

Rosacea

Rosacea, aka acne rosacea, affects 16 million Americans. Rosacea is characterized by long term redness on the cheeks, nose, chin, and/or forehead and may be accompanied by acne-like lesions, skin thickening, and/or eye changes. Rosacea commonly begins in patients in their 30's, but can appear as early as adolescence. Rosacea occurs in all skin tones. Most patients will experience stinging, burning, redness, and flushing of the skin on their face. Dryness, scaling, acne-bumps, small blood vessels, and eye irritation can also be present.

There are four subtypes of rosacea. Many patients can have more than one subtype of rosacea.

Erythrotelangiectatic – flushing and persistent facial redness with or without small blood vessels

Papulopustular – persistent facial redness along with inflamed, red, acne-like bumps

Phymatous – redness, thickening, enlargement of the skin on the nose, chin, and/or forehead. This type is rare in women.

Ocular – watery or red eyes along with irritation, burning, and/or stinging of the eyes.

Triggers

Heat and sunshine are two of the most common causes of rosacea flares, so it is important for patients to wear sunscreen daily.

Food and alcoholic beverages such as spicy foods, chocolate, caffeine, red wine, beer, bourbon, gin, vodka, and champagne are common triggers. Sensitivity and irritation to facial skin care products, such as exfoliating cleansers, toners, and over the counter acne products, are common. Stress can also be a trigger.

Treatment

Skincare

Treatment of rosacea varies depending on the type and severity of the rosacea; however, all patients are advised minimize their exposure to their triggers and practice gentle skin care. Patients should wash their face with a mild, non-abrasive cleaner, and blot their skin dry. Avoid alcohol containing skin care products, witch hazel, fragrances, abrasive skin care products, and skin scrubs as these can cause redness, burning, stinging, and irritation. Sunscreen with an SPF over 30 should be worn daily. Green tinted cosmetics can be used to lessen facial redness. Chemical peels are commonly avoided as they have the potential to worsen redness and the appearance of blood vessels.

Prescription medications

Facial redness can be reduced with prescription topical medications that are applied daily. For patients with acne-like bumps, topical medications with or without oral antibiotics may be prescribed depending on the severity of the condition. Finally, patients with a severe rosacea may be treated with oral isotretinoin.

Laser and light therapies*

Intense pulsed light (IPL), can improve the signs of rosacea by decreasing facial redness and the appearance of blood vessels. These treatments are performed at monthly intervals followed by maintenance treatments every 6-12 months. Severe papulopustular rosacea can be improved with photodynamic therapy.

**These treatments are not covered by insurance and are considered cosmetic treatments.*

Products and Cosmetic Procedures that are recommended for rosacea skin:

Sunscreen

Colorescience AllCalm SPF 50

Colorescience Sunforgettable brush SPF 50

EltaMD Clear SPF 46

Neocutis Journee SPF 30

Neocutis Micro Day SPF 30

Anti-Redness

Neocutis Peche

SkinCeuticals Phyto Corrective Masque

SkinCeuticals Phyto Corrective Serum

Anti-Aging

Neocutis Biocream

Neocutis Micro Night

Neocutis BioSerum

Cosmetic Treatments*

IPL (Photofacial)

Photodynamic therapy