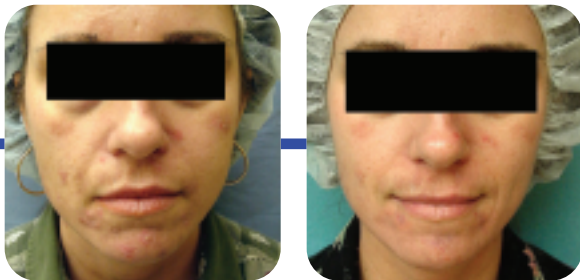


Acne Medication Controversy Fuels Development of Safer Treatments

Recent negative publicity about Accutane and antibiotics is driving patients and physicians alike to seek alternatives to pharmaceuticals when treating acne.

By Michael Moretti, Editor and Bob Kronemyer, Associate Editor



Before Tx (left)
 After three Smoothbeam treatment (right)
 Photos courtesy of Paul M. Friedman, M.D.

New FDA restrictions on Accutane are now in force, in the wake of ineffective guidelines which failed to reduce pregnancies and birth defect risks. Similarly, a study examining the association between use of antibiotics and risk of breast cancer appeared in the February 18 issue of *The Journal of the American Medical Association* (JAMA). This cross-control study of more than 10,000 American women found that those who use antibiotics on a regular basis are twice as likely to develop breast cancer.

“Certainly antibiotics should be used judiciously because of emerging resistance,” said Paul Friedman, M.D., director of the DermSurgery Laser Center in Houston, Texas. “But I do not think it is appropriate to conclude that antibiotics overall increase the risk of breast cancer. I do believe, though, that we are evolving toward a combination of drug therapy and light sources, or even radio frequency devices, that will work in concert to shrink the sebaceous gland, decrease organism count and

decrease inflammation, as well as improve the underlying acne scarring.”

The SmoothBeam 1450 nm diode laser from Candela Corporation (Wayland, Mass.) “allows one to see a marked reduction in inflammatory facial acne counts after only one to three treatment sessions, even in patients who have previously been refractory to traditional topical or systemic therapies,” Dr. Friedman reported. “SmoothBeam has also been shown to improve acne scars by stimulating new collagen.” Dr. Friedman is also using SmoothBeam to treat sebaceous hyperplasia.

Patients with active inflammatory facial acne typically schedule three or four sessions at four week intervals. “Topical lidocaine is applied under occlusion for one hour before the laser treatment, and patients receive non-overlapping, single pulses of the laser with the cooling device,” Dr. Friedman explained. Normal fluences range from 11 to 14 J/cm², using a 6 mm spot size. After treatment, he applies a moisturizing topical and a sunscreen.

Before Tx (left)
 After Smoothbeam Tx (right)
 Photos courtesy of Thomas Rohrer, M.D.



In a 19 patient study performed at Dr. Friedman's center, main lesion count decreased 37% after one treatment with SmoothBeam, 58% after two, and 83% after three sessions. "We are currently conducting research to determine length of remission, as well as the optimal treatment parameters. Previous studies indicate a six month remission when treating acne on the back. This corresponds with what we are seeing clinically on both the back and face."



Paul Friedman, M.D.

Mark Nestor, M.D., Ph.D., a clinical associate professor of dermatology and dermatologic surgery at the University of Miami School of Medicine in Florida, also believes that the JAMA study is inconclusive. "The American Academy of Dermatology (AAD) recently announced that it feels there are some problems with the study and that nobody should rush to conclusions. Still, I feel the study raises some significant issues, such as using antibiotics as first-line

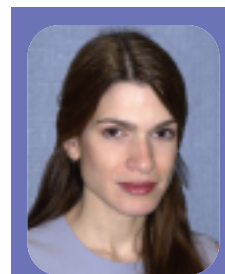
In a 19 patient study performed at Dr. Friedman's center, main lesion count decreased 37% after one treatment with SmoothBeam, 58% after two, and 83% after three sessions.

therapy. I think the issue is whether we should reserve antibiotics for patients on whom nothing else works, because some of the data in the study is quite frightening. The most compelling data I read is that for the tetracycline group of antibiotics, which is the group we use the most, there is a five-fold increase in fatal breast can-

cer. This is statistically significant. In contrast, smoking gives you only a two to three fold increase in lung cancer."

The Levulan photodynamic therapy (PDT) procedure from DUSA Pharmaceuticals, Inc. (Wilmington, Mass.) "is a good alternative to antibiotics and other oral medications," Dr. Nestor said. "Accutane recently went through an extensive FDA review process. The FDA is going to restrict Accutane's use even more, and this will discourage physicians from prescribing it." Dr. Nestor believes superb results are achieved on acne by combining light-based modalities with topical agents. "We get these profound results in the absence of using oral antibiotics and/or Accutane."

For PDT treatment of acne, Dr. Nestor prefers a pulsed dye laser. "What we continue to see with Levulan PDT is results similar to Accutane. Some of these patients have remained extremely clear for nearly two years now, and without further treatment. Side effects have been minimal, too. There have been a few instances of minor infections which have cleared up." Dr. Nestor and his colleagues



Macrene Alexiades, M.D., Ph.D.

are also researching combinations of blue light and laser treatments such as SmoothBeam or CoolTouch (CoolTouch Inc., Roseville, Calif.), which are both FDA approved and have been shown to help acne by shrinking sebaceous glands.

Macrene Alexiades, M.D., Ph.D., is a dermatologist in private practice in New York City and a clinical instructor of dermatology at the Yale University School of Medicine. "I was one of the first physicians to treat acne with Levulan and photodynamic therapy (PDT),"

she stated. "It is certainly efficacious. I am a scientist as well as a physician. We always kind of expect novel therapy not to work. So the fact that Levulan PDT has an enduring outcome is very reassuring."

Dr. Alexiades believes that Levulan PDT is clearly targeting the sebaceous follicle. The long-standing results are far and away beyond her expectations. She also reported that using a light source without Levulan has been disappointing. "There is also a compliance issue when patients are required to have two sessions a week for four weeks. Levulan PDT improves the efficacy and decreases the number of treatments needed."

Following much trial and error, Dr. Alexiades believes she has finally optimized treatment for acne using Levulan. "I usually apply one coat of Levulan during the first session, then two coats of Levulan two to three weeks later. The Levulan takes about 30 sec-

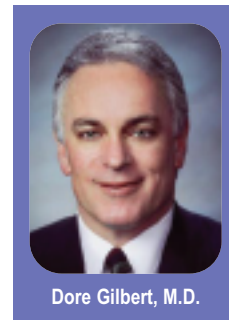
"Levulan PDT improves the efficacy and decreases the number of treatments needed."

onds to dry between coats. I also prefer a 45 minute incubation time for both sessions. Most patients require a total of two to four sessions (all but the first with two coats), with three sessions being average. These are patients who have failed all other types of treatment, including Accutane."

As for the JAMA article, "It certainly has criticisms that can be leveled against it. But the fact of the matter is that it was a very large sample size. Most people in the field are taking it very seriously," said Dr. Alexiades. "I think we are going to move away from systemic treatments and more toward highly specialized targeting of the sebaceous gland and other media-

tors of acne in a very localized fashion directly on the face, either by light or other topical agents."

Dore Gilbert, M.D., a dermatologist in private practice in Newport Beach, Calif. Believes that "until the AAD is able to prove that the JAMA study is faulty, it is our responsibility to deal with the issue at hand: Are women more susceptible to breast cancer if they are taking antibiotics?"



Dore Gilbert, M.D.

Dr. Gilbert states that, "the Levulan Kerastick is changing how I treat acne. I give every woman who comes into my office the option of antibiotics, topical medications, Accutane or Levulan. I would say that 75% of these patients, once they have heard the whole story, are choosing Levulan for severe pustular, inflammatory or cystic acne. We are achieving excellent results. In contrast, for mild comedonal acne, we are able to treat with topical medications and maybe just blue light."

His protocol for using Levulan PDT is at least two treatments, spaced three to four weeks apart. "We apply the Levulan for 30 minutes, then the BLU-U light (DUSA, Wilmington, Mass.) for eight minutes. I tell all my patients to plan a minimum of two sessions, and possibly four."

Dr. Gilbert, an associate clinical professor of dermatology at the University of California, Irvine, noted that Accutane "has the potential to actually cure acne. The problems, though, are that women must be on a birth control pill, able to tolerate dry skin, bloody noses, achy bones, headaches and sometimes hair loss. I think it is the goal of all physicians to treat most skin conditions topically, without having to resort to internal medication."

According to Dr. Gilbert, Levulan “has the ability to replace systemic antibiotic therapy in most patients. It would help, however, if DUSA offered a less expensive, lower dosage Kerastick.” He added, “this would be ideal for patients with facial acne. I think most parents will do whatever it takes to improve their children’s acne, if the condition is of a disfiguring nature.”

The OmniLux Blue LED System from Alderm, NA, LLC (Irvine, Calif.) “definitely works on acne and is the most potent blue light source available in comparison to either the ClearLight or BLU-U light,” said Ronald Moy, M.D., an associate clinical professor of dermatology at the University of California, Los Angeles. “We recently completed a study that shows success as good as any other treatment available, when using the OmniLux Blue on a

“I didn’t realize that it was such a large group of patients who are fearful of all systemic medications.”

regimen of two to three times a week for eight weeks. Patients are very happy. There is no chance of burning as with a laser, no pain, and there are no medications. Treatment works on almost all patients, except those who have recalcitrant acne.”

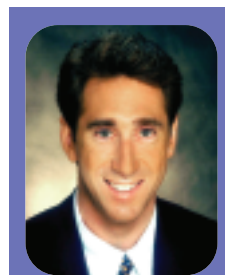
For those severe patients, Dr. Moy recommends combining OmniLux Blue with Levulan. “We can effectively treat these patients. The Levulan seems to absorb preferentially into the sebaceous glands. It has also been shown that the light plus the Levulan actually destroys the sebaceous glands. Often, people will require at least six to eight treatments, roughly twice a week. But some patients have responded in only two or three sessions.”

Dr. Moy noted that Accutane has been reported to cause everything from depression to systemic side effects. “Many people are afraid of the drug. I didn’t realize that it was such a large group of patients who are fearful of all systemic medications. When given an alternative, these patients rapidly choose a light source. And for all patients with acne, I think more and more will ask for the light therapy. The teenage crowd, in particular, does not want to be on medication. However, the lasers approved by the FDA don’t hold much appeal for many groups of patients because they are painful.”

Michael Kaminer, M.D., a dermatologist in private practice in Chestnut Hill, Mass., questions the long-term accuracy of recent negative studies about systemic medications. “I do not have a safety concern at this point. I personally would need more proof. But I am concerned that such negative press can potentially mislead patients about the benefits of such drugs.”

The ThermaCool TC System from Thermage, Inc. (Hayward, Calif.) “is what I would classify as promising technology for acne,” said Dr. Kaminer. “This advanced form of radio frequency at least in theory, is the right modality to target sebaceous glands. In practice, some of the early data and early experience suggest that it can help people of varied skin types and ages. However, most physicians, including myself, use ThermaCool in their practice for skin tightening and the treatment of aging skin. The device’s use in acne at this point is very much experimental and anecdotal.”

Dr. Kaminer, an assistant professor of dermatology at Yale Medical School, is an investiga-



Michael Kaminer, M.D.



Solvére by Topix

tor for the ongoing clinical trial of ThermoCool for acne. “My personal observation is that it appears that multiple treatments may be more efficacious than a single treatment. The longevity of the effect is unknown, though. Still, several women I’ve treated over the past two to three years for skin tightening feel that one of the major benefits of treatment is that their adult acne has improved. This improvement lasted at least six months.”

Dr. Kaminer noted that “there is a desire on many people’s part to move away from medical therapy, not so much because of the potential dangers that are outlined in some of these studies, but because for years we have been seeking better ways to treat acne.”

Down the road, Dr. Kaminer expects non-medical therapies will likely become a standard part of the way we treat acne. However, he believes there will be a compliance issue with both. “Unless you use acne medications – orally or topically – consistently, they fail. Similarly, light-based treatments are going to be expensive, at least in the beginning. They also require visits to the doctor’s office. Perhaps home devices will be an answer to increase patient compliance,” he said.

Solvére is a home acne clearing kit from Topix Pharmaceuticals, Inc. (North Amityville, N.Y.) that entails four steps: a cleanser containing glycolic acid, salicylic acid, green tea extract and zinc; a toner with glycolic acid, salicylic acid, witch hazel combined with green tea extract and zinc; a gel with 2.5% benzyl

peroxide; and a moisturizer featuring green tea extract, vitamins A, C, E and CoQ₁₀.

“I do not use Solvére as monotherapy. I use it in conjunction with my prescription products,” said Cherie Ditre, M.D., director of cosmetic dermatology at the University of Pennsylvania in Radnor, Penn. “In the morning, my patients cleanse, then apply the toner, followed by the treatment gel. In between the third and fourth step, patients use a prescription topical antibiotic. The evening routine consists of cleansing, a topical retinoid (depending on the severity of the acne), and then the moisturizer. I generally don’t recommend steps two and three, the toner and treatment gel, twice a day.”

“Usually, patients will begin noticing a change in about two weeks, but a more dramatic change is seen by six weeks,” said Dr.

“We just have to make sure that patients who are on these medications are being treated judiciously.”

Ditre. “Patients continue to use the kit until we achieve more resolution of the acne bumps, papules and comedones. Most therapy takes at least three months to really be effective.”

Dr. Ditre believes that Accutane and antibiotics are both necessary in the management of acne. “We just have to make sure that patients who are on these medications are being treated judiciously. Non-dermatologists may not know all the ramifications of medicines and may not be as attentive,” she stated.

The pulsed dye Nlite-V laser system from EU Photonics Ltd. (Llanelli, England) “is certainly effective in mild-to-moderate acne,” said Edward Seaton, M.D., a clinical research fellow in the department of dermatology at Imperial College in London, England. “A single treat-



Before Tx (left)
After Tx (right)

Photos courtesy of EU Photonics

ment can be effective for a number of weeks.”

Dr. Seaton was first author of an Nlite study that appeared last October in *The Lancet*. Some of the 31 adults continued to show improvement with one treatment even at three months. After 12 weeks, acne severity (measured by Leeds revised grading system) was reduced from 3.8 to 1.9. “Total lesion counts also fell by 53%,” Dr. Seaton said.

“Accutane is fantastic treatment when it works. But there are pregnancy issues,” Dr. Seaton conveyed. “Creams can cause mild burning. The laser and other light-based treatments are quite exciting. If we can improve and refine these therapies, it may offer a possible alternative or even just an adjunct to conventional treatments.”

Unlike many of his colleagues, Sorin Eremia, M.D., a dermatologist in private practice in Riverside, Calif., believes that Accutane is probably overly regulated and under-prescribed. Nonetheless, “patients’ perceptions of Accutane and antibiotics have drastically changed. This is what really matters. Many patients are demanding alternatives to Accutane and to oral antibiotics. This is why devices, such as non-ablative lasers, will continue to play an increasingly important role in the treatment of acne.”

The Profile from Sciton, Inc. (Palo Alto, Calif.) is a multi-laser modular system that recently received expanded clearances for the Nd:YAG 1319 nm ClearScan module. “This is the module we use most frequently to treat acne, but we have also used the scanned 1064 nm laser,” Dr. Eremia said.

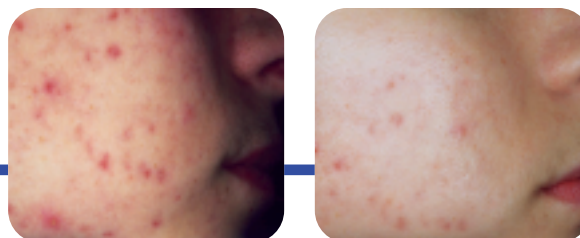
With the ClearScan module, most patients require two to four sessions, spaced two to four weeks apart, before noticing a response. “We

use approximately the same protocol for the scanned 1064 nm. But results have not been quite as effective,” said Dr. Eremia, an associate clinical professor of medicine at the University of California, Los Angeles, and director of Cosmetic Surgery for the Division of Dermatology. “One of the problems with non-ablative lasers is that it tends to be a painful treatment. Radio frequency therapy is also very painful. In contrast, the Profile has a large sapphire window plate to chill the skin. ClearScan is applicable for both teenage acne and adult acne. By optimizing the delivery system, ClearSkin has the potential of knocking

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out oil glands. At this point, though, the laser is a supplemental treatment to simpler, topical treatments.”

In April, Palomar Medical Technologies, Inc. (Burlington, Mass.) received FDA clearance for treatment of mild-to-moderate inflammatory acne with its LuxV Pulsed Light Handpiece. This is the first Lux handpiece to feature acne treatment and is a new attachment to the Palomar StarLux, MediLux and EsteLux pulsed light systems. “I’ve not seen anything work as quickly, when it works quickly, as this machine. I’ve literally seen spots fade and flatten out in less than one hour,” said



Before Tx (left)
After Tx (right)

Photos courtesy of David Vasily, M.D.

Harmony by Orion



Robert Berger, M.D., a dermatologist in private practice in Waldorf, Md. “The only other thing I know that works as fast are steroid injections. I also like the fact that I now don’t necessarily have to prescribe pills.”

Treatment with the LuxV handpiece for active acne generally begins with three to five treatments, spaced two to three weeks apart. “Chronic acne is treated at the same interval, but closer to three sessions,” Dr. Berger said. The LuxV emits pulses of intense light to alter the structure and function of the sebaceous glands. “We are so busy treating with the LuxV that I may need to invest in a second machine.”

Dr. Berger believes that the goal is not to entirely eliminate antibiotics. It is to lower the dose. “For example, instead of a patient having to use 100 mg twice a day, it can be reduced to 50 mg a day or three or four times a week,” he said.

As for the downside of Accutane and oral antibiotics, “I’ve been using these medications for 20 years, and have yet to have any problems. However, whenever you prescribe systemic agents, there are systemic side effects that one needs to be aware of. I believe that anything that avoids that is a good thing. But there are documented cases of patients being

on tetracycline for 30 years for their acne without any untoward effects. I think the patients are much more concerned than the physicians.”

Orion Lasers, Inc. (Fort Lauderdale, Fla.) received FDA clearance in April to market its new Harmony system, an expandable platform for multiple aesthetic laser and other light treatments. Among the more than 30 approved applications is moderate inflammatory acne vulgaris. “I like it that the Harmony’s treatment head ranges from 420 nm to 950 nm,” said Hartley Thomas, M.D., a cosmetic dermatologist in private practice in Valparaiso and Munster, Ind. and an assistant professor of emergency medicine at Butterworth Hospital in Grand Rapids, Mich. “No other light source

“Whenever you prescribe systemic agents, there are systemic side effects that one needs to be aware of.”

has this range. The Harmony is able to penetrate and hit the porphyrin production of the propionibacterium.”

Harmony’s Advanced Fluorescence Technology may represent the next generation of multi-application, pulsed-light technology. This innovative design converts unused UV light into the optimal spectrum used by each application, thus extending the life of the pulsed-light head, up to three times longer than other pulsed-light systems.

Dr. Thomas’ typical patient protocol consists of one or two Harmony pulsed light facial sessions with some extractions, followed approximately one week later by Levulan in conjunction with the acne head of the Harmony. Three weeks later, patients normally receive treatment with either the BLU-U blue light illuminator or the ClearLight, once or

twice at one week intervals. "We then repeat the Levulan treatment with the acne head three weeks later. After one to four sessions of Levulan with the Harmony acne head, results

"We've moved about 95% away from systemic medications. Over the next several years, I expect everyone will replace systemic medications for treating acne."

are comparable to Accutane," Dr. Thomas said. He also sometimes uses topicals for oil production control.

Dr. Thomas has great patient concerns about systemic medications (from standby antibiotics all the way to Accutane) with their systemic side effects and long-term risk factors. "We've moved about 95% away from systemic medications. Over the next several years, I expect everyone will replace systemic medications for treating acne. But we are waiting for insurance coverage for Levulan PDT. We need to educate the insurance companies about the long-term benefits."

ClearLight from Lumenis Inc. (Santa Clara, Calif.) was the first FDA cleared device for treating acne. "The most exciting thing about ClearLight is its ability to activate the photosensitizing chemical aminolevulinic acid (ALA)," said Jaggi Rao, M.D., a cosmetic sur-



gery fellow under the direction of Mitchel Goldman, M.D., in La Jolla, Calif. ClearLight is a very specific light in the blue spectrum (approximately 400 to 417 nm) for activating porphyrins. "After exposure to blue light, the porphyrin breaks down and releases oxygen radicals. These oxygen radicals are cytotoxic and impair the sebaceous glands that they enter," Dr. Rao explained.

Dr. Rao uses ClearLight both alone and in combination with ALA (Levulan). "My personal experience is that one combination treatment is about equivalent to five sessions with ClearLight alone. Patients can expect incredible results."

Dr. Rao also believes that Accutane "is a wonderful drug. However, Accutane has potential side effects, such as cholesterol increases and liver function-test impairment. Even though these side effects are rare, Accutane tends to be a hassle for patients because they need to undergo blood work during drug treatment."

Dr. Rao also discounts the recent study in JAMA that links systemic medications to breast cancer. "Systemic agents definitely have their place in the treatment of acne. In my opinion, these agents are still the mainstay of treatment for the moderate to severe types of acne, such as inflammatory or nodule cystic acne. That said, I am concerned about the increase in antibiotic resistance. Through multiple years of tetracycline use, propionibacterium acnes are now becoming resistant to tetracyclines. This is a major issue. I am also concerned about drug interactions. Some of the antibiotics that we prescribe are photosensi-



Jaggi Rao, M.D.

ClearLight Tx

Photo courtesy of Mitchel Goldman, M.D. and Jaggi Rao, M.D.



Deep Therapeutic Cleanser and Acne Complex Gel by ProCye

tive, either by themselves or in combination with other agents.” As a gentle alternative, the Deep Therapeutic Cleanser and Acne Complex Gel from

ProCye Corporation (Redmond, Wash.) are part of a therapeutically designed cleansing regimen to effectively treat acne prone skin. “We use these two products for more severe cases of acne,” said Gary Seldomridge, D.M.D., an oral and maxillofacial surgeon in private practice in Lancaster, Penn. “The cleanser removes dirt, oil and make-up while hydrating. A blend of alpha hydroxyl acids (glycolic, lactic, citric, malic) exfoliates the skin and improves the performance of other topical medications, such as hydroquinone and Retin-A.” The Acne Complex Gel clears comedones by combining salicylic acid (0.5%) and 4% glycolic acid. The gel also contains Japanese green tea, chamomile, comfrey and meadowsweet to calm and soothe irritation associated with acne.

“Using these two products together helps to exfoliate dying skin cells from the surface and helps unclog oil glands. They also allow penetration of other topical medications,” Dr. Seldomridge said. “I suggest my patients cleanse their skin morning and evening with the cleanser, rinse well, then apply the gel. Favorable results are achieved between six and twelve weeks. This therapy has been very effective in treating acne, without the need for antibiotics.”

Incorporating proprietary light and heat energy (LHE) technology, the SkinStation Clinical Phototherapy System from Radiancy, Inc. (Orangeburg, N.Y.) “is a simple machine that works. Doctors like simple,” said Michael Gold, M.D., a dermatologist in private practice in Nashville, Tenn. “The parameters are easy

to figure out and patients will respond. Not only are patients responding, but they are remaining clear during the follow-up period, which is three months so far. And they are doing well during these three months. Although the final numbers are not in, it appears that we are clearing between 50% to 60% of the really bad acne.”

For a 20 patient study (18 of whom completed all follow-up visits), the protocol consisted of weekly treatments for four sessions. “Every treatment was well-tolerated and we included all skin types. There was no downtime, no blisters and no burns. These are important considerations when using this kind of technology.” Dr. Gold noted. “In my normal

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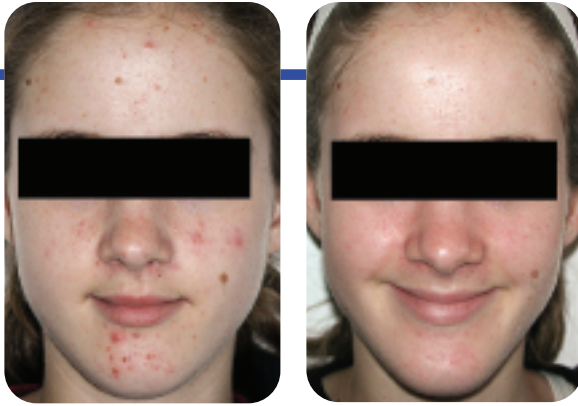
clinical practice, though, I treat once every other week. I feel I achieve similar results, sometimes with only two or three sessions. I also combine SkinStation with medicines, something we obviously do not do in studies.”

As for Accutane, Dr. Gold feels it is important to pick and choose patients carefully. “You need to do pregnancy tests and you need to make sure your patients are mentally stable. But now we have several viable alternatives to Accutane. Adult patients who have been on acne medications for years are ready for new technology. They are sick and tired of antibiotics and topical medicines. Likewise, kids are



Before Tx (left)
After Tx (right)

Photos courtesy of Michael Gold, M.D.



Before Tx (left)
After Tx (right)

Photos courtesy of M. Christine Lee, M.D.

very receptive to being treated by technology because they know so much about computers and cell phones. If you can introduce technology to make the medicines work faster and better, it is a win/win situation."

The Gemini Dual-Wavelength Laser System from Laserscope (San Jose, Calif.) combines and expands the best aspects of the company's Aura (green 532 nm) and Lyra (infrared 1064 nm Nd:YAG). "Both the Aura and Lyra can be used for acne," said Christine Lee, M.D., director of The East Bay Laser & Skin Care Center in Walnut Creek, Calif. "The Aura, either as a stand alone laser or as part of the Gemini, is the best. The Aura is in the visible light spectrum and is absorbed by propionibacterium. Aura does not just kill the bacteria, it actually helps to inhibit sebum production because there is some effect on the underlying sebaceous glands. The Aura also helps with inflammatory problems caused by acne, such as discolorations. There are also some effects on the pores. So after clearing the acne, the Aura helps address some of the epidermal surface changes that have caused discolorations and scarring."

Dr. Lee typically recommends between three to six sessions with the Aura, at one to two week intervals. "Most patients are clear after three sessions." In addition, for cystic lesions, the combined Gemini system is easier to use



M. Christine Lee, M.D.

than the stand alone Aura. "Sometimes, I like to add on the Lyra," Dr. Lee said.

As a clinical instructor of dermatologic surgery at the University of California, San Francisco, Dr. Lee is quite alarmed about the bad press over systemic medications. "It is always a challenge to get professional societies and individual physicians to cooperate with voluntary restrictions, even if the FDA backs it. That said, I think Accutane is a very effective

"I prefer doing light-based treatments now because it provides a viable, effective option to having someone on long-term systemic medications that have side effects."

drug that has does wonders for cystic acne. Sometimes, it is the only effective modality. I believe Accutane is very safe if it is carefully monitored by qualified dermatologists and other physicians. Patients also need to be properly diagnosed. In fact, the number one consideration with acne is making the correct diagnosis." **However, Dr. Lee** believes that the JAMA article has major flaws. "I would put very little credence to the study because the conclusions you make would be errant. On the other hand, we try not to place people on antibiotics. Increased resistance is significant with oral antibiotics. Acne is one of those conditions where the less you are on an antibiotic, the better off you are. I prefer doing light-based treatments now because it provides a viable, effective option to having someone on long-term systemic medications that have side effects." The cross-control study of more than 10,000 American women found that those who use antibiotics on a regular basis are twice as likely to develop breast cancer. ■