

Acne in Adolescents: How Emotional Support Improves Treatment Outcomes

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ABSTRACT

The article is devoted to an urgent problem among adolescents acne, which significantly affects both the physical condition of the skin and psycho-emotional health. The paper discusses the physiological causes of acne, symptoms, and areas of localization of the disease, as well as its impact on self-esteem, social adaptation, and quality of life of adolescents.

Particular attention is paid to the comparative characterization of the psychological adaptation of adolescents and adults to standard acne treatments. Adolescents demonstrate greater vulnerability of the nervous system and emotional instability, which complicates the perception of therapy. Compared to adults, adolescents are more likely to need additional explanations about the importance of treatment, as well as psychotherapeutic support to increase motivation and reduce stress. Adult patients, due to their emotional resilience, adapt to therapy more quickly and more easily accept temporary side effects. The proposed interdisciplinary approach to treatment includes the cooperation of a dermatologist, cosmetologist, and psychologist, where the dermatologist develops an individualized medication regimen, the cosmetologist provides skin care, and the psychologist provides emotional support aimed at reducing stress, increasing self-esteem and forming a positive attitude towards therapy.

It is important to introduce treatment methods in stages, including initial psychological and cosmetic preparation, which reduces the risk of side effects and increases patient motivation. This approach not only helps to eliminate acne symptoms, but also stabilizes the psychological state, which significantly improves the quality of life of adolescents and guarantees a long-term result. The introduction of an integrated approach into clinical practice is an effective means of combating acne, especially for the category of adolescents who need more attention to the emotional component of therapy.

Keywords

Acne in adolescents, Interdisciplinary approach, Psychological support, Cosmetic care, Dermatological therapy.

Introduction

Acne is one of the most common dermatological problems that significantly affects the physical and psycho-emotional state, especially in adolescents. This age group undergoes active physiological and psychological changes that make their nervous system vulnerable and unstable [1]. Adolescents have not yet formed stable mechanisms of emotional regulation, which makes it difficult to accept long-term therapy and temporary exacerbations

that often occur at the beginning of standard dermatological treatment [2].

Working with a psychologist is a key stage in the treatment of acne in adolescents. It helps them to better understand the need for therapy, accept temporary difficulties, and build motivation to follow doctor's recommendations [3]. Psychological support reduces the level of stress that can worsen the course of the disease and helps to develop a positive attitude towards treatment [4]. Compared to adults, whose nervous systems are already formed, adolescents need more detailed explanations and emotional support. Adult patients tend to understand the need for treatment

better and adapt more easily to possible side effects due to their greater psychological stability. An integrated approach based on the cooperation of a dermatologist, cosmetologist, and psychologist allows achieving effective and long-lasting results in the treatment of acne in adolescents. This approach not only improves the skin condition but also helps to stabilize the psycho-emotional state of patients, increasing their self-confidence and quality of life. The article substantiates the importance of implementing an interdisciplinary approach in clinical practice to work with adolescents who need special attention to the emotional component of therapy.

Main Part

Clinical Criteria and Sampling Methodology

Acne is a common disease among both adolescents and adults that can be mild, moderate, or severe, each of which requires a separate approach to treatment. Hormonal changes during puberty play a key role in the development of acne [5]. Excessive production of male sex hormones (hyperandrogenism) or increased sensitivity of the sebaceous glands to androgens lead to excessive sebum production. This is compounded by disorders in the process of keratinization of hair follicles, an imbalance in pH, and a decrease in the protective function of the skin [6]. These factors create favorable conditions for the growth of *Propionibacterium* acnes, which provoke inflammation of the sebaceous glands and the formation of acne [7]. The correct classification of acne severity is key to choosing an effective treatment, taking into account both physical and psycho-emotional aspects of the patient's condition.

The study presented three groups of patients suffering from moderate and severe acne, which was determined using the following criteria. Moderate acne is characterized by an increase in the number of papules, pustules, and sometimes cystic elements. The rashes can spread to the face, back, and chest, causing noticeable redness, swelling, and tenderness. In adolescents, this degree is often accompanied by anxiety, decreased self-esteem, and difficulties in social interaction [8]. Severe acne is characterized by deep inflammatory elements, numerous acne cysts, fistulas, abscesses, and constant pain. Rashes cover large areas of the body, leaving scars and post-acne. Severe acne significantly worsens the patient's quality of life, causing depression, anxiety, and social isolation [9].

Group A: patients aged 15 to 17 years with moderate to severe acne, who were treated with drug therapy in accordance with the basic standard protocols for the treatment of acne, depending on the severity of the disease.

Group B: patients aged 15 to 17 years with moderate to severe acne, whose treatment plan, in addition to standard medical treatments, included additional support from a psychologist, namely psychotherapy sessions and skin care procedures by a cosmetologist to achieve maximum results. Group C: patients aged 29 to 33 years who suffered from moderate to severe acne and received standard medical therapy.

Features of the Standard and Complex Approach to Acne Treatment in Adolescents and Standard Acne Treatment in Adults

In group A, adolescents received only standard medical treatment, according to the severity of acne, which included a consultation with a dermatologist and the use of standard treatment protocols that include the prescription of retinoids, antibiotics, azelaic acid, and salicylic acid, which were introduced into treatment immediately after the dermatologist's consultation [10]. However, for many adolescents, this treatment was not enough, as emotional stress caused by acne required additional intervention. Therefore, in group B, an integrated approach was used, namely, psychotherapy sessions and care procedures at a cosmetologist were added to the standard treatment, including a dermatologist's consultation to establish a diagnosis and determine the degree of acne, and prescribe appropriate drug therapy. The next step was to consult a psychologist and schedule psychotherapy sessions. The psychologist's consultation was followed by a consultation with a cosmetologist, who selected skin care products at home and made a care plan in the cosmetologist's office [11,12]. Only after 2–3 sessions of psychotherapy and the introduction of skin care products into the daily use of a teenager from group B did dermatological treatment begin. This allowed us to achieve better results both in skin treatment and in improving the psycho-emotional state of patients.

For adult patients in group C, treatment of moderate to severe acne was mostly based on standard protocols. These patients are less prone to social and psychological problems associated with acne, which allows them to focus on physical treatment without additional interventions from psychologists, as adult patients are usually better able to cope with psychological stress than adolescents [13]. However, for some adults, severe acne can also cause depression and stress, which in turn can worsen the course of the disease [14]. Thus, the approach to acne treatment should be comprehensive, individualized, and take into account the age characteristics of patients. For adolescents, it is important to include additional psychological support and cosmetic care, while for adults, standard medical treatment may be sufficient in most cases, although in some cases, it is also worth paying attention to the patient's emotional state.

Results

The results of the study showed that patients in group B, where psychological support and cosmetic care were used along with standard treatment, achieved better clinical outcomes compared to group A. Psychotherapy sessions helped adolescents better understand the treatment process and become aware of the disease, prepare them for possible acne exacerbations at the beginning of therapy, which reduced stress and contributed to greater adherence to treatment and compliance with all recommendations. Cosmetic procedures and individualized home skin care also helped to reduce adverse reactions and exacerbations, and prepare the skin for topical therapy [15]. In group A, where only the standard approach was used, patients had a harder time accepting temporary deterioration,

which led to a decrease in motivation and increased emotional stress, which further provoked exacerbations and slowed down the recovery process. Adult patients from group C demonstrated a more stable psycho-emotional state, as the period of personality formation and development had already ended, which allowed them to be more understanding and patient with temporary side effects and exacerbations from standard treatments and to follow the dermatologist's recommendations. Patients from group C conscientiously fulfilled all prescriptions, which had a positive effect on the results of therapy, so in most cases, standard treatment was effective. In contrast, adolescents who are in the period of personality development are more likely to experience emotional difficulties and stress, which complicates their perception of the treatment process and can reduce the effectiveness of therapy.

The use of methods in stages allowed adolescents from group B to better adapt to treatment, reducing stress reactions and emotional stress from possible exacerbations in the initial stages of therapy. Thus, psychological support in group B was a key factor in the successful treatment, ensuring high efficiency of therapy and better final results.

Conclusion

The study emphasizes the importance of an integrated approach to treating acne in adolescents, taking into account both the physical and psycho-emotional aspects of the disease. An analysis of the effectiveness of different treatments showed that an interdisciplinary approach, including the collaboration with a dermatologist, cosmetologist, and psychologist, provides better clinical outcomes, reduces stress reactions, and increases motivation for treatment in adolescents. Psychological support is a key factor in reducing anxiety, improving self-esteem, and fostering a positive attitude toward therapy, while cosmetic care introduced at the initial stages of therapy helps reduce the risk of side effects, prepare the skin for medication, and increase the effectiveness of therapy. Adolescents who received only standard treatment without additional psychological support experienced more frequent stress reactions and emotional instability, which significantly slowed down the recovery process. Instead, adult patients, due to their emotional stability, adapted more easily to standard treatment methods, which provided effective results without additional psychological intervention in most cases. Thus, the implementation of an integrated approach in clinical practice is especially appropriate for adolescents who need emotional support and cosmetic care. Ensuring an individualized approach, taking into account the age characteristics and psycho-emotional state of patients, will help to increase the effectiveness of therapy, reduce stress, and improve the quality of life. An integrated approach allows not only to eliminate the physical symptoms of acne, but also to stabilize the psycho-emotional state of patients, which significantly increases the effectiveness of treatment.

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