

Why does my skin break out?



Skin Blends CLEAR skin

Acne - Client Education and Instruction Guide

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Introduction

Acne—more commonly called “blemishes”, “zits”, or “a problem complexion”—is simply a genetic disease in which causes the acne sufferer’s follicles react differently than those of a person with clear skin. Acne is common disease and there is no cure. Most teenagers experience acne, and twenty-five percent of them will have it seriously enough to leave permanent scars. While the incidence of adult acne not as common as in adults, it is increasing at an alarming rate, especially among women. Acne sufferers want help, but many have been disappointed by their experiences with dermatologists, estheticians, and products that have failed to achieve results.

But lucky is the acne sufferer who meets a Skin Blends certified clinical esthetician. Our estheticians have been trained to help acne sufferers to clear their skin and keep it clear by controlling the factors that can set off eruptions. This manual will provide the answers and the help you have been looking for to keep your skin clear.

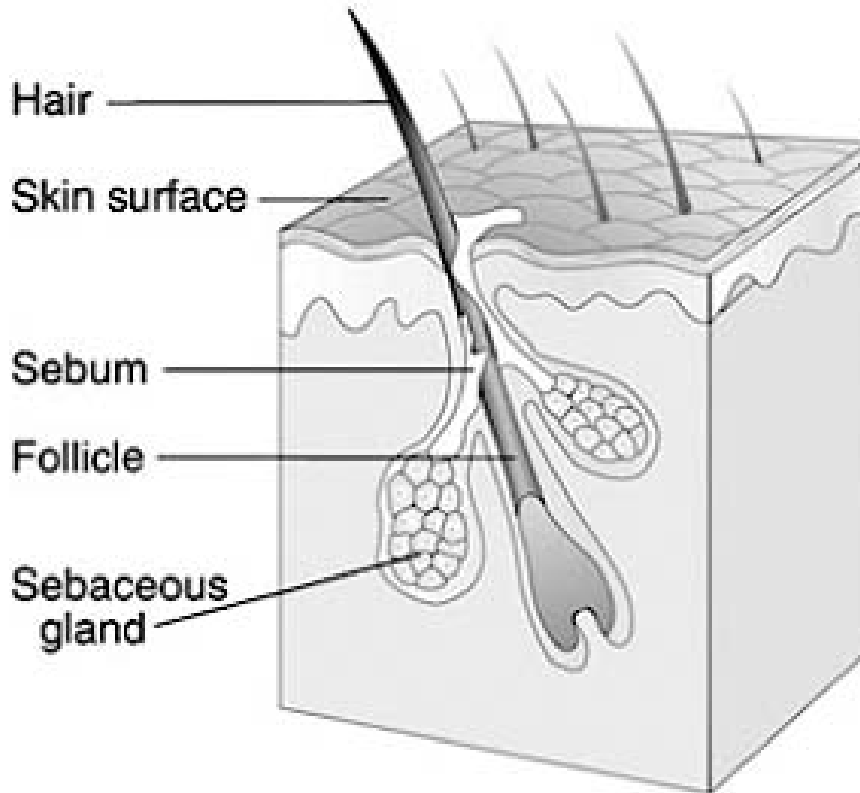
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What is Acne?

Acne is a disease of the sebaceous hair follicle. Each follicle contains several tiny hairs and multi-lobed sebaceous glands. In non-acneic skin, sebum travels up the hair follicle and out to the skin's surface. Acne presents itself when sebum becomes trapped within the follicle. Enzymes from the acne bacteria split the sebum into free fatty acids which are highly irritating to the skin. When a break in the cell wall occurs, these free fatty acids cause inflammatory reactions.

Normal Pilosebaceous Unit



Causes of Acne

Acne is caused by *propionibacterium acnes* trapped in the follicle with sticky sebum and build up of dead skin cells. The secret to controlling acne is to stop the impaction from being allowed to form in the follicle in the first place. The following are the four main causes of acne.

Androgens

Androgens, a hormone produced at puberty, stimulate the sebaceous glands to enlarge and to produce sebum. Monthly breakouts occur when the sebaceous glands are sensitive to androgen stimulation. Men have 90% more testosterone in their bodies than females. When females experience a surge in testosterone (i.e. birth control pills), it can create a hormonal imbalance and cause breakouts.

Sebum

Androgens increase sebum production. An excess of sebum increases the likelihood for acne. Sebum travels up the hair shaft where it mixes with bacteria and dead skin cells that have been shed from the lining of the follicle.

Hyperkeratinization

During puberty, skin cells inside the follicle shed more rapidly and tend to stick together. This process is known as hyperkeratinization. Sticky skin cells mix with sebum to form a plug in the follicle. This plug is called a microcomedone and is the beginning of all acne lesions.

Bacteria

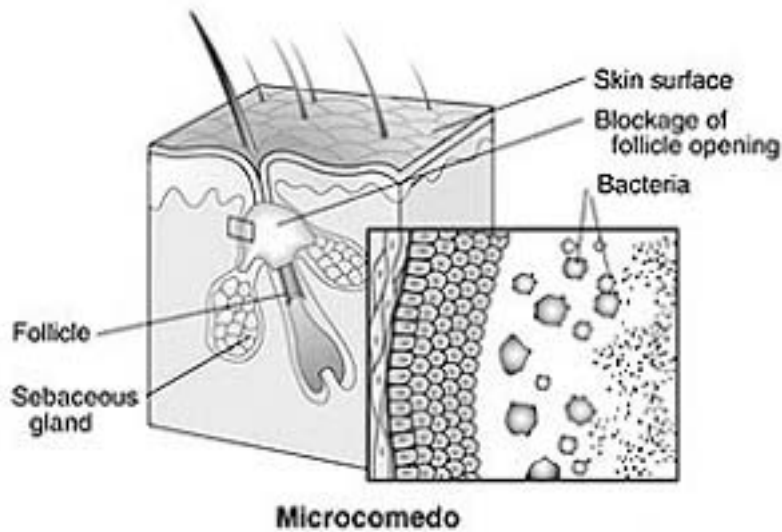
Plugged follicles are a breeding ground for bacteria, specifically *propionibacterium acnes*. Some *p. acnes* bacteria is normal but too much will produce chemicals that can cause inflammation in the follicle and surrounding skin. *P. acnes* bacteria will multiply rapidly multiply in clogged hair follicles where sebum is trapped.

Types of Acne Lesions

Acne is acne. It is how the skin responds that creates the different types.

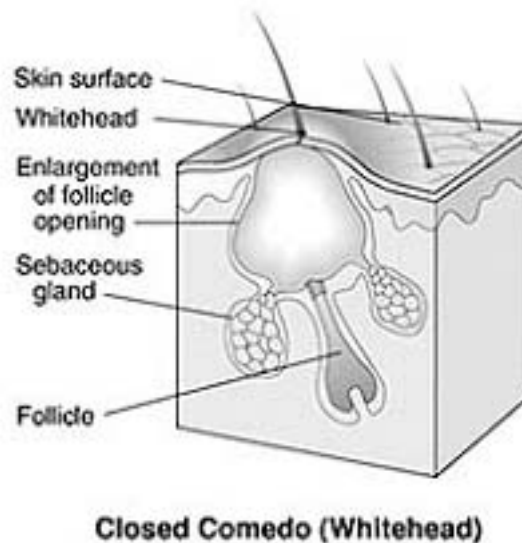
Microcomedo

This is the first stage of a comedo formation; it is so small that it can only be seen with a microscope. The plural term for comedo is comedones. Comedogenic means “likely to cause comedones.



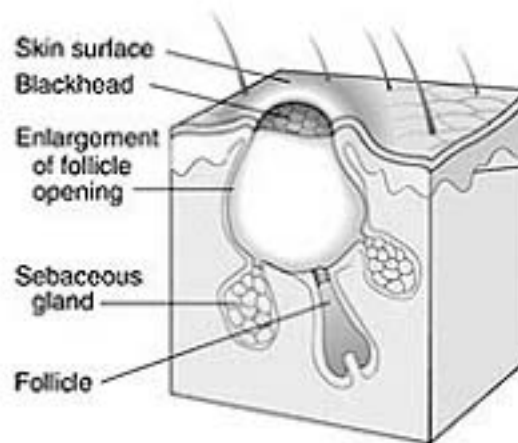
Closed Comedo

The microcomedo grows into a closed comedo or whitehead, at which point it will become inflamed.



Open Comedo

An open, firmly packed non-inflammatory comedo with a dark top from oxygenation. This is also known as a blackhead.



Open Comedo (Blackhead)

Inflamed Acne

Acne that becomes inflamed is usually more serious. Inflammation begins with a papule that can progress to more serious lesions. Inflammation is caused by chemical reactions or bacteria in clogged follicles. Inflammation leads to scarring and must be controlled as quickly as possible.

Papule—An inflammatory comedo that resembles a small, red bump on the skin.

Pustule—An inflammatory comedo that looks like a whitehead surrounded by a red ring of inflammation.

Nodule—The most severe type of acne lesion, a nodule is usually a painful lump that is large, deep-seated, and filled with pus. This type of acne can leave permanent scarring. It is sometimes called an acne “cyst”.

Cyst—This term is used for nodules in which the follicle has broken under the skin.

Five Medical Grades of Acne

Grade 1: Mild—This level involves few to numerous blackheads or whiteheads. No inflammation is present.

Grade 2: Moderate—This level involves blackheads, whiteheads, and papules with slight inflammation. The chest and shoulders may also be effected. This type of acne may be a condition called **Maturation Arrest Acne**. It is called this because the follicle won't open up. A person with this condition may have as many as 300 to 400 closed comedones. This is the hardest type of acne to clear.

Grade 3: Severe—This level involves blackheads, whiteheads, and pustules with deeper inflammation; usually covering the face, shoulders, and chest.

Grade 4: Very Severe or Cystic Acne—This level involves extensive eruptions and highly inflamed, pus-filled nodules and cysts. Cystic acne may cover the entire upper body.

Grade 5: Acne Necrotica—This is a condition in which the acne eats the skin.

Three Occurrence Phases of Acne

Constant—Acne lesions are constant.

Sporadic (Stress)—Acne lesions tend to flare up from time to time.

Cyclic (Monthly)—Lesions flare up 7 to 10 days prior to menstruation. This is caused by increased androgens in the bloodstream resulting in increased sebum production.

Location of Acne

The main areas that acne is likely to occur are the face, chest, shoulders, and back.

Chin area—Acne located here is usually hormonal.

Neck area—Acne located here is usually more sensitive.

Back—The skin on the back is thicker skin and thus the follicles deeper.

Cheek area only—Acne located here is usually cometica acne from blush or FD&C dyes. This is especially likely if all all the impactions are at the same stage. Another word for having several impactions at the same stage is **monomorphesis acne**.

Acne Myths Corrected

Acne is such a misunderstood disease. Below are some myths and why they prevailed.

Pores Can Be Opened and Closed

Pore size and shape are genetically predetermined and cannot be changed. Pores are also unable to be opened and closed, as they have no muscles to do so. Pore openings stay the same size unless an impaction such as a blackhead builds up inside and dilates the opening.

However, it is true that hot water or steam can artificially create the effect of closing pore openings by temporarily swelling the surrounding skin to. Cold water, on the other hand, can make pore openings seem larger or more open, though in reality they remain closed.

Unhealthy Foods Cause Acne

If eating foods like pizza or chocolate, creates anxiety, it is possible that the *anxiety* could cause a flare-up. A healthy diet *is* important, but junk food is not what causes acne. An unhealthy diet does create stress in the body and weakest link is often the sebaceous hair follicle. As for greasy foods, the oils ingested by the body are broken down within the digestive system and have nothing to do with the oil that appears on the skin. This oil, called sebum, is manufactured by the sebaceous glands.

Acne is more likely attributed to the salt that used in oily foods. The iodides in salt aggravate acne. Dairy foods, including milk chocolate, can also be a problem because of the hormones and salt licks given to cows. Other hormone-rich foods can be a problem as well. For severe acne sufferers, it is wise to keep a food diary to help identify trigger foods for the individual.

Acne Is Caused By Dirty Skin and Hair

First of all, acne cannot be scrubbed away. Acne impactions extend deep beneath the surface of the skin, and they are not dirt. Blackheads can be confused with dirt, but a blackhead is actually thousands of dead skin cells that have been pushed into the follicle along with the skin's own oil and other debris. A blackhead's black color is a result of the bacteria's exposure to the oxygen in the air. Since acne impactions develop deep below the surface, cleansing cannot reach acne, nor can dirt on the surface of the skin cause acne in the first place.

As far as the hair-dangling myth is concerned, it may have started because people who have acne on their foreheads sometimes try to cover their acne with bangs. Comedogenic ingredients in hair products can cause problems for acne-prone individuals, but it is sebum, from the sebaceous glands, that creates the problem—not the oil from hair.

It Isn't Acne

Acne is acne, no matter how many or few pimples a person has. Acne occurs and scars one follicle at a time. Even if a person only has only one bad pimple a month, it could amount to sixty scars in a five-year period.

Acne Is Caused By Sexual Thoughts or Behaviors

Some reasons why this myth has prevailed is because acne is triggered by the surge of sex hormones released during puberty. These hormones only cause an acne problem for those individuals who are genetically prone to the disease. Even some birth control pills with high androgen levels can cause acne for genetically-prone individuals. There are birth control pills with more estrogen that can help clear acne. Although sometimes when a female quits using the pill, an outbreak will occur; it seems as if

hormones are suppressed while on the pill. For the record, sexual thoughts or behaviors do not manifest themselves as skin blemishes.

Acne is a Teenage Disease

Acne can strike and subside at any age. Untreated acne can lead to permanent scarring, both emotional and physical. This myth is a sensitive issue for adult acne sufferers.

Acne Cannot Be Treated

There was a time when this was true, and since acne usually runs in families, younger acne sufferers know of relatives who tried to get help and had a bad experience, so this myth prevails. Be assured that, in most cases, acne can be cleared, but it does take a committed effort on the part of the client and the esthetician.

The Right Cosmetics Will Cure Acne

During active years, the disease is characterized by periods of flare-up and remission. At some point, acne burns out; this is a natural occurrence and not the result of using some fancy product. As we study what actually causes acne, you will learn that only the topical application of benzoyl peroxide will clear it.

Three Keys to Effectively Treating Acne

- Eliminate Acne Aggravators
- Consistent Use of Home Care Treatment Products
- Regular Professional Treatments

Key #1—Eliminate Acne Aggravators

Aggravators do not cause acne. Acne is genetic. Aggravators are situations or environments that make existing acne conditions worse and can be categorized as topical, ingested, environmental and internal. There is no cure for acne but elimination of as many of the aggravators as possible will only help keep the skin clear.

Key #2—Consistent Use of Treatment Products

Homecare products are intended to keep appropriate levels of the following in the skin:

Hydration—to keep skin flexible; dehydrated skin clogs easier.

Exfoliation—Exfoliation keeps the follicles open to prevent clogging inside—AHAs, Scrubs.

Treatment Products— Benzoyl peroxide is our most effective treatment for treatment.

Control inflammation by icing—ice freezes the skin; protein peptides break and travel to the area of infection and have an antibacterial effect inside the skin. This is an excellent treatment against inflamed acne like nodules and cysts where the inflammation is deep.

Key #3—Regular Professional Treatment

This includes:

- Extensive hydration to combat the drying effect of the acne treatment products.
- Thorough exfoliation so treatment products are better able to penetrate the skin.
- Activation of the body’s internal self-cleansing mechanism or lymph system.
- Proper extraction to prevent scarring, staining, and worsening of acne condition.

Key #1–Eliminate Acne Aggravators

Topical Acne Aggravators

These are acne aggravators that are either directly or indirectly applied to the skin.

Skin, Hair and Cosmetics Products

Comedogenic ingredients are ingredients that create a blockage in the follicle. A list of some common potentially pore-clogging ingredients is included in the appendix. Ingredients are categorized as highly, moderately, or non-comedogenic.

It's important to remember that ingredients are listed in descending order according to the amount used in the formulation. If a comedogenic ingredient appears towards the end of an ingredient label, the product might be okay. Mildly comedogenic (pore-clogging) ingredients are usually not a problem when used in diluted concentrations. Comedogenic ingredients are not as terrible if used in cleansers, exfoliants, or other products that are applied to the face and then quickly washed away so they are not allowed to be left on the skin to cause problems. In addition, comedogenicity may vary depending on the grade of the ingredient as well as the actual formulation. Be aware that the oils in certain hair rinses and conditioners are meant to cling to hair, and will also cling to skin, which can cause skin problems.

Laundry Products

Laundry detergents and fabric softeners, including the tear off sheets thrown into the dryer with the laundry, can aggravate acne. To be on the safe side, use only “free” products like Cheer Free or Tide Free.

Pressure, Friction, Rubbing and Constriction

Doctors call acne formed by pressure, friction, rubbing, constricting, overheating, and sweating **acne mechanica**.

If a person has the genetic predisposition for acne, it can be set off by mechanical irritation from helmets, chin straps and shoulder pads for football players, headbands, bra straps, belts, or others. Sleeping on only one side of the face, resting one's head in their hand and shouldering the telephone can cause friction and occlusion resulting in acne. Glasses and sunglasses can explain acne behind and around the ear lobe plus the inside nose and under eye areas where the frames meet the skin. It is important to clean all parts of the frame, not just the lenses. Backpacks are often the culprit for localized acne on the back. There are lots of self-explanatory names for acne mechanica including “waistline acne”, “truck driver acne”, and “football player acne”. “Lifeguard acne” comes from sitting in tight, wet bathing suits for long periods of time. The moisture and heat form a pressure cooker situation for the acne follicles. “Plaster-cast acne” is formed in the moist wet environment the skin makes under a plaster cast.

Remember the microcomedones in the follicles are waiting for something to set them off. Even little manipulations like pressure, friction, rubbing, and constriction are enough to encourage them to rupture.

Sweat

Sweat forms the perfect climate of moist and heat that acne seems to thrive on so it is important that acne sufferers wash sweat away as soon as possible. Also, a home care regimen incorporating benzoyl peroxide is also effective

Ingested Acne Aggravators

These acne aggravators are part of many of the feeds we eat.

Iodides in Foods and Supplements

When a person eats iodide, some mixes into the bloodstream, but the excess is excreted through the oil glands. When excess is excreted through the oil glands, it irritates the follicles and causes flare-ups. Health food stores often carry products with high levels of sea salt; this can be a problem for acne sufferers. Most junk foods contain high levels of salt and therefore iodine. Many diet pills, supplements, drinks, etc. contain too much iodine as well. An extensive list of various food and their iodine levels can be found in the appendix.

Medications

Corticosteroids—Steroids are often prescribed for rheumatoid arthritis, kidney ailments, chronic allergies. Increased acne is an unfortunate, but sometimes necessary, side effect of these medications.

When steroid pills are used by professional athletes and bodybuilders to increase muscle development and strength, they are often unaware that increased acne, liver damage, and dangerous hormonal imbalances are also a direct result of their steroid use.

Synthetic Adrenal Stimulating Hormone (ACTH)—stimulates the adrenals to produce more corticosteroids; often used for multiple sclerosis; again, acne is an unfortunate side effect of these drugs.

Danazol or Danocrine and other Synthetic Hormones—similar to testosterone, these may cause acne flare-ups and excess hair growth on the face and body. These are given to women for endometriosis; other hormones are given to women with fertility problems or menstrual difficulties.

Central Nervous System (CNS Drugs)—many of these can be responsible for acne flare-ups. Talk with your doctors; sometimes an alternative drug is available.

Birth Control Pills

The same birth control can have different effects on different women. There have been some exceptions but for the most part androgen (male hormone) dominant birth control pills usually worsen acne while female hormone dominant birth control pills containing estrogen usually help clear acne.

Androgen–dominant pills are usually testosterone. Gynecologists like to prescribe them because there is less likelihood of cardiovascular problems such as blood clots and migraine headaches. However, they can also worsen acne. Examples include Ovral, Lo-Ovral, Lestrin, Norlestrin, and Norinyl.

Female-dominant pills are usually estrogen. The synthetic estrogen tells the pituitary to quit producing all the hormones normally produced in the ovaries, half of which are testosterone. The lower level of testosterone in her body helps clear her acne. Examples of birth control pills and the level of estrogen contained in them include Enovid-E (100 mg), Ovulen (100 mg), Enovid (75 mg) and Demulen (50 Mg), and Orthonovum (35 mg). Sometimes the Orthonovum does not have enough estrogen to clear acne.

Post pill Flare-Up—about 90 days after discontinuing the pill and about 90 days after pregnancy, acne sufferers may experience a severe acne flare-up. This is due to hormonal fluctuations. Sometimes the body is able to correct itself and clear the acne but sometimes the acne may continue for years. Doctors do not know why.

Topical Medications

Corticosteroid or Steroids—used on a short-term basis to stop the itching or rashes associated with poison ivy, poison oak, etc. is okay but many women use it as an anti-aging cream. This might work for a little while but the long-term effect is a thinned epidermis. This causes skin tissues to atrophy and can also create red blotchy areas where dilated blood vessels begin showing up. The same is true for rosacea. At first the steroid cream appears to help but then the rosacea will get much worse.

Recreational Drugs

Marijuana—even though there are reports that state that pot lowers testosterone most acne sufferers experience major improvement when they refrain from smoking pot. This might be because pot first raises testosterone and then lowers it and the fluctuation is stressful to the follicle.

Speed and other recreational drugs—all of a problem for those who suffer from acne because they put more stress on the body.

Environmental Acne Aggravators

These aggravators are part of our everyday environment.

Sunlight

Of every ten acne sufferers who spend a week at the beach, one acne condition will get better, eight will stay the same, and one will get worse. The ultraviolet rays of the sun irritate and damage the skin, whereby the skin responds by producing replacement cells. How the follicles respond to these replacement cells determines the effect on the skin, if any. One acne condition gets worse because the replacement cells sludge up in the follicles creating an acne flare-up. One gets better because the increased cell production flushes out the pores, and loosens comedones. For the other eight, the additional replacement cells pose no problem.

Sun induced acne appears as pink papules that quickly mature not small pustules mostly on the chest and back but sometimes on the face. A flare-up in acne after sunbathing may also be the result of using comedogenic tanning products or an increase in heat and humidity.

Sun-improved acne may be a result of the relaxation experienced while sunbathing and the extra sleep obtained. In addition, the darker color may provide a cover-up effect for lesions, and red spots. The sun damages and prematurely ages the skin by breaking down the collagen layer and may even lead to skin cancer. The same is true for ultraviolet radiation from artificial sources (sunlamps, tanning beds, etc.) Overall, the risks outweigh the benefits.

Seasons

Alain Reinberg, a French endocrinologist, discovered that testosterone levels in humans reach their high in October and their low in May. This is triggered by the changing lengths of the day and the amount of time the body is exposed to ultraviolet light). This seasonal pattern is most obvious in areas with dramatic seasonal climate changes. Scientists speculate that the reason humans produce more testosterone in October is because in earlier times, a baby would have the best chance for survival if born in midsummer. Not all acne patients notice a seasonal pattern, but some report a flare-up period during the spring. If a pattern does exist, treatment can be stepped up to stay ahead of the body's hormonal cycle.

Climate (Heat and Moisture)

It is not known for sure why heat and humidity aggravate acne so badly. It might be because the stratum corneum, which absorbs moisture from the environment, can swell up to 300% when immersed in water. This swelling could cause pressure and lead to a breakdown in a vulnerable follicle wall. Many people use saunas or steam rooms believing they are opening up their pores. If anything, they are swelling them shut, which is okay for most people, but can cause pressure on the weak follicle walls of acne prone individuals.

The only time steaming beneficial to an acne sufferer is prior to extractions. This is because it temporarily softens the skin and increases blood flow, making extraction easier. That said, both steaming and extraction should only be performed after and along with an aggressive benzoyl peroxide peeling treatment. Daily at-home steaming is likely to be excessive and result in flare-ups.

The most extreme example of the effect of heat and humidity is the tropical acne which afflicted American soldiers in the Vietnam War and in Guam in World War II. This disease attacked its victims (men aged 25 to 40 who once had mild to moderate acne) after about 3 months in the tropics. Tropical acne comes on suddenly and sweeps over the entire body, usually only sparing older areas of acne involvement such as the face. The lesions are large, numerous, severely inflamed and painful. The

disease subsides after three to four months after removal from the tropical climate, although scarring remains. The stress of combat and rigorous training, over-hydrated skin, and the pressure and friction of gear all may have been involved.

Occupation

If you work around the following substances and it is not possible for you to change jobs, it is important to protect your skin and change clothes frequently.

- **Industrial Chemicals and Oils**

Dioxin—an ingredient found in many herbicides and in Agent Orange; it is also now linked to cancer

- **Coal Tars and Pitches**—road workers and roofers
- **Petroleum Oil**—oilfield and refinery workers, and auto mechanics
- **Grease**—clinging to air in fast food / fried food restaurants
- **Inks and Oils**—used in printing companies

Night employment, broken sleep or a lack of sleep are all acne aggravators. Sleep is important for the body to remain healthy. The body naturally wants to sleep at night when the sun goes down. Anytime we put our bodies in an unnatural situation, it creates stress for our bodies, and for the acne sufferer, this stress leads to acne.

Internal Acne Aggravators

These aggravators are usually the result of specific reactions to stress.

Stress

Stress is by far the number one condition for aggravating an existing acne condition. This is because when a person is under stress, the body suffers first at its weakest link, and for the acne sufferer, the weakest link is the sebaceous follicle. Stress presents itself in acne as either a delayed reaction (hormone connection), or an immediate reaction (interruption of healing).

Delayed Reaction to Stress

When an event (stress) occurs that the brain interprets as a threat, it signals the pituitary gland to secrete a hormone called ACTH. ACTH then stimulates the adrenal glands to release additional hormones. These additional hormones stimulate the sebaceous glands in the skin to increase oil production. This increase in oil production triggers the sludging up of dead cells in the follicles, which become a microcomedone.

For women, this stress-hormone connection is even more of a problem. This is because women produce much of their male hormones in their adrenal glands, which are powerfully stimulated under stress. Most of the testosterone produced by men is produced in the testes, and only a small amount in the adrenal glands. So even when stress stimulates testosterone production for men, their adrenals aren't as easily affected. In addition, a surge of testosterone doesn't affect men as much since they are constantly producing ten times more testosterone than women. This is why the level of acne fluctuates so much in women but remains at a more constant level in men. Acne also tends to burn out at a much younger age for men.

The delay from the stressful event to flare-up will take at least 14 days, and may take as long as a month.

Interruption of Healing

Okay, but what about the major breakout that happens overnight, just after a particularly stressful event? Acne is a chronic disease; even when an individual looks clear, there are still acne impactions at various stages of healing that are just waiting for an opportunity to flare-up. The stressful situation interrupts the

healing process and provides the opportunity for the flare-up. The white blood cells attack areas of weaknesses, and for acne sufferers, this is the follicle.

The way the body responds to acne is the same way it responds to bacteria and viruses in general. Harmful bacteria and pesky viruses are everywhere all the time, but it's only when your body is in a weakened condition that you get sick, catch viruses.

What Your Body Perceives as Stress

Stress does not always have to be bad. In fact, we need a certain amount of stress to live healthy, happy lives, but when the body is plagued with too much stress or lacks the ability to efficiently deal with stress, it becomes *distressful*, and unable to defend itself from disease. Change is even stressful, even when it is for the better.

An important concept to realize is that what a person considers to be stressful and what the body interprets as stressful can be different. Our body's perception of stress dates back to prehistoric times when things like loud noises might mean danger. Many everyday experiences actually stress our bodies. Our bodies' response to stress includes a stepped-up production of hormones, and we know what that means for the acne sufferer.

Sleep Patterns

Our bodies are designed to go to sleep when the sun goes down and to awake when the sun comes up. Upsetting this biological clock seriously aggravates the acne condition. Some conditions will never clear until these sleep patterns are corrected.

Prolonged Noise and Flickering Lights

Life is filled with background noises and even though they might not even pose a threat to you, your body perceives noises as stressful. In fact, studies have shown that noises in factories have actually led to heart disease and ulcers in workers.

Overtaxing the Body

Exercise is good for the body, but too much is overtaxing and stressful to the body. Sometimes acne sufferers will have to make a choice between overtaxing their bodies in stressful sports or a clear complexion.

Strong Emotions

Fear, anger, and anxiety, whether appropriate or not, are stressful. Particularly stressful are long-term and bottled up emotions. These emotions can lead to serious health problems because they exhaust the body and lower the body's resistance so that even normal functioning can become impaired.

Advice About Stress

No one can eliminate stress completely. We each need to identify the stresses in our life; change or eliminate the stresses that we can, and learn to manage the stresses that we cannot change or eliminate. If our “stress meter” is high, we need to balance it by increasing activities to help us relax.

Hormones

Pregnancy—usually, the first trimester (first 3 months) is the worst for the acne sufferer. The last two trimesters, the pregnant mom’s skin is usually clear and glowing. Then, ninety days after the birth, the mother’s acne flares-up because it lacks the estrogen it was receiving while pregnant. Sometimes the body corrects itself, sometimes the acne remains for years.

Menstrual Cycle Flare-ups—are caused by fluctuating hormones. These could be more accurately named *mid cycle acne* or *third week acne*.

Although testosterone is traditionally blamed for monthly acne breakouts researchers now feel the hormone responsible for the third week acne flare-up is progesterone. There is a rapid increase in progesterone at exactly the same time the premenstrual acne breakout begins. A new low-dose estrogen pill, Orthonovum 35, eliminates the progesterone surge but does not reduce sebum production. This would be a good choice for someone with monthly flare-ups due to an increase in progesterone.

The best way to treat monthly flare-ups is to do a peel mid cycle and increase benzoyl peroxide application until the beginning of the menstrual cycle.

Bowel Detoxification

There does seem to be a correlation for some acne sufferers between constipation and acne. If this seems to be a possibility, flax seed tablets are available in most health food stores.

Key #2—Home Care Treatment Products and Goals

Home Care Treatment Goals: Hydration, exfoliation, emulsification

Benzoyl Peroxide—Our Anti-Acne Weapon

Benzoyl Peroxide is our treatment of choice for acne because it is the only product that will penetrate into the follicle and destroy the bacteria that is responsible for acne. Benzoyl pulls the peroxide down inside the follicle so it can clean or kill the bacteria.

Cleanser

Active Ingredient: 2.5% Benzoyl Peroxide

Other Ingredients: Deionized Water, Ammonium Lauryl Sulfate, Disodium Cocoamphodiacetate, Propylene Glycol, Carbomer 940, Polysorbate-20, Sodium Hydroxide, Methylparaben. Available in a 6 oz. white plastic bottle with press top.

Scrub

Active Ingredient: 2.5% Benzoyl Peroxide

Other Ingredients: Deionized Water, Ammonium Lauryl Sulfate, Disodium Cocoamphodiacetate, Polyethylene Beads, Propylene Glycol, Carbomer 940, Polysorbate-20, Sodium Hydroxide, Methylparaben. Available in a 6 oz. white plastic bottle with press top closure.

5% Benzoyl Peroxide

Active Ingredient: 5% Benzoyl Peroxide

Other Ingredients: Deionized Water, Propylene Glycol, Carbomer 940, Sodium Hydroxide, Methylparaben., Propylparaben. Available in a 1 oz. white plastic bottle with press top closure.

10% Benzoyl Peroxide

Active Ingredient: 10% Benzoyl Peroxide

Other Ingredients: See 5% formula above.

Alpha and Beta Hydroxy Acids

Alpha hydroxy acids (AHAs), like glycolic acid and lactic acid, loosen the intercellular cement that causes the cells to stick together in the follicle. Oily skin seems to get the best results with glycolic acid while dry and mature skins do better with lactic acid. Combination skins may prefer a blend of glycolic and lactic. Beta hydroxy acids (BHAs), like salicylic acid, strip away the outer layer of dead skin cells which trap oil, dirt, and bacteria on the skin.

Toner

Salicylic Acid, Deionized Water, SD 40 Alcohol B, Aloe Vera Gel, Polysorbate 20, Glycerin, Sorbitol, Salicylic Acid, Sodium PCA, Allantoin, Phenoxyethanol, Methylparaben, Butylparaben, Ethylparaben, Propylparaben, Disodium EDTA. Available in a 4 oz. white plastic bottle with press top closure.

Alpha Beta X

6% Glycolic Acid, 3% Lactic Acid, and 1% Salicylic Acid

Specialty Acne Fighting Products

The following list of products can be added to any existing treatment.

Healing Sulfur Mask

Active Ingredient: 10% Sulfur

Other Ingredients: Deionized Water, Bentonite, Propylene Glycol, Glycerin, Kaolin, Magnesium Aluminum Silicate, Zinc Oxide, Glyceryl Stearate, PEG 100 Stearate, Polysorbate-20, Titanium Dioxide, Diazolidinyl Urea, Dimethicone, Carbomer 940, Sodium Hydroxide, Methylparaben, Propylparaben, Quaternium-15. Available in a 2 oz. white plastic jar.

Control Serum

Antibacterial formula to help control acne conditions by exfoliating, hydrating, controlling sebum, and calming redness. Main ingredients include Colloidal Sulphur, Zinc, Willowbark, Yeast, Green Tea, and Calming Botanicals. This active can be used straight on the skin like an ampule during treatment, sold as a serum or blended into their homecare products. Available in a 1 oz. cobalt blue bottle with eye dropper.

Colloidal Sulphur—dissolves surface dry dead cells; reduces oil-gland activity.

Japanese Green Tea—antioxidants to protect skin from damaging free radicals.

Sodium Hyaluronate—a natural agent occurring in human skin that acts as a humectant; capable of binding 1,800 times its own weight in water.

Glycerin—draws moisture to skin; adds suppleness and improves spreadability

Yeast Extract—minimizes dryness and pain associated with severely dehydrated skin from sunburn, windburn, or harsh drying products.

Algae Extract—stimulating, revitalizing, nourishing, moisturizing; anti-inflammatory.

Mugwort (Artemisia Vulgaris) Extract—anti-stinging, anti-irritant, anti-inflammatory

Oat Beta Glucan—a blend of oat extract and refined oat proteins that form an invisible layer over the skin to help retain moisture while promoting the repair of skin cells; has high levels of naturally occurring anti-oxidants to help protect against cellular damage; soothing and healing properties.

Zinc Sulfate—accelerates wound healing and offers protection against UV radiation; promotes collagen synthesis as well as keratinization of the corneum.

Meadowsweet Extract—strong anti-free radical properties, as well as analgesic and topical anti-inflammatory activity. In 1838, an Italian professor first produced salicylic acid from the flower buds of the meadowsweet plant.

Gotu Kola Extract—credited with stimulating collagen synthesis. It does inhibit keratinocyte proliferation so it is helpful for severely dry skin conditions such as psoriasis. Because it stimulates circulation, it is helpful for cellulite and couperose conditions. Other benefits provided include healing, soothing and anti-itch properties.

Taurine, Leucine, Valine, Tyrosine, Arginine, Lysine—skin conditioning amino acids to enhance water retention and moisturization; amino acids stimulate cell regeneration and have anti-oxidizing and anti-inflammatory properties.

Willow Bark Extract—obtained from the bark of the tree; contains tannin and a small quantity of salicin. It helps dissolve the top layer of corneum cells and improves the look and feel of the skin. It is especially effective in products for acne, eczema, and aging.

Vitamin C (L-Ascorbic Acid)

Vitamin C Serum (10% vitamin C) or Super C Power (20% Vitamin C)

Both are designed to protect and support the skin. In addition to Vitamin C, our formula has powerful antioxidants and wonderful hydrators. Vitamin C is a natural sun protection enhancer so this product should be used in the mornings. Super C Power should be recommended to every everyone! We all need it, especially if you are using AHA or BPO and require extra sun protection.

While AHA acids work on exfoliating surface layers of the skin, Vitamin C is credited with being a biosynthesis regenerator (working more to stimulate collagen and elastin at the dermal level). Vitamin C strengthens the skin's immune system. It increases oxygen absorption by the skin and helps cellular repair. It is anti-inflammatory and is a natural preservative. It can have a skin-lightening effect.

Hydrocortisone

Skin Relief Lotion—1% Hydrocortisone to soothe dryness and irritation that sometimes accompanies benzoyl peroxide usage. Available in a 1 oz. white plastic bottle with press top closure.

Additives to Customize Treatment Products:

Eucalyptus	Aloe Vera	Xfoliate	Quench
Geranium	Eye	Xtract	Retinol Plus
Lavender	Heal	Anti-Aging	
Rosemary	Nrich	BCarot	
Tea Tree	Slow	Control	
Ylang Ylang	Soothe	Panthenol	

MORNING SKIN CARE REGIMEN			
	Dry Skin	Combination Skin	Oily Skin
Step 1 Mask for 10 min	Recovery Gel Mask	Sulfur Healing Mask	Sulfur Healing Mask
Step 2 Scrub/Cleanse in Shower	Clear Skin Scrub (if acne is severely inflamed use Clear Skin Cleanser instead)		
Step 3—Tone	Purifying Sal Acid Toner		
Step 4—Vitamin C	Vitamin C Serum for All! Activate powder with Hydrator Toner, shake before using.		
Step 5—SPF 30	SPF 30 Cream	SPF 30 Lotion	SPF 30 Gel
EVENING SKIN CARE REGIMEN			
Step 1—Cleanse	Combo Cleanser - Custom	Custom Cleanse r- Custom	Gel Cleanser – Custom
Step 2—Tone	Purifying Sal Acid Toner		
Step 2.5 – AHA/BHA	Alpha Beta X		
<p>Alpha Beta X (6% Lactic Acid, 3% Glycolic Acid & 1% Salicylic Acid) may only be used after skin has acclimated to Benzoyl Peroxide and approximately two weeks after all open lesions have healed. AHAs and BHAs are irritants that are applied topically to set off a chain of skin regenerating actions within the skin.</p> <p>Level I—Every other night Sensitive skin—use ABX one night on whole face whole and Benzoyl Peroxide the next night on acne prone areas only. Tougher skin—use ABX and let dry then apply BP one acne prone areas only for increased penetration of BP.</p> <p>Level II—Every night Sensitive skin—use ABX on whole face one night and Benzoyl Peroxide the next night on acne prone areas only. Tougher skin—use ABX and let dry then apply BP (acne prone areas only) for increased penetration of BP.</p> <p>Level III—Every third night May use Retinol Plus on the third night (BP one night, AHA second night) if skin needs additional boost.</p>			
Step 3—Protect eyes & lips with Moisture Sealant. then apply Benzoyl Peroxide (See directions on reverse)	5% Benzoyl Peroxide but once under control, mix ½ with ½ Green Tea Gel to make 2.5% solution	10% Benzoyl Peroxide but once under control, switch to 5%; later mix with Green Tea Gel to make 2.5% solution	10% Benzoyl Peroxide but once under control, switch to 5%; later mix with Green Tea Gel to make to 2.5% solution
Step 4—Tone	Purifying Sal Acid Toner—only if Benzoyl Peroxide is rinsed off; if Benzoyl Peroxide is left on the skin, skip this step		
Step 5—Control Serum	Apply on top of BP, or in place of BP if there is a problem with BP. Apply to acne prone areas only.		
Step 6—Night Hydrator	Green Tea Gel as needed – apply only to areas where Benzoyl Peroxide and/or Control Serum have not been applied.		

Directions for use of Benzoyl Peroxide (BP)

Always apply Moisture Sealant to eyes and lips to prevent BP from penetrating into these areas.

Level One (first 4 days)—Apply BP to acne potential areas only. Let set for two minutes and then apply a layer of **Sulfur Mask** on top and let set for 15 minutes. Rinse off and remove using Clear Skin Scrub. Advance to Step 4.

Advance to Level Two after 4 days if no flaking—Same as level one except leave on for 30 minutes.

Advance to Level Three after 4 days if no flaking—Apply and wear overnight. Do not apply Mask.

Advance to Level Four after 4 days if no flaking—Apply 3 hours before you go to bed then rinse & reapply.

If no flaking at Level Four, talk to your esthetician about how to increase penetration & flaking.

Once clear skin is achieved, move back a level and remain there for 4 weeks. If clear skin is maintained at this level, move back another level until you get to Level Three. Once you are maintaining clear skin at Level Three, start using BP every other night. If you can maintain clear skin every other night, switch to every 3rd night. Some acne sufferers will use BP every night always.

If you are using 10% and maintaining clear skin, try switching to 5%. The goal is find that balance of using the lowest level of BP the least times per week to achieve clear skin. This way, you can increase strength or frequency for better clearing during flare-ups.

Cyclic Acne Sufferers—At mid cycle, it is a good idea to schedule a professional peel and increase the percentage and/or frequency of BP used until period begins.

Sporadic Acne Sufferers—Whenever you anticipate or experience “flare-ups”, schedule a series of professional peels and increase the percentage and/or frequency of BP used. Until condition subsides.

If you feel a lesion coming on—Ice it 2 to 3 times daily and then apply BP or SP directly to the area. At nighttime, seal BP in with Healing Sulfur Mask. Icing the skin causes protein peptides within the skin to break and migrate to the area of infection and act as anti-bacterial agent. Icing is a very easy, very powerful tool for acne sufferers to employ in the fight to control their acneic condition.

Spot Treatments—apply benzoyl peroxide to affected lesion; wait a few minutes and then apply a little Sulfur Acne Mask on top. It will suffocate the lesion so the benzoyl peroxide is able to work better.

Questions and Answers About Using Benzoyl Peroxide

What is Benzoyl Peroxide (BP)?

Benzoyl Peroxide is an effective antibacterial ingredient that keeps acne lesions under control by forcing peroxide into the follicle where it releases oxygen. The *p. acne* bacteria that causes acne cannot survive in the presence of oxygen. This stops the acne cycle by reducing the level of free fatty acids and the level of skin infection.

How does Benzoyl Peroxide work?

When applied topically, benzoyl peroxide penetrates into the follicles and releases oxygen. This oxygen acts like bleach, killing the bacteria and opening up the acne impactions.

Are all Benzoyl Peroxide Products the Same?

Absolutely not. Some formulations work and some don't. Some over the counter formulations actually put acne causing ingredients in their formulas so while the Benzoyl Peroxide is clearing the current lesion, the fatty ester ingredient is potentially causing a new lesion. Skin Blends formulations work!

How Long Until Results?

Usually no new lesions appear after 3 weeks of treatments. Acne is frequently under control after 2 months.

Is Benzoyl Peroxide Safe for Everyone?

Usually only highly allergic or sensitive skin types need to be patch tested. Contact dermatitis is rare but does occur in about 2% of everyone who uses Benzoyl Peroxide. Dark skinned individuals are more sensitive to Benzoyl Peroxide. Patch test them and begin application at Level 1. Benzoyl Peroxide can temporarily hyper-pigment black skin – be conservative.

How Do I Perform A Patch Test?

Patch test on the forearm so all can see the results. Clean the test site area by wiping with alcohol. Apply 5% Benzoyl Peroxide. Cover with gauze and seal with occlusive tape. 48 hours is usually a long enough time period for reactions to occur but in extreme cases, reactions may be delayed until 72 or 96 hours after application.

Are There Alternative Treatments Available?

Dark-skinned individuals or those allergic to benzoyl peroxide should try our new Control Serum and our Healing Sulfur Mask. Other treatment options include making custom blended products using the following additives that work well on acneic skins: B-Carot, Jojoba Oil, Quench, Tea Tree or Lavender Essential Oil, and our Retinol Plus. Another wonderful additive is our Super C Activator which contains green tea and zinc.

How Should I apply Benzoyl Peroxide?

First of all, you must wash your hands before and after application. Avoid using moisturizers at the same time as Benzoyl Peroxide because they can act as a vehicle and spread Benzoyl Peroxide into unaffected areas of the face. These areas should not be dried out. Secondly, only apply Benzoyl Peroxide or Sulphur Plus to those areas where breakouts occur. Avoid eye area. Be conservative with lip and neck areas. **Skin will be more sensitive to the sun so avoid direct contact and wear SPF 30 Gel**

Moisturizer every day. Benzoyl Peroxide can bleach fabric and might tarnish jewelry so it is a good idea to put a new white hand towel over your pillowcase everyday and wear white pajamas.

What are normal reactions I should expect to see in my skin?

During the first 3 weeks, while your skin is acclimating to the Benzoyl Peroxide, you may experience itching, burning, redness, dryness, flakiness, and quite possibly a temporary worsening of your acne. You may also experience no discomfort at all. If you become extremely red or irritated, call your esthetician and discontinue using Benzoyl Peroxide or Sulfur Plus for a couple of days. Resume Benzoyl Peroxide or Sulfur Plus application at the level recommended by your esthetician. Do not discontinue the treatment program. **Once your skin has acclimated to the treatment products, the itching, burning, and acne will disappear.**

Clear Skin Success Tips

Acne Treatment Programs need teamwork (esthetician and client) to be successful.

The esthetician’s role is to educate the client about the causes and treatments for acne (clinical and homecare) but the esthetician cannot go home with the client and make sure the treatment products are used and acne aggravators are avoided. Clinical treatments performed by the esthetician are important to exfoliate, hydrate, clean and balance the skin and to adjust homecare regimens as needed.

If a pustule or cyst erupts, please do not pick. Picking only makes acne worse. Call your esthetician and schedule a “mini” appointment for a clean extraction.

In the beginning of your acne treatment program, your esthetician will want to see you once a week to perform clean extractions and to hydrate your skin since BP and SP are so drying. After your acne is under control, appointments will be extended to twice a month and then to monthly maintenance visits.

Acne can be controlled if you are committed to the program and keep up with your homecare and clinical care treatments.

When Treatments is Unsuccessful

Use this guide only after 3 to 4 months of proper treatment by both client and esthetician.

Step 1—Go through all of the Acne Aggravators again with your esthetician.

Step 2—Food, Stress, and Elimination Journal

A well balanced diet free from as much iodine as possible is the best defense an acne sufferer can provide. An unbalanced diet creates stress on the body. When an acne sufferer’s body is under stress, the weakest point, the follicle, is attacked.

It is possible to be “acne sensitive” to a particular food. The only way to know for sure is to keep a journal to identify the suspect food. Once identified, eliminate that food for 60 days and see if there is an improvement.

A journal can help identify and work to eliminate or lessen stressful situations. Stress has to be identified before it can be dealt with.

Lack of proper elimination of body wastes can make an acne situation worse. Suggest flax seed oil supplements.

Step 3—Helpful Supplements

Some people experience improvement taking 100 mg of zinc daily.

Step 4—Make referral to Hypnotherapist to any habits preventing proper healing.

Step 5—Make referral to endocrinologist (a doctor that specializes in hormonal therapy) You may be suffering from an unbalanced hormonal situation.

Step 6—Make referral to dermatologist who will probably prescribe one of the medications listed on the following page

Key #3- Regular Professional Treatments

Committing to a series will achieve the best results in the shortest period of time. The first series should be done at weekly intervals. Later, you may move to 2 week intervals and finally to a monthly maintenance visit.

Reactive Skin

Goal: Moderate Sedation

Skin Conditions: sensitive, allergy prone, rosacea, and severely dehydrated skins

Note: Keep rotating the two treatments listed below. If reactive because of severe dehydration, you may be able to correct this condition and then move to another series category.

1. Gentle Healing Facial Treatment
2. Capillary Strengthening Facial Treatment
3. Moisture Intensive Facial Treatment
4. Gentle Healing Facial Treatment
5. Capillary Strengthening Facial Treatment
6. Moisture Intensive Facial Treatment

Overactive Skin

Goal: Sedation

Skin Conditions: inflamed acne, increased circulation, dilated capillaries, inflammation, irritation, pustules, papules, rosacea, etc.

- 1 – Gentle Healing Facial Treatment
- 2 – Capillary Strengthening Facial Treatment
- 3 – Moisture Intensive Facial Treatment
- 4 – Capillary Strengthening Facial Treatment
- 5 – Moisture Intensive Facial Treatment
- 6 – Capillary Strengthening Facial Treatment

Inactive Skin

Goal: Stimulation

Skin Conditions: non-inflamed acne (open and closed comedones), congested skin, sub-surface bumps, sallow or pale color, puffiness.

- 1 – Moisture Intensive Facial Treatment
- 2 – Oxygenating Workout Facial Treatment
- 3 - Face Firming Facial Treatment
- 4 – Super Exfoliating Facial Treatment
- 5 – Intensive Cleansing Facial Treatment
- 6 – Face Firming Facial Treatment

Appendix

Highly Comedogenic Ingredients

Acetylated Lanolin	Lanolic Acid
Acetylated Lanolin Alcohol	Laureth 4
Almond Oil / Sweet Almond Oil	Lauric Acid
Butyl Stearate	Linseed Oil
Cetearyl Alcohol / Cetareth20	Myreth-3 Myristate
Coal Tar	Myristyl Lactate
Cocoa Butter	Myristyl Myristate
Coconut Butter	Octyl Palmitate 100%
Disodium Monooleamido PEG 2-Sulfosuccinate	Octyl Stearate
Ethylhexyl Palmitate	Oleic Acid (found in vegetable oils)
Glyceryl-3-Diisostearate	Oleic Tar
Hexadecyl Alcohol	Oleyl Alcohol
Isodecyl Oleate	Olive Oil (mild to high)
Isopropyl Isostearate	Peach Kernel Oil
Isopropyl Lanolate	Peg 16 Lanolin
Isopropyl Linoleate	Polyglyceryl-3-Diisostearate
Isopropyl Myristate (IPM)	Sodium Lauryl Sulfate
Isopropyl Palmitate (IPP)	Steareth 10
Isocetyl Stearate	Xylene
Isostearic Acid	Most D & C Red Pigments / Dyes (#3,4,17,19,21,27,30,33,36)
Isostearic Alcohol	Most Powder Binders

Moderately Comedogenic Ingredients

Anhydrous Lanolin	Octyldoecanol
Arachidic Acid	Octyl Palmitate 50%
Ascorbyl Palmitate	PG Dipelargonate
Almond Oil	PG Monostearate
Apricot Kernel Oil	PPG 2 Myristyl Propionate
Capric Acid	Palmitic Acid
Capric/Caprylic Triglyceride	Peanut Oil (mild to moderate)
Coconut Oil	Peg 8 Stearate
Cottonseed Oil	Peg 75 Lanolin
Decaglyceryl Decaoelate	Peg 100 Distearate
Decyl Oleate	Peg 150 Distearate
Dioctyl Succinate	Peg 200 Dilaurate
Exthoxylated Lanolin	Pentaerythritol Tetra Iso-stearate
Glycerol Stearate	Primrose Oil
Glyceryl Stearate NSE	Sandalwood Seed Oil
Grape Seed Oil	Sesame Oil
Hexylene Glycol	Shark Liver Oil
Hybrid Safflower Oil	Sorbitan Oleate
Hydrogenated Lanolin	Sorbitan Sesquinoleate
Isoparaffin C 9-11 and C13-16	Soybean Oil
Isostearyl Neopentanoate	Steareth 2
Laneth -10 Acetate	Steareth 20
Lanolin Alcohol	Sulfated Jojoba Oil
Laureth 23	TEA - Triethanolamine
Mink Oil	Tocopherol (Natural Vitamin E)
Myristic Acid	Wheat Germ Glyceride

Mildly Comedogenic Ingredients

Babassu Oil	Lauryl Alcohol
Butylene Glycol	Lithium Stearate
Candelilla Wax	Magnesium Stearate
Caprylic Acid	Octyl Dimethyl PABA 5%
Carbomer 940	Octyl Palmitate 5%
Carboxymethylcellulose	Oleth-2
Carboxypropylcellulose	PG Carylalate/Caprata
Carnuba Wax	Padimate 5%
Cetyl Lactate	Peg 100 Stearate, Peg 30
Chaulmoogra Oil	Petroleum Distillate
Corn Oil	Polyethylene Glycol (PEG 400)
Crisco	Safflower Oil
D&C Red Pigments #6,7,9	Sorbitan Laurate
Glyceryl Tricaprylo/Caprata	Squalane
Glycol Stearate	Stearic Acid (mild to moderate)
Hydrogenated Vegetable Oil	Sunflower Oil
Laneth-15	Talc
Lanolin, Lanolin Oil	Zinc Oxide
Lanolin Wax	

Non-Comedogenic Ingredients

Acetone	Lanolin Alcohol 10%
Allantoin	Lareth-20
Aminomethylpropionate	Magnesium Aluminum Silicate
Avocado Oil (non to moderate)	Methylparaben
Beeswax (non to moderate)	Mineral Oil (non to moderate)
Behenic Acid	Myristyl Alcohol
Behenyl Triglyceride	Octylmethoxycinnimate
Bentonite	Oxybenzone
Benzyl Alcohol	PABA Octyldodecyl Stearate
Black Walnut Extract	Panthenol
Carmine	Papain
Castor Oil (none to mild)	Paraffin Oil
Ceresin Wax	Peg 8, Peg 200, Peg 400
Cetyl Alcohol (non to moderate)	Pentaerythritol Tetra Capra / Caprylate
Cetyl Palmitate	Petrolatum
Choleth 24	Polybutene
Cholesterol	Polysorbates
Cyclomethicone	Propylene Glycol (non to mild)
Dicaprate / Cecaprylate	Propylene Glycol de Caprylate/Dicaprate
Diethylene Glycol Monoethyl Ether	Propylene Glycol Ricinoleate
Dimethicone	Polyethylene
Dimethicone Copolyol	SD Alcohol 40
Ethylene Glycol Monostearate	Silicone Wax 10% in Dimethicone
Ethyl Ether	Simethicone (none to mild)
Ethyl Hexanediol	Sodium Hyaluronate
Ethylene Glycol Monomethyl Ether	Sodium Lauryl Sulfate 5% in water
Glycerin	Sodium PCA
Glyceryl Triacetyl Ricinoleate	Sorbitol
Hydantoin	Soya Sterol
Hydrogenated Lard Glyceride	Stearth 100
Hydrolyzed Animal Protein	Stearoxy Dimethicone 10%
Iron Oxides	Stearyl Alcohol
Isoparaffin C8-9, Isoparaffin C11-13	Sterol Esters
Isoproyl Adipae	Titanium Dioxide
Isopropyl Alcohol	Tocopherol Acetate
Jjoba Oil (non to moderate)	Ultra Marine Violet
Kaolin	Zinc Stearate

Types of Acne

Acne Conglobata—a very severe type of acne in which nodules are connected beneath the skin's surface to other nodules or acne lesions, usually leaves severe scarring of the face and back accompanied at times by cysts under the arms.

Acne Cosmetica—use of oily and comedogenic cosmetic ingredients causing a non-inflammatory acne condition, usually on the cheeks and around the lip line.

Acne Detergicans—acne caused by overuse of irritating and abrasive scrubbing agents.

Acne Mechanica—caused by mechanical irritation such as chin straps of football players, athlete's headbands, bra straps, etc. Sleeping on only one side of the face, resting ones head in their hand and using the telephone on one side causes friction and occlusion resulting in acne.

Acne Excoriee des Jeunes Filles—a disease of women who compulsively pick their faces, often when there is nothing to pick, often causing horrendous scarring.

Acne Mallorca—caused by prolonged exposure to the sun.

Acne Medicamentos—iodides, bromides, steroids, high doses of b-12, dilantin, barbiturates, lithium, antibiotics, and certain hormones are but a few of the medicines known to cause acne.

Acne Vulgaris Non-inflamed—comedones (plural term for comedo – whitehead or blackhead).

Chloracne—acne caused by constant exposure to hydrocarbons in such substances as motor oil and insecticides, usually in the work place.

Extra Y Chromosome—people with XYY chromosomes may suffer severe acne.

Imaginary acne—acne where none exists (thinking large pores represent acne lesions).

Infantile Acne—often appearing at 3 or 4 months of age; it burns itself out in a year or two and in rare cases is caused by endocrine abnormalities.

Nodulocystic—this severe acne is characterized by the presence of nodules, which can be disfiguring and even painful.

Papulopustular—this is common, ordinary acne also referred to as acne vulgaris. It is a combination of comedones and pustules or papules; may be non-inflamed or mildly inflamed. Severity is determined by the number of papules and pustules – the more there are, the more severe the case of acne.

Perioral Dermatitis—a disease that affects women characterized by bumps, redness, and sometimes itching around the mouth and corners of the nose. This is not true acne.

Pitch Acne—caused by coal tar and dandruff shampoos and medications containing tar.

Pomade Acne—acne around hairline and neck caused by ingredients in hair products.

Premenstrual Acne—probably a result of changes in the progesterone levels.

Rosacea—a condition usually found in fair skinned people having dilated blood vessels, small brittle papules on the cheeks and nose and sometimes an enlarged bulbous nose.

Solar Blackheads—occurs around the eyes of adult Caucasians from excessive sun exposure. Sometimes called **solar acne or senile acne**.

Steroid Acne—internal or topical use of corticosteroids causes this unique follicular inflammation that resolves itself with cessation of steroid therapy.

Tropical Acne—a severe scarring type of acne that afflicts soldiers stationed in the tropics.

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