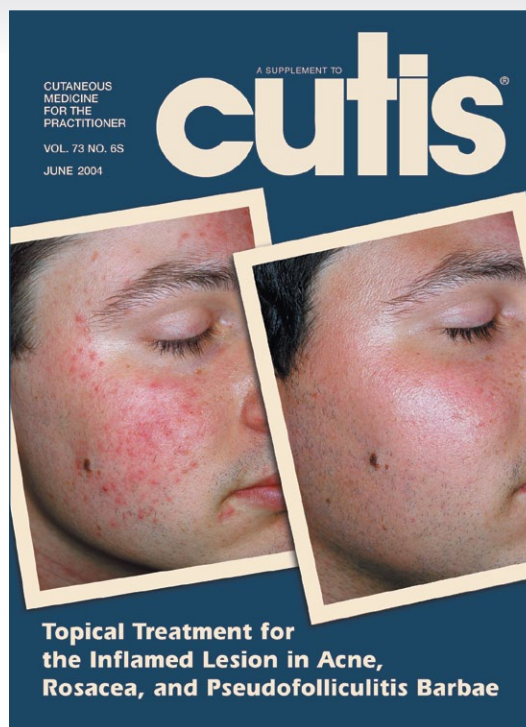


Table of Contents

Topical Treatment for the Inflamed Lesion in Acne, Rosacea, and Pseudofolliculitis Barbae



Introduction

Topical Treatment for the Inflamed Lesion in Acne, Rosacea, and Pseudofolliculitis Barbae

page 4

James J. Leyden, MD

Antibiotic Resistance in the Topical Treatment of Acne Vulgaris

page 6

James J. Leyden, MD

Topical antimicrobial agents are the first line of treatment in mild to moderate acne vulgaris. The primary pathogenic agent implicated in the development of inflammatory acne is Propionibacterium acnes. P acnes also may play a secondary role in non-inflammatory acne or comedogenesis. Over the past 20 years, concern has grown about the gradual worldwide increase in the prevalence of antibiotic-resistant P acnes strains. Factors associated with the development of resistant P acnes following treatment with topical antibiotics, clinical relevance of antibiotic resistance, and strategies to reduce the incidence of P acnes resistance are discussed in this review.

Photographic Review of Results From a Clinical Study Comparing Benzoyl Peroxide 5%/Clindamycin 1% Topical Gel With Vehicle in the Treatment of Rosacea

page 11

James J. Leyden, MD
Diane Thiboutot, MD
Alan Shalita, MD

A photographic analysis was conducted of results from a randomized, double-blind, vehicle-controlled, 12-week study that assessed the efficacy of topical benzoyl peroxide 5%/clindamycin 1% (BP/C) gel (BenzaClin®) versus vehicle in the treatment of rosacea. The objective was to compare the baseline and end-of-treatment photographs of patients treated with BP/C versus those treated with vehicle. Patients were randomized to receive once-daily treatment with BP/C or vehicle for 12 weeks. Three blinded, independent reviewers evaluated papule and pustule severity at baseline and at week 12 for each patient. An Overall Global Improvement (OGI) scale was used to assess efficacy. Fifty patients (BP/C, 26; vehicle, 24) were evaluated. At end of treatment, significant ($P < .001$) improvements were seen in the number of papules and pustules based on the OGI scale for patients receiving BP/C. At week 12, 7.7% of patients treated with BP/C were rated as "clear/nearly clear" from baseline compared with a change of 0% in patients receiving vehicle. An additional 15.4% of patients were rated as having a "marked improvement" from baseline compared with a change of 4.2% in patients receiving vehicle. Interrater reliability was high, based on intraclass correlation coefficient (ICC) of 0.647 (BP/C) and 0.722 (vehicle) on the OGI scale ($P < .001$). These results showed that BP/C was significantly more effective than vehicle in improving papules and pustules associated with rosacea.

Twice-Daily Applications of Benzoyl Peroxide 5%/Clindamycin 1% Gel Versus Vehicle in the Treatment of Pseudofolliculitis Barbae

page 18

Fran E. Cook-Bolden, MD
Alicia Barba, MD
Rebat Halder, MD
Susan Taylor, MD

Pseudofolliculitis barbae (PFB) is an inflammatory disorder characterized by the formation of papules, pustules, and hyperpigmentation as a result of ingrown hairs. It is estimated that PFB affects 45% to 83% of black men who shave regularly. In this multicenter, double-blind pilot study, men with 16 to 100 combined papules and pustules on the face and neck were randomized to receive twice-daily benzoyl peroxide 5%/clindamycin 1% (BP/C) gel (BenzaClin®) ($n=47$) or vehicle ($n=41$) for 10 weeks. Sixty-eight (77.3%) of the participants were black. All patients were required to shave at least twice a week and to use a standardized shaving regimen throughout the study. Clinical evaluations were performed at 2-week intervals. The primary efficacy parameter was the percentage change from baseline in lesion counts. At weeks 2, 4, and 6, mean percentage reductions from baseline in combined papule and pustule counts were significantly greater with BP/C gel compared with vehicle ($P \leq .029$). Treatment differences in favor of active therapy were more pronounced in the subpopulations of black patients, with least squares mean percentage reductions in papule and pustule counts ranging from 38.2% at week 2 to 63.9% at week 10. Study medication was well tolerated. These positive findings warrant further investigation of BP/C gel in the treatment of patients with PFB.