

Daily routine for acne patients: the importance of a specific cleanser

ACNE

BASIC

For patients with acne, cleansing is an essential part of the treatment; it aims to gently remove surface dirt, sweat, and excessive sebum without irritating or drying the skin.^{1,2}

A wide range of cleansers

Several types of cleansers with different mechanisms of action are available (surfactants, makeup removers, astringent cleansers, and abrasive cleansers).^{1,2}

Surfactants are the most important group; they act by decreasing surface tension and are classified as anionic, cationic, ampholytic, and nonionic.²

Surfactants for acne are generally available as soaps, cleansing bars, liquid gel or foam cleansers, superfatted soaps and lipid-free cleansers.²

They may be enhanced with active substances such as sebum-controlling, antimicrobial, anti-inflammatory, corneolytic, and soothing agents.²



Which type of cleanser should be chosen?

A nonionic, liquid cleanser or cleansing bar with good rinsability should be preferred for patients with acne.¹ Mild cleansers are also recommended to avoid aggravating the irritating effects of some medical treatments.³

The ideal cleanser for acne-prone skin should be:

- With a pH close to physiological pH (5.5 for the skin)^{1,2}
- Non-irritating^{1,2}
- Non-allergenic^{1,2}
- Soap-free
- Alcohol-free
- Fragrance-free
- Non-comedogenic^{1,2}



- The use of aggressive and strong surfactants such as "natural soaps" should be avoided because of their strongly alkaline pH.²
- Attempts to reduce oiliness with overly aggressive cleansers should be discouraged; it can cause erythema and irritation, as well as worsening acne ("acne detergentica").²
- Cleansers containing ground fruit pits may prove to be too aggressive.²

Beyond cleansing, action on seborrhea and adherence

The regular daily use of facial cleansers designed for oily to acne-prone skin has been shown to improve seborrhea without causing rebound sebum overproduction after treatment discontinuation.²

Finally, the use of cleansers is one of the key factors with a positive effect on adherence in patients with mild to severe acne.⁴

Cleansers for acne: recommendations for health care professionals²

Indications:

- A cleanser should be prescribed to all acne patients, with or without ongoing treatment; it may also be considered after treatment discontinuation and during the summer months.
- Benzoyl peroxide cleansers are better suited to patients using systemic and/or topical antibiotic treatments, and in those who cannot tolerate other BPO topical products.

To be considered

- Always discuss cleansing habits with patients.
- Check for aggressive cleansers used by patients.
- Discourage the use of natural soaps and cleansers containing ground fruit pits.
- In case of concomitant use of BPO creams or gels, patients should be advised of a possible irritant and cumulative effect and to avoid sun exposure.
- In case of xerosis from retinoid treatments, recommend a mild cleanser containing soothing agents.

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