

PEARLS

Practical Evidence About Real Life Situations



Oral tetracyclines are effective for acne vulgaris

PEARLS No. 3, July 2007, written by Brian R McAvoy

Clinical question: Which oral tetracycline should I prescribe for acne vulgaris?

Bottom line: Oral tetracyclines (eg, doxycycline, lymecycline, oxy-tetracycline) are effective in the treatment of moderate to severe acne vulgaris. Minocycline is no more effective than the others but is more expensive and is associated with safety concerns.

Caveat: Minocycline, like other tetracyclines can cause candidiasis, gastrointestinal upset, hypersensitivity reactions, photosensitivity and benign intracranial hypertension. Minocycline is more likely than other tetracyclines to produce a lupus-like syndrome. Unlike other tetracyclines, minocycline can cause a potentially irreversible slate-grey hyperpigmentation of the skin.

Context: Acne vulgaris is the most common skin disease of adolescence, affecting over 80 per cent of teenagers (aged 13–18 years) at some point. Depending on severity, there is a variety of effective topical and systemic treatments, including oral tetracyclines.

Cochrane Systematic Review: Garner SE, et al. Minocycline for acne vulgaris: efficacy and safety. 2003, Issue 1, Article No. CD002086.

Further references

Chu TC. Acne and other facial eruptions. *Medicine*. 1997;25:30–33.

Oral erythromycin may be effective in treating the symptoms of pityriasis rosea

PEARLS No. 10, August 2007, written by Brian R McAvoy

Clinical question: Are there any effective interventions to treat symptoms of pityriasis rosea?

Bottom line: Oral erythromycin may be effective in treating the rash and relieving the itch. There is inadequate evidence for the efficacy of most treatments (including liquorice root, local anaesthetics, penicillin, clarithromycin and oral steroids).

Caveat: Limitations of this review include the small number of trials identified (3), the small number of participants involved, the inadequate methodology of two of the studies, and finding only 1 small study (40 people) that reported the clinical benefits of oral erythromycin. However, the methodological quality of this study was judged to be good.

Context: Pityriasis rosea is a scaly rash that affects mainly young adults. It is relatively common, affecting about 170 out of every 100,000 people in the community each year. About 50 per cent of patients experience moderate to severe itch, but most people recover within 2 to 12 weeks.

Cochrane Systematic Review: Chuh AAT et al. Interventions for pityriasis rosea. *Cochrane Database of Systematic Reviews* 2007, Issue 2. Article No. CD005068. DOI: 10.1002/14651858.CD005068.pub2.

Note: This review contains 3 small trials and 148 participants.



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PEARLS

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