

Presently, little is known about preventing the onset of acne. Lifestyle and wellness modifications could conceivably help, but are generally ignored.

PRIMARY PREVENTION

Diet: Role of diet in acne causation and prevention is complex and controversial. On the one hand, there is no evidence that acne is exacerbated by chocolate, nuts, candy, soft drinks, etc,^[1-3] and on the other hand, there is compelling epidemiologic data that implicates glycemic diet,^[4] and excess consumption of dairy products in acne.^[5] In India, the popular notion is that acne is aggravated by eating mangoes, sweets, fatty/fried foods, and some seafoods.

Physical activity: Acne is rarely triggered or aggravated by sports, or certain physical activities. Whenever evident, it is rewarding to make appropriate adjustments. More commonly, physical activity and sports are beneficial as they promote health and help overweight individuals with hormonal conditions, such as polycystic ovarian disease and insulin resistance, lose weight, which in turn aids in acne treatment.

Medications: Care should be taken to avoid medications known to be acnegenic. Some important examples are steroids, lithium, antiepileptics, and antituberculous

drugs. However, when such drugs are prescribed for serious diseases, their acnegenic effect may be brought to the attention of the treating physician.

Family history: In individuals with strong family history of acne, especially if on both sides of the family, antiacne treatment should begin early to prevent morbidity and scarring.

SECONDARY PREVENTION

Long-term therapy is required, often several months beyond clinical remission, to prevent relapse. Maintenance treatment such as topical retinoids should be continued throughout the susceptible age, that is, till age 30 years.

REFERENCES

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