

HORMONAL TREATMENT OF ACNE

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SUMMARY

Acne is an androgen dependent disorder of sebaceous follicles. Hormonal treatment may, therefore, play an important role in the management of the acne patient.

With the exception of glucocorticosteroids, hormonal therapy of acne involves the use of estrogen or antiandrogens and is, therefore, limited to use in women. The female patient with resistant acne, hirsutism and hair loss is an obvious candidate for hormonal treatment, but other patients may also benefit, particularly if the results of endocrinological evaluation indicate a specific abnormality.

Although some physicians may limit endocrine evaluation to these

women with obvious clinical signs of androgen excess, my own preference is to evaluate any woman with refractory acne. For this purpose I obtain the following laboratory tests:

- 1.- Free testosterone.
- 2.- Dehydroepiandrosterone sulfate (DHEA'S)
- 3.- Luteinizing Hormone (LH)
- 4.- Follicle Stimulating Hormone (FSH)

In addition, a pelvic sonogram may be helpful in determining whether or not polycystic ovaries are present.

Treatment is either directed at the specific abnormality detected or, on occasion, may be empiric. Testosterone elevations are usually ovarian in origin. Therefore the treat-

ment would be estrogen, usually administered in the form of an oral contraceptive. Elevations of adrenal androgen are treated with low doses of dexamethasone (0,25 - 0,5 mg) or prednisone (5,0 - 7,5 mg). In many countries the antiandrogen cyproterone acetate is available. If such is the case then this agent combined with estrogen is frequently the drug of choice. In refractory cases, higher doses of cyproterone than available in the oral contraceptive form may be used. When cyproterone is not available, spironolactone in doses up to 200 mg per day may be used, also in conjunction with oral contraceptives. The latter has proven useful even in patients in whom serum androgen levels are within normal limits.

Finally, in the most refractory cases, a combination of hormonal and retinoid therapy may prove to be the most beneficial.

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