



ACNE GUIDE:
*Understanding &
Treating Acne*





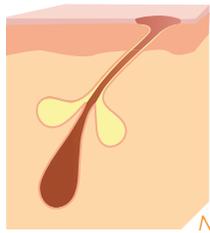
INTRODUCTION: *The Prevalence of Acne*



An estimated 50 million Americans are affected by the symptoms of acne¹. While adolescents and young adults are most affected (a whopping 75 to 85 percent² of them experience the condition), for three to 12 percent of the population, it persists into middle age¹⁴.

It's not surprising then that acne is the most common skin condition treated by physicians. An inflammatory condition of the hair follicle, acne results in characteristic pimples and cysts that, if not properly treated, can lead to long-term scarring. Beyond scars of the cosmetic variety, acne can also cause scarring of the emotional kind. Individuals with persistent acne often experience depression and anxiety, embarrassment and social inhibition. In fact, a survey³ of British teenagers found that 39% said acne stopped them from making friends.

If you count yourself among the millions of adults with active acne, chances are you've been dealing with it since puberty. Acne is a chronic condition, meaning the disease is long-lasting and has a propensity to recur after symptom-free periods. These factors contribute to the challenge of finding the proper treatment protocol. To that point, consumers on the quest for an acne "cure" spend billions annually on prescription drugs and over-the-counter treatments. Yet, despite the plethora of products developed to eliminate acne symptoms, few do so successfully. Why? Because, most often, each of these products are formulated to address acne symptoms rather than its direct causes. Unless each factor that causes acne is successfully addressed, acne symptoms will recur again and again.



Normal pore



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WHAT CAUSES ACNE?



For those who suffer from acne, the skin's natural rhythm of oil production and sloughing off of dead skin cells is not in balance. *C. acnes* have been identified as causing acne, and while these four factors can individually cause acne to develop, most often several of them are working together simultaneously.

1 - ABNORMALLY STICKY CELLS ("follicular keratinization")

Acne sufferers tend to have excessively "sticky" skin cells that do not shed as they should and, instead, plug hair follicles (the term "pore" refers to the follicle opening). These dead cells block sebum, which builds up as it attempts to reach the skin's surface.

2 - EXCESS SEBUM PRODUCTION

Sebaceous glands are prompted to produce oil by androgenic hormones such as testosterone and androsterone, which are affiliated with the development of masculine characteristics but are present in both males and females. When hormones change or surge, such as during adolescence, pregnancy, menstruation, or in times of stress, sebum production may increase. In some individuals, however, genetics predispose them to chronic excess sebum production.

3 - BACTERIA

Cutibacterium acnes, or "C. acnes," is the bacteria responsible for acne. Because C. acnes live on fatty acids found in sebum, those individuals with excessive sebum production may also have higher than normal levels of acne bacteria on their skin. When

a hair follicle becomes blocked, the buildup of sebum and dead skin cells create the ideal environment for C. acnes, causing the bacteria to grow within the follicle.

4 - INFLAMMATION

It has long been thought that inflammation occurred in acne only after C. acnes bacteria begin to colonize within blocked hair follicles. However, recent research is proving that inflammation actually begins much earlier – when abnormal keratinization occurs – and continues at every stage that follows.

Inflammation is the protective response of the body, however, inflammation inflicts its own damage. Think of it like this: your house is on fire so you call 9-1-1. When the fire department shows up, their powerful hoses put out the fire but they also leave substantial water damage behind. That's how inflammation works. In the case of acne, inflammation helps to address some of the damage occurring at a microscopic level but it encourages the formation of inflammatory acne lesions that are red, enlarged, tender and difficult to treat.



Beyond the four main causes of acne are secondary factors that influence the onset of acne. These include:

STRESS

While any college student during finals can tell you that there certainly is a link between stress and acne, it wasn't proven until 2003. That year, a study demonstrated that acne and stress are connected but that acne breakouts are worse when stress levels are higher⁴. Follow-up studies help explain the relationship: stress causes levels of corticotropin-releasing hormone (CRH) to increase. Because sebaceous glands have receptors for CRH, the increased presence of the hormone signals the glands to begin producing increased sebum.

High-Glycemic Carbohydrates

Foods that are high on the glycemic index (rated 70+), like white bread or potatoes, cause blood sugar levels to quickly spike inducing a large insulin response. Elevated insulin levels trigger a "hormonal cascade" that leads to increased production of acne-causing substances⁵.

Milk

A 2005 study⁶ showed that those who drank three or more cups of milk a day were 22% more likely to experience severe acne compared with those who drank less than one serving each week. The study showed an even stronger correlation between acne and the consumption of skim milk, in particular. The study's author suggested that hormones and bioactive molecules in milk are responsible for encouraging the onset of acne.

MEDICATIONS

While some medications have been shown to trigger breakouts, a direct connection can be difficult to prove. That's because the condition or disease the medication treats is often a source of stress for the patient, making it difficult to determine causation.

Contraceptives

Contraceptives are sometimes prescribed specifically to control acne due to their ability to affect the body's hormone balance, a factor with a direct link to the development of acne.

Oral contraceptives contain both estrogen and progestin. While the estrogen between contraceptive brands is fairly consistent, several types of progestin may be used, with each capable of producing different side effects. Those that are most likely to cause acne contain low amounts of estrogen and a type of progestin that increases the androgen (male hormone) levels in women. Even in this case, however, only women with a tendency toward androgenicity see the onset or increase of acne.

Corticosteroids

Often used to treat asthma and other chronic lung diseases, corticosteroids act as cortisol, a natural steroid produced by the body during times of stress. As such, corticosteroids can stimulate sebum production.

Steroids

Systemic steroids are synthetic versions of cortisol, the body's natural steroid, and are often used to treat skin conditions. These medications may stimulate sebum production.

Anabolic steroids, which are used, and sometimes abused, by athletes and body builders to increase muscle mass, increase the presence of androgenic hormones. Again, androgenic hormones stimulate the sebaceous glands to produce sebum. An excess of male hormones cause the excess production of sebum, one of the four main causes of acne.

COMPROMISED BARRIER FUNCTION

Sitting on the surface of our skin is an invisible barrier comprised of skin oils, dead skin cells, amino acids and more, that works to keep moisture in the skin and bad stuff, like pollutants and bacteria, out of it. However, the barrier is easily damaged through the use of harsh skin care ingredients, over-exfoliation, failing to use moisturizer, and more. When the barrier is impaired, skin is susceptible to dehydration and dryness, which in turn sparks an increase in sebum production as our skin's manner of trying to moisturize itself.





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TYPES OF ACNE

While most individuals consider any type of acne blemish to be a "pimple," there are actually several categories:

1 - COMEDO

Characterized by a plugged and enlarged hair follicle, there are two types of comedones:

Closed Comedo (also called a "whitehead")

A blockage deep below the skin pore, leaving only a microscopic opening at the skin's surface that air cannot penetrate. Because of the lack of oxygen, the dead skin cells and sebum present in the follicle do not oxidize, leaving them colorless and giving them their white appearance.

Open Comedo (also called a "blackhead")

A blockage that is close to the skin's surface, enlarging the pore, allowing oxygen to reach the blockage. This oxidation coupled with the way the blockage reflects light, gives the comedo a brown or black appearance.

2 - PAPULE

Characterized by inflammation, papules are round, raised red bumps that do not have a fluid or pus-filled center. They tend to be painful and, if squeezed, can become infected.

3 - PUSTULE

Also caused by inflammation, pustules appear similar to papules, with the addition of a white or yellow pus-filled center. This is the type of lesion commonly called a "pimple."

4 - NODULE

Blockages within the hair follicle, coupled with a bacterial invasion, can cause the follicle to rupture, resulting in nodules – large, hard lumps below the skin's surface. Nodules are often painful and take weeks or even months to heal. If not properly treated, nodules can recur repeatedly at the same site and have a high risk of leaving scars behind.

5 - CYST

Similar to a nodule, cysts are caused by severe inflammation after a rupture in the hair follicle wall and a bacterial invasion. The difference is that cysts are larger and filled with pus. Again, cysts may recur at the same site if left untreated and leave scars. What's more, nodules and cysts can create channels between them, which makes severe acne all the more difficult to treat.

ACNE SEVERITY



To establish the proper course of treatment, it's necessary to determine the type of acne that is present. Dermatologists do this by examining the skin to review the blemishes present, along with the prevalence of each and their characteristics.

ACNE VULGARIS

The most common type of acne, classified by severity:

Mild Acne

Characterized by the presence of comedones, including either whiteheads or blackheads, or both.

Moderate Acne

Characterized by the presence of papules and pustules. Whiteheads and blackheads may also be visible.

Severe Acne

Characterized by the presence of nodules and cysts.

Acne that is severe typically requires professional intervention by a dermatologist. That's because it may be a sign of a disease or disorder more involved than acne vulgaris, such as:

ACNE CONGLOBATA

Occurring most often in males, acne conglobata is characterized by a proliferation of comedones, pustules and nodules. The nodules may become interconnected through channels, which can lead to extensive scarring.

ACNE FULMINANS

This type of acne develops suddenly and is characterized by extensive inflammation that may go beyond the blemishes themselves to include pain in joints, swelling of the lymph nodes and even fever. Acne fulminans can be severe to the extent that hospitalization becomes necessary.

GRAM NEGATIVE FOLLICULITIS

Individuals with acne who have been treated with antibiotics for an extensive period may develop gram negative folliculitis. This acne-like disorder is caused by a bacterial infection and is characterized by the presence of pustules, nodules and cysts. In most cases, as soon as the antibiotic is discontinued, symptoms of gram negative folliculitis end.

NODULOCYSTIC ACNE

Causing significant discomfort, nodulocystic acne is characterized by the presence of numerous cysts most often on the face, neck and back. Nodulocystic acne has the potential to cause extensive and severe scarring.

ACNE MYTHS

Acne is a condition that has long been plagued by myths surrounding its causes and treatments. Among the more prevalent myths are the following:

Acne is caused by poor hygiene.

The belief that lack of cleanliness causes acne has led many an acne sufferer to scrub their face extensively to get it clean. It's unfortunate because hygiene does not influence the onset of acne. Excessive face washing can actually make it worse.

Eating chocolate and greasy foods causes acne.

The notion that eating chocolate or greasy foods will cause acne has been passed down for decades and yet, no evidence exists to support this claim. The caveat to this statement is that high consumption of dairy in some individuals may encourage the factors that cause acne (see "Acne Causes").

Wearing makeup daily encourages acne.

While makeup does not have the capacity to directly cause acne, some makeup products may block pores and/or dry out the skin, which increases its susceptibility to the condition. For this reason, it is recommended that only non-comedogenic or non-acnegenic makeup products be used.

Sun bathing will clear acne blemishes.

This is the myth that keeps going, probably because, for many, it initially seems to work. Sunlight exposes the skin to blue light waves that kill acne bacteria⁷. However, sun exposure also dries out the skin, which increases the production of sebum. With time, sunbathing can actually worsen acne (not to mention increase the risk of skin cancer and premature aging.)



ACNE TREATMENT



It's important to know what you're looking for before you buy any acne treatment products. We've rounded up this list of proven ingredients that you may find combined in a single product or within a treatment system to offer a complete solution to acne.

INGREDIENTS TO NORMALIZE SHEDDING OF SKIN CELLS *(keratinization)*

Retinyl Propionate

Retinoids, a form of vitamin A, have long been used successfully in acne treatments. In fact, tretinoin, an acid form of vitamin A, is one of the most prescribed acne remedies today. In over-the-counter products, retinol, the alcohol form of vitamin A, is often used. However, in some individuals it can cause skin irritation.

Retinyl propionate, a storage form of vitamin A that concentrates in the epidermis, is less irritating and has been found beneficial in improving acne. In one study that was intended to show retinyl propionate's effects on sun-damaged skin, it demonstrated a near complete reduction in acne among the study participants who suffered from the condition⁸.

Glycolic Acid

Glycolic acid is the smallest, molecularly, of all the alpha hydroxy acids, which allows it to penetrate easily between cells to loosen dead skin, remove cell buildup inside the hair follicle, and open clogged pores and other impactions in oily areas. Continued use helps keep dead skin cells from accumulating on the wall of the follicle to prevent breakouts. A recent study showed glycolic acid significantly reduced comedones, papules and pustules, and reduced the size of pores while rejuvenating skin texture⁹.

Salicylic Acid

Salicylic acid is a beta hydroxy acid that also works to loosen dead skin cells and unclog pores. However, while alpha-hydroxy acids are water soluble, salicylic acid is oil-soluble, which allows it to penetrate more deeply into the pores. With continued use, salicylic acid helps to normalize the shedding of skin cells. Comparative studies of salicylic acid have shown it to be superior to benzoyl peroxide in reducing the number of acne lesions¹⁰.

INGREDIENTS TO REGULATE SEBUM PRODUCTION

Zinc Pyrithione

Zinc pyrithione is an acne ingredient that addresses multiple causes of acne. An antibacterial and antifungal agent developed in the 1930s, it helps to stop the growth of *C. acnes*. It is also beneficial in the regulation of sebum production.

Sulfur

Sulfur is among the oldest ingredients still in use in the treatment of acne. Another multi-tasker, it reduces oil gland activity; dissolves the skin's surface layer of dead cells; and inhibits *C. acnes* growth.

Among the research related to sulfur's use in the treatment of acne, one study demonstrated that sulfur lotion reduced acne symptoms by 83 percent after 12 weeks of treatment¹¹.

Niacinamide

Also known as vitamin B3, niacinamide decreases production of a fatty acid (triglyceride) in the sebaceous glands, thereby reducing sebum excretion rates and overall sebum levels. In addition, it has potent anti-inflammatory properties.

Vitamin D

Acquired by the body both from the diet and by exposure to sunlight (hence, its nickname of "vitamin of the sun"), vitamin D reduces the size of sebaceous glands, thereby the amount of sebum they can create. Evidence has suggested that acne may be caused by a vitamin D deficiency.

INGREDIENTS TO REDUCE C. ACNES

Benzoyl Peroxide

A potent antiseptic, benzoyl peroxide is one of the most commonly used ingredients in the treatment of acne. It delivers oxygen to the pores where the bacteria live, thereby creating an environment inhospitable to *C. acnes*. In addition, it flushes the pores, thereby helping to eliminate congestion. Benzoyl peroxide doesn't create antibacterial resistance, as do some prescription antibiotics, making it a highly attractive ingredient.

Eucalyptus Oil

One of the most versatile essential oils in found nature, eucalyptus oil has many uses in health and skin care. It is beneficial in the treatment of acne due to its antiseptic properties that inhibit the growth of *C. acnes*.

Tea Tree Oil

Extracted from Australian *Melaleuca Alternifolia* tree leaves, topical application of tea tree oil helps reduce bacteria on the skin, lessens inflammation and generally improves symptoms



of acne. A study comparing tea tree oil to benzoyl peroxide demonstrated improvements among patients in both groups, while those using tea tree oil reported fewer of the side effects present in those using benzoyl peroxide, including stinging, itching, burning and dryness¹².



INGREDIENTS TO CALM INFLAMMATION

A plethora of research exists to demonstrate aloe vera's potent anti-inflammatory abilities. Among the more than 200 active components in aloe, it contains salicylic acid and sterols, both of which work to inhibit inflammation. Aloe also has antimicrobial properties and is, therefore, beneficial in helping control *C. acnes*.

Arnica

Commonly referred to as "Leopard's Bane," the arnica flower has been used in homeopathic medicine for hundreds of years. Arnica features anti-inflammatory and antibacterial properties, and aids in the healing of topical skin wounds.

Bisabolol

A colorless viscous oil derived from chamomile, bisabolol has anti-inflammatory properties and is effective in reducing the potential for scar formation caused by acne.

IMPLEMENTING AN ACNE ROUTINE

Just as there are four causes of acne, an optimal routine involves just four steps. While the routine that follows is ideal for those with acne-prone skin or mild-to moderate acne, those with severe acne are advised to see a dermatologist before beginning an acne treatment regimen. Depending on the factors at play, use of prescription-strength treatments may be the best course of action when acne is severe.

STEP ONE: *Morning & Evening*

Cleanse - Twice-daily, wash your face with a gentle cleanser formulated for acne-prone skin. Cleansing is an essential part of any skin care regimen to remove dirt, debris and excess oil that builds up on skin throughout the day. However, it is vital that the cleanser you use does not strip your skin of essential moisture, as products that do so will only encourage acne formation. Your skin should feel comfortable after washing, not tight or dry.

STEP TWO: *Morning*

Apply Acne Treatment - Acne treatment products are typically in a lotion or gel form. An effective acne treatment will work to calm inflammation, fight bacteria and fast-track acne healing while normalizing skin function so the potential for future breakouts is minimized.

Acne treatments should be applied to clean, dry skin. Massage a nickel-sized amount of product onto all areas of the face until fully absorbed. (Be careful to avoid the eye area.) Alternately, acne treatments can be applied solely to acne breakouts, although doing so provides no breakout prevention.



STEP TWO: *Evening*

Apply a Chemical Exfoliator - Exfoliation is an important step for those with acne-prone skin as it encourages the shedding of dead skin cells to prevent clogged hair follicles. Even the most gentle acne products have the potential to cause flaking, so having an effective exfoliator in your routine helps to improve skin texture and tone.

A quick bit of knowledge for you: exfoliators come in two types – mechanical, which works by physically removing dead skin cells (think skin polishes, sugar scrubs, etc.) and chemical, which works by using acids to dissolve the “cement” holding dead skin cells together so they can be easily sloughed off. Mechanical

exfoliation is typically too aggressive for acne-prone skin and can cause worsened inflammation of active breakouts. For that reason, we advise selecting a chemical exfoliator. This can be a leave-on product that is applied during the skin care routine or may be a separate exfoliating treatment that is implemented outside of your skin care regimen.

STEP THREE: *Morning & Evening*

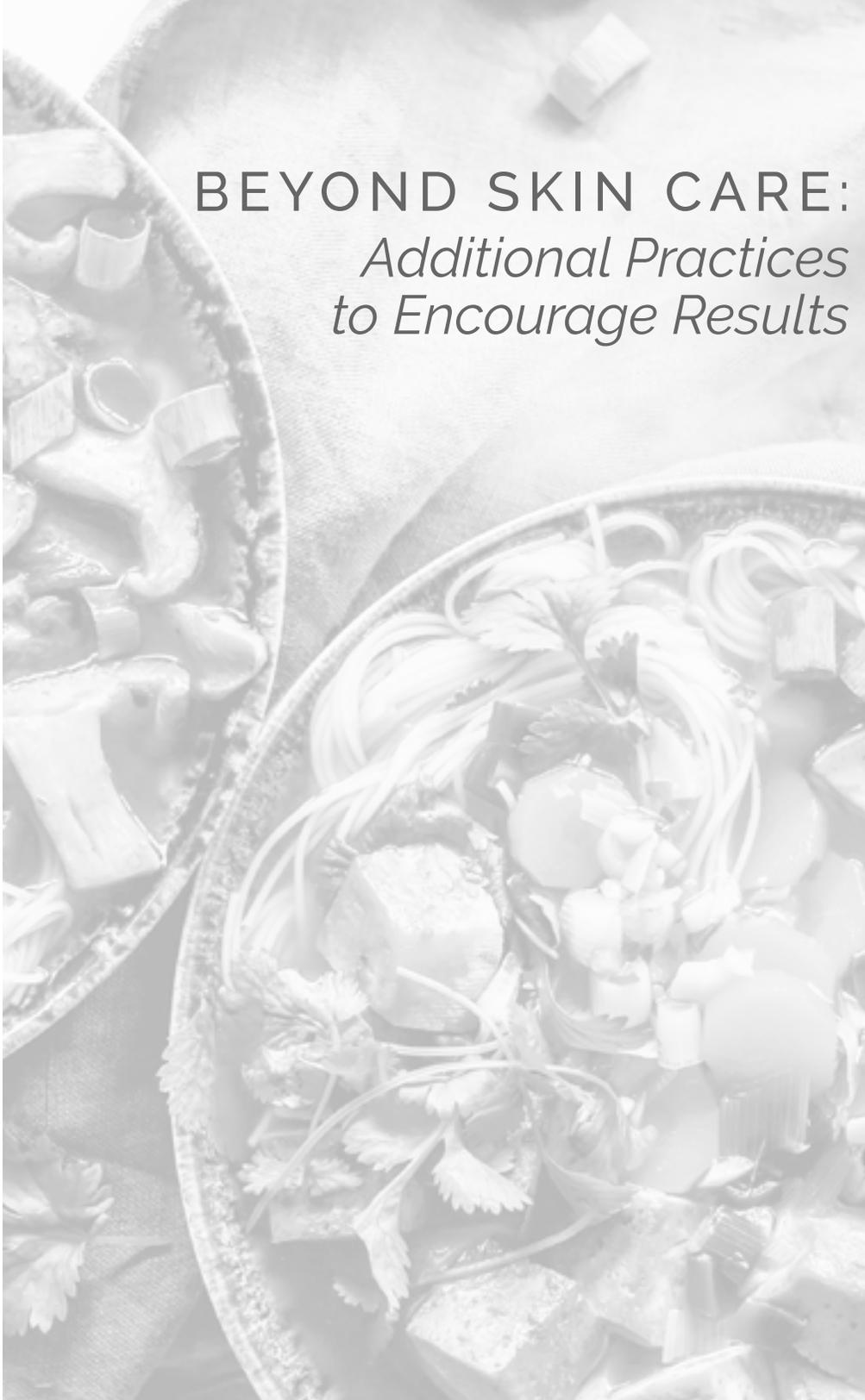
Apply Moisturizer - There is often confusion surrounding the use of moisturizer by those with oily skin, with many believing that they can skip this step. That is untrue. Those with oily skin still need a moisturizer to hold in skin hydration. Without one, even oily skin can become dehydrated, which will cause it to produce even more oil to try to overcompensate for the lack of moisture.

Those with acne-prone skin should look for formulations created to address their skin's unique needs. Typically, such moisturizers will work to moisturize the skin while calming inflammation and minimizing acne bacteria.

In the morning, it is vital to utilize an acne moisturizer formulated with sunscreen, as the exfoliation step puts the skin at increased risk of sun damage. In the evening, utilize an acne moisturizer free of sunscreen.

THROUGHOUT THE DAY

To calm inflammation and the discomfort that can accompany breakouts, it is advised that a gentle, hydrating toner be spritzed onto the skin throughout the day. Daily use of a toner in this way will help to accelerate acne improvement.



BEYOND SKIN CARE: *Additional Practices to Encourage Results*

While changing your skin care routine to one better focused on acne will certainly generate improvements, it's often necessary to evaluate your habits to determine other areas that may be influencing the severity of your breakouts. Consider the following suggestions:

1 - CLEAN UP YOUR DIET

As we already explained, food doesn't directly contribute to acne. However, if you're a big milk drinker or if you tend to consume a lot of simple carbs, there's a chance your diet is playing a role.

Build your diet on a foundation of fresh fruits and vegetables, whole grains and legumes, which will not only improve your overall health but also deliver a good dose of antioxidants, which help to prevent cellular damage. Minimize consumption of high-glycemic foods like white bread and potatoes, turning instead to more nutritious alternatives, and limit dairy.

2 - ONLY USE THE PRODUCTS IN YOUR NEW ACNE REGIMEN

Most of us who have battled acne have accumulated a surplus of skin care products in our attempt to find a magic bullet for our skin concerns. It's important, however, to discontinue the use of anything outside your acne skin care regimen. This is important for two reasons: 1) you can't determine if your current regimen is working if you're occasionally adding in other products and 2) some skin care products include harsh ingredients that cause inflammation and could exacerbate acne conditions.

Give your new acne regimen a month of consistent use before you determine if it is working. In some cases, the start of an acne treatment regimen will cause skin to initially appear worse before it begins to improve.

3 - UTILIZE ONLY NON-COMEDOGENIC MAKEUP

You can have the best skin care regimen but if the makeup you use is clogging pores, it won't bring improvement. As someone with acne, you need to be very discerning with the products you let touch your skin. Many individuals with acne-prone skin find that mineral-based formulations are best tolerated.

4- INQUIRE ABOUT ANY MEDICATIONS YOU'RE TAKING

If you've been prescribed medications by your doctor that are to be taken on an ongoing basis, talk to them about your acne concerns. They can tell you if acne may be a side effect of the medication and potentially find an alternative that will not affect your skin. (Important note: do not stop taking a medication simply because of acne concerns. Your health is priority.)

5 - DON'T POP PIMPLES – AND DON'T PICK AT YOUR SKIN

We absolutely understand how tempting it is to pop a pimple but if it isn't done properly the pimple can turn into a painful and long-lasting cyst that may likely result in a scar. Same goes for picking at your skin. For best results, see an esthetician who can professionally perform extractions.

6 - CLEAR YOUR HEAD

Because stress can be a secondary factor in the onset of acne, ensuring you deal with it is paramount. Consider adding yoga, meditation or journaling to your daily schedule. And while you're at it, get your body moving. Exercise not only helps to beat stress but also helps to level out blood sugar, which in turn encourages a reduction in inflammation.

7 - GET PROFESSIONAL SKIN TREATMENTS

Seeing an esthetician who specializes in acne can be a great way to spruce up your skin. Among the treatments they may consider, depending on your unique skin needs, are chemical peels, laser treatments, LED light therapy, or electrotherapy.

8 - BEFORE GIVING UP, SEE YOUR DERMATOLOGIST

If you reach the point where you've tried all the advice outlined in this guide and just aren't seeing improvement (an unlikely but possible outcome), it's time to see a dermatologist. He or she will likely offer you a prescription intended to address the underlying skin issues. However, be sure to review the potential side effects of any medications before committing to them. Education is key!



LEXLI ACNE KIT



Meet the Lexli Acne Kit: one of the most potent and effective acne systems available over-the-counter. These products are designed to address the four main causes of acne to clear blemishes while minimizing the potential for future breakouts.

HOW IT WORKS

When used as directed, morning and evening, the products in the Acne Kit work in concert to nurture acne-prone skin 24-7, resulting in reduced skin inflammation and redness, unclogged pores that appear smaller, skin that is less oily, and more even skin tone. Each product in the kit features a soothing base of aloe vera in combination with advanced ingredients proven to be effective acne solutions.

PRODUCT BENEFITS

- Products in the kit work to effectively minimize acne breakouts and improve the overall appearance of acne-prone skin
- Tough on acne, yet gentle on the skin. Does not over-dry
- Product can be used by adults and teens
- Features a 30-day supply of product
- Paraben-free
- Certified cruelty-free by Leaping Bunny

WHAT'S IN THE KIT?

16 oz

Removes dirt, debris, acne-causing bacteria and excess oil (sebum) from the skin's surface while deep cleaning the pores.

1 oz

Clears breakouts and eliminates skin congestion. May be used as an all-over acne treatment for moderate-to-severe acne and as a spot treatment for the occasional blemish.

0.5 oz

A daily exfoliator that prevents clogged pores, helps to regulate sebum levels, and improves skin texture.

1 oz

Hydrates the skin and kills the bacteria that causes acne. Added SPF 15 protects the skin from UV damage.



FOOTNOTES



INTRODUCTION

1. American Academy of Dermatology. Skin Conditions By the Numbers.
2. Gollnick H, Cunliffe W, Berson D, Derno B, Finlay A, Leyden JJ, Shalita AR, Thiboutot D. (Jul 2003) "Management of acne: a report from a Global Alliance to Improve Outcomes in Acne." American Academy of Dermatology Inc. 49 (1 Suppl):S1-37.
3. Jancin B. "Teens with acne cite shame, embarrassment about skin." Skin & Allergy News, January 2004, p.28.
14. To learn more about acne and treatment tips, follow the Lexli expert skin care blog

WHAT CAUSES ACNE?

4. Chiu A, Chon S, Kimball A. "The Response of Skin Disease to Stress. Changes in the Severity of Acne Vulgaris as Affected by Examination Stress." Arch Dermatol. 2003 July;139(7):897-900.
5. Dupree, LC. "Evaluating the link between diet and acne." U.S. Pharm. 2009;34(4):26-37
6. Adebamowo CA, Spiegelman D, Danby FW, Frazier AL, Willett WC, Holmes MD. "High school dietary dairy intake and teenage acne." J Am Acad Dermatol. 2005 Feb;52(2):207-14.

ACNE MYTHS

7. Kawada A, Aragane Y, et al. "Acne phototherapy with a high-intensity, enhanced, narrow-band, blue light source: an open study and in vitro investigation." J Dermatol Sci. 2002 Nov;30(2):129-135.

ACNE TREATMENT

8. Green, Orchard, Cerio, et al. "A clinicopathological study of the effects of topical retinyl propionate cream in skin photoaging." Clin Exp Derm. 2002;23(4):162-167.
9. CM Wang, CL Huang, CTS Hu, HL Chan. "The effect of glycolic acid on the treatment of acne in Asian skin." Derm Surg. 2008;23(1):23-29.
10. Zander E, Weisman S. "Treatment of acne vulgaris with salicylic acid pads." Clin Ther. 1992;14(2):247-53.
11. Breneman DL, Ariano MC. "Successful treatment of acne vulgaris in women with a new topical sodium sulfacetamide/sulfur lotion." Int J Dermatol 1993; 32:365-7.
12. Bassett IB, Pannowitz DL, Barnetson RS. "A comparative study of tea-tree oil versus benzoyl peroxide in the treatment of acne." Med J Aust. 1990;153(8):455-8.