Rosacea and Adult Acne: A Worldwide Epidemic

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Adult acne is a conundrum to most patients. Why is an ever-growing segment of the adult population affected by acne? A common belief among the general population is that acne clears after the teenage years. However, this is no longer true. Most adult acne patients seen are women older than 20 years with recurrent nodules on the neck and chin regions that are especially exacerbated around the menses. Despite this, some of the most severely disfigured adult patients are men. Thus, there is no segment of the adult population that is immune to adult acne.

Patients and practitioners alike cannot determine why adult acne is on the rise. Most adult acne cases are of the rosacea type. Rosacea arises in 3 stages: erythema and flushing, inflammatory acneform lesions, and eventual thickening of the subcutaneous tissue and rhinophyma. This form of acne may be environmentally triggered through agents that enhance flushing. It is therefore possible that the rise can be explained by shifts in lifestyle in the population such as increased sun exposure, social drinking of alcohol, high-pressure jobs, and highly caffeinated foods and beverages. Although physicians have intervened in the habits of the general population, such as increasing awareness of the need for sun protection, the rising incidence of adult acne has not stopped. It is likely that lifestyle interventions will not affect the general incidence for 20 to 30 more years.

Although adult acne is not a life-threatening condition, the cosmetic damage is great. Patient self-esteem is often impaired. Furthermore, the cost of acne-related products is high. The problem is exacerbated by the fact that many insurance companies do not cover some of the most effective therapies for adult acne (eg, retinoids) and assume these products to be of purely cosmetic purpose in the adult female.

A further distraction to our patients is the endless cosmetic product lines that are offered for patients with acne. Recently, the New York Times published an article that highlighted the growing industry of adult acne products. This article recognized and brought to the forefront that cosmetic companies are now capitalizing on the surge of adult acne by marketing large numbers of products to adult consumers. Although some products may be mildly helpful, dermatologists often see patients who come in carrying tote bags with emollients, facial scrubs, foundations, herbal and home remedies, multiple cleansers, toners, etc, wondering why their purchases have not improved the quality of their skin.

It is advantageous for practitioners to address concerns of adult acne patients. We need to address the lifestyle alterations that may ameliorate the disease and pursue courses of therapy that will control the illness, thus minimizing the progression of rosacea to rhinophyma. Only practitioner and patient advocacy will help.

REFERENCE