

# What's new in topicals for acne and rosacea

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RUTGERS ROBERT WOOD JOHNSON MEDICAL CENTER

# Disclosures

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Almirall (A,S)

Bausch Health (A,I,S)

Cutera (I)

EPI Health (A, S)

Galderma (A,I,S)

Johnson & Johnson (A)

Journey (A)

LaRoche-Posay (A, S)

L'Oreal (A)

Strata Skin Sciences (I)

Sun (A,S)

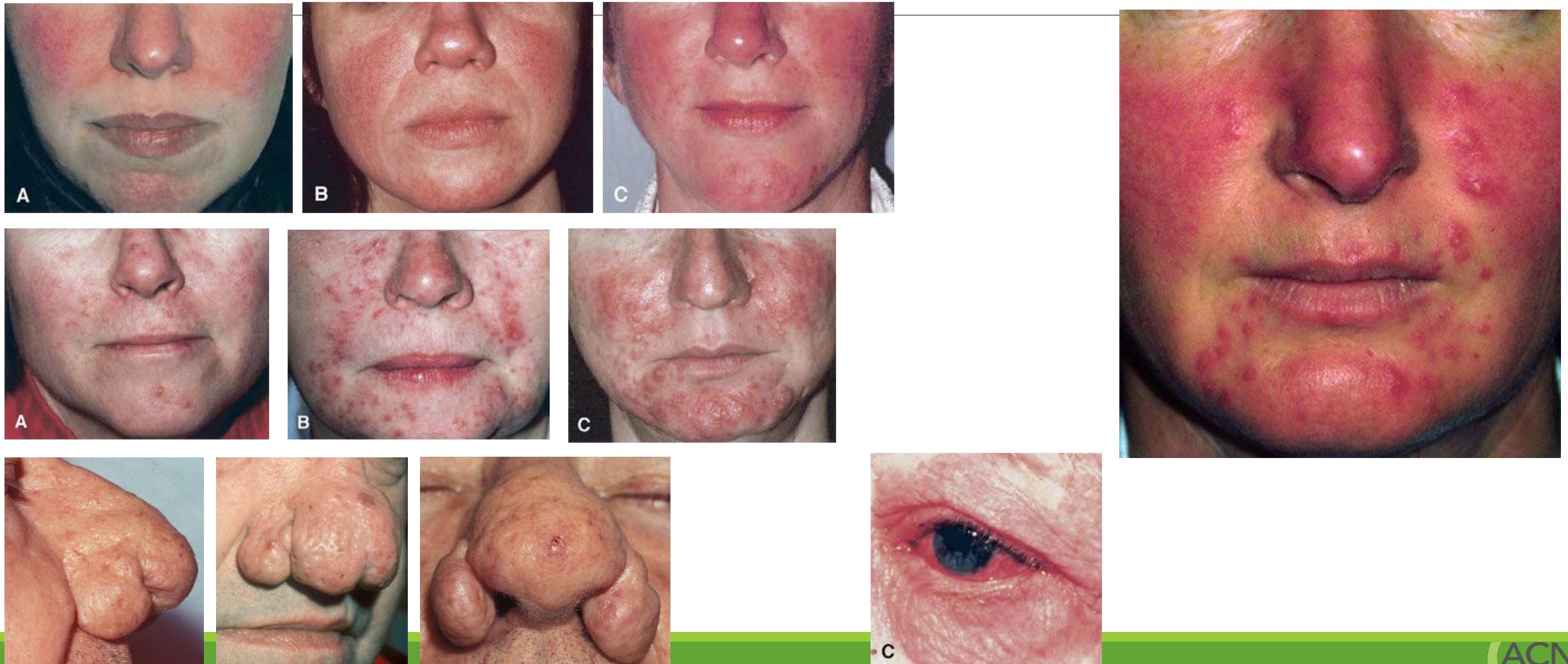
S=Speaker's Bureau  
A=Advisory Board  
I=Investigator

# Rosacea

## a



# Rosacea Subtypes



# Consensus transition from subtypes to phenotypes

## Diagnostic

- Fixed centrofacial erythema
- Phymatous changes

## Major

- Flushing
- Papules and pustules
- Telangiectasia
- Ocular manifestations

## Secondary

- Symptoms of itch/sting
- Ocular symptoms

# Rosacea treatment by phenotype

Phenotype	Approved treatments	Procedures	Other treatments with data
Telangiectasias and flushing		IPL and vascular lasers	Alpha agonists Beta blockers
Background erythema	Brimonidine Oxymetazoline	IPL and vascular lasers	
Papules and pustules	Azelaic acid Microencapsulated BP Ivermectin Metronidazole Minocycline SSA Subantimicrobial dose doxycycline		Tetracycline antibiotics Isotretinoin
Ocular disease			Doxycycline Ivermectin (topical)

# Treatment for papules/pustules

## Metronidazole 0.75-1% Creams, Gels, Lotions

- Anti-inflammatory by reducing ROS

## Azelaic Acid 15% Gel/Foam

- Anti-inflammatory by reducing ROS, Inhibiting cathelicidin pathway

## Ivermectin 1% Cream

- Acaricide and anti-inflammatory

## Minocycline 1.5% Foam

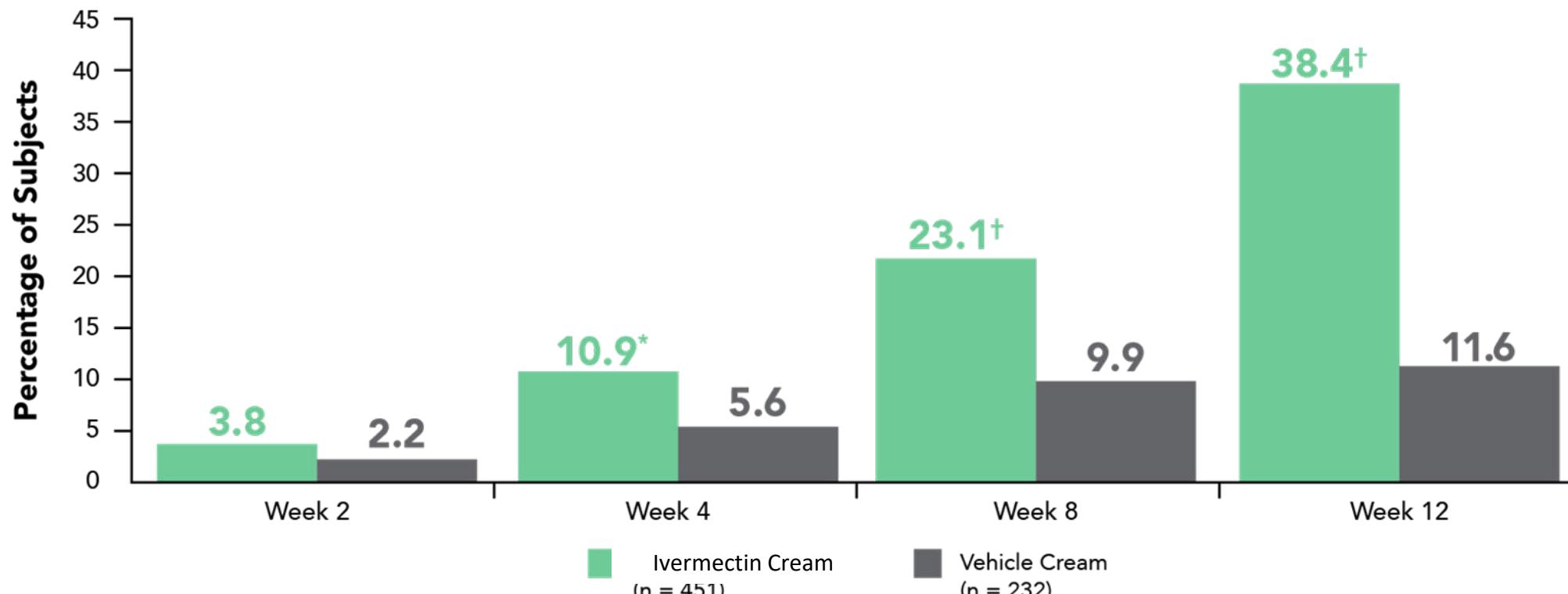
- Anti-inflammatory

## Microencapsulated BP 5% Cream

- Anti-inflammatory, Acaricide

# Ivermectin 1% Cream IGA success (C/NC)

## Soolantra®



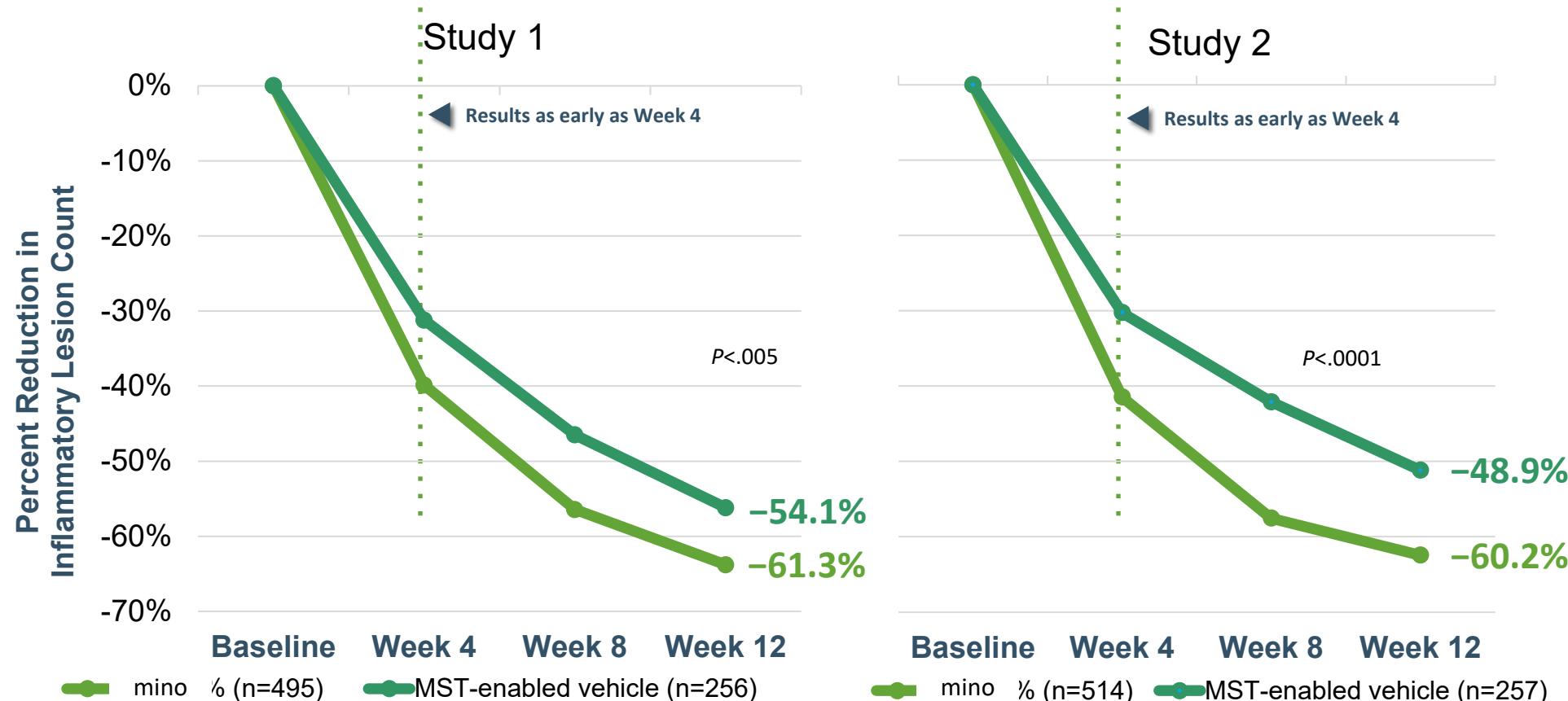
Intent-to-treat population,  
last observation carried forward

\* $P < 0.05$

† $P < 0.001$

# Minocycline 1.5% Foam Efficacy

## Reduction in inflammatory lesions



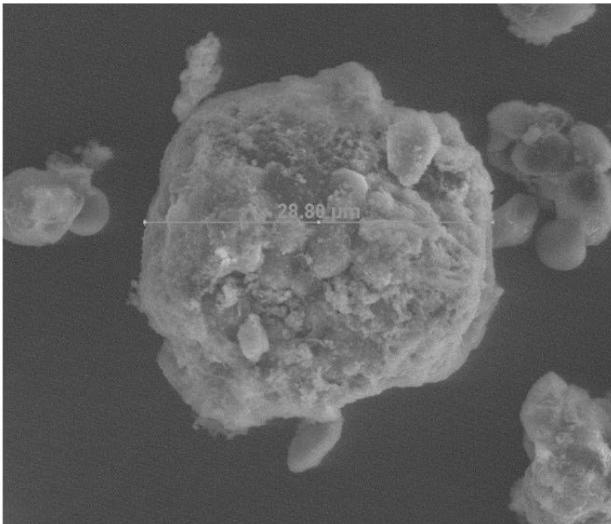
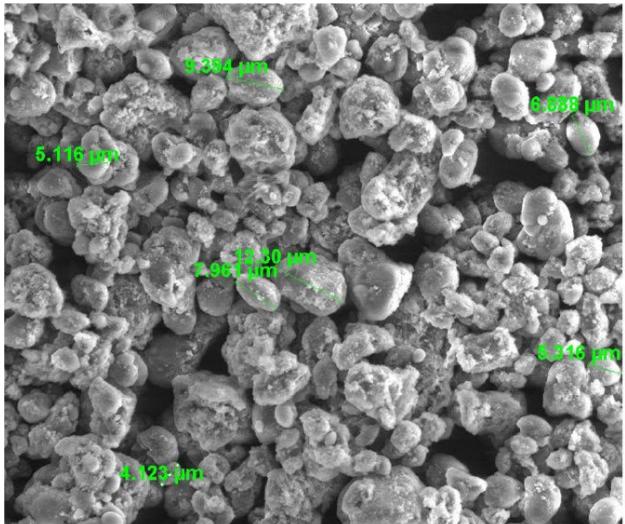
# Minocycline 1.5% Foam - Adverse Events

	Mino 1.5% (N=1008)	MST-enabled vehicle (N=513)
<b>Most commonly reported AE in ≥1%</b>		
Diarrhea	10 (1.0%)	2 (0.4%)
<b>Additional adverse event treatment considerations<sup>2</sup></b>		
Sunburn	2 (0.2%)	1 (0.2%)
Dizziness	2 (0.2%)	1 (0.2%)
Skin hyperpigmentation <sup>a</sup>	1 (0.1%)	0 (0%)
Thyroid gland changes	0 (0%)	0 (0%)
<i>Clostridioides difficile</i> associated diarrhea	0 (0%)	0 (0%)
Hepatotoxicity	0 (0%)	0 (0%)
Intracranial hypertension	0 (0%)	0 (0%)
Stevens-Johnson syndrome	0 (0%)	0 (0%)

# Microencapsulated BP 5%

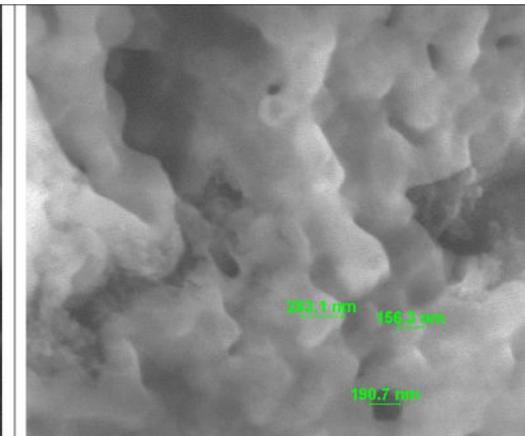
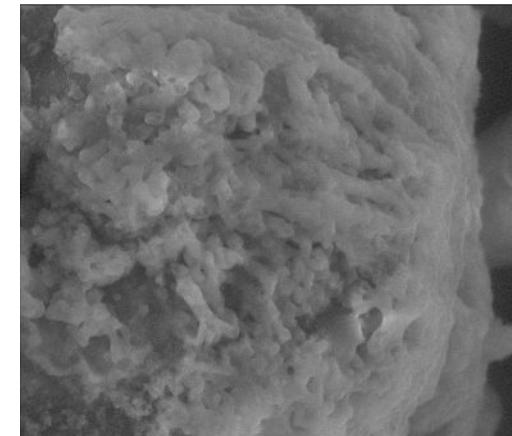
Epsolay®

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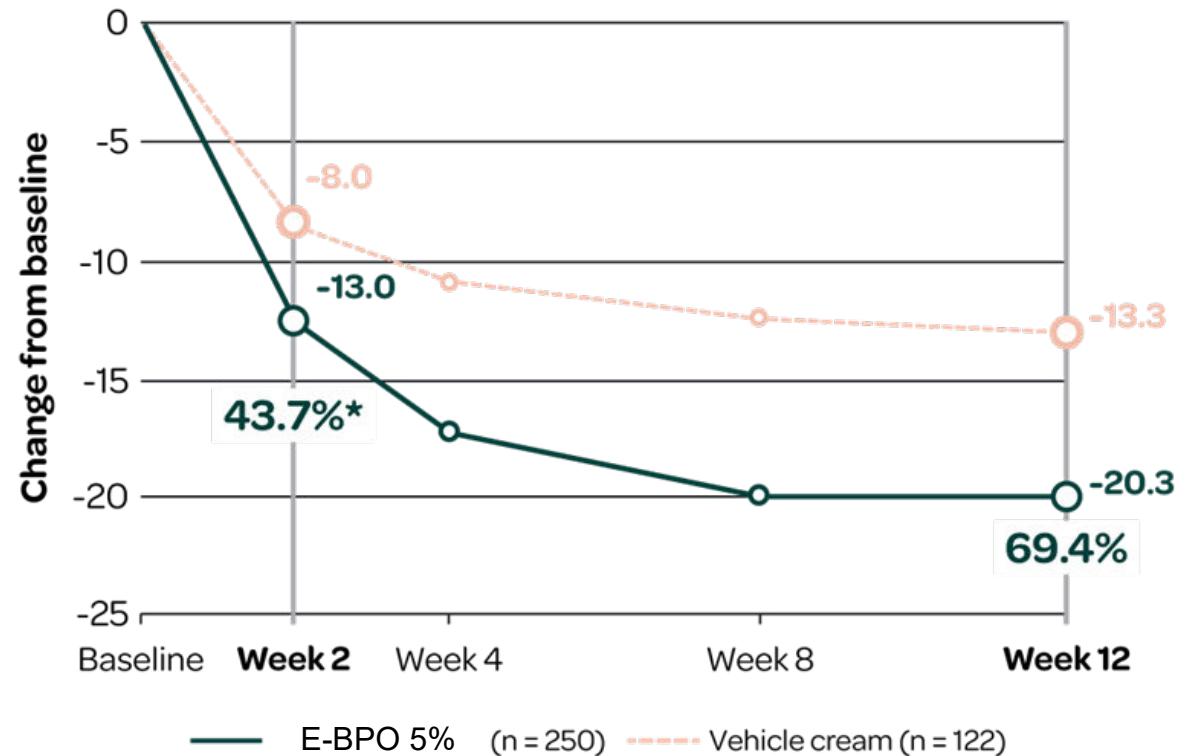
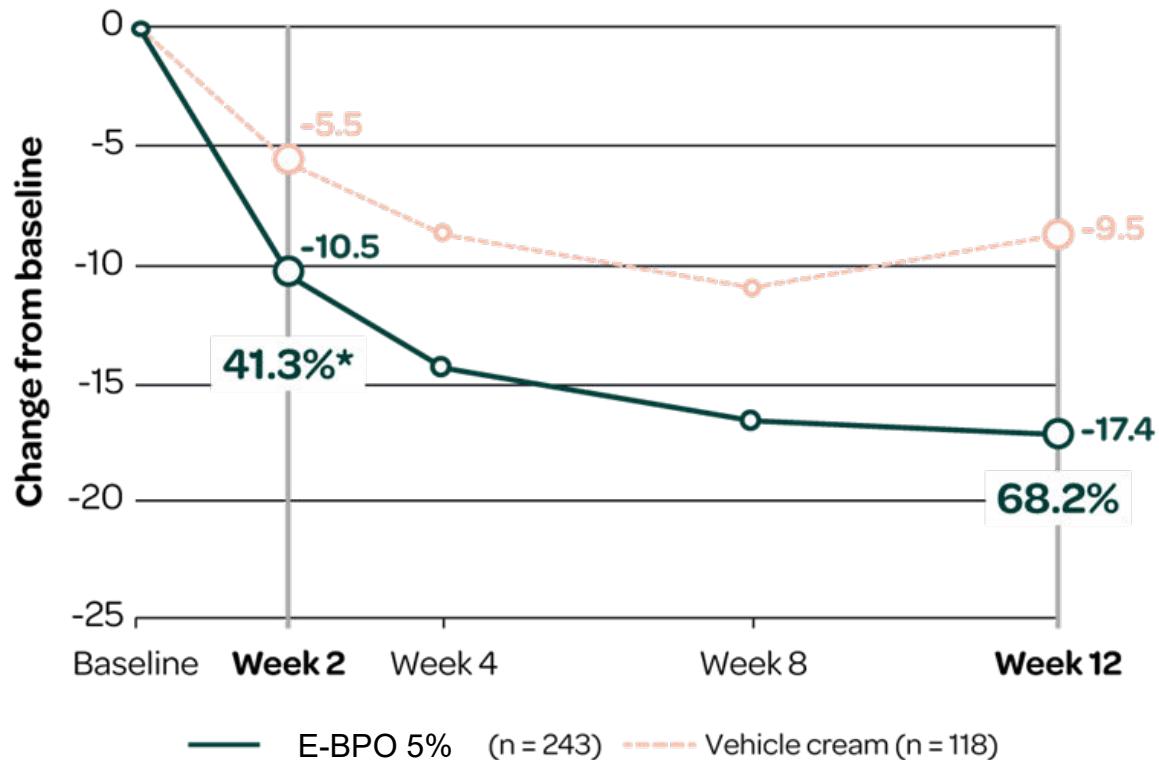


Silica shell wraps  
a BP crystal

Lipids/phospholipids migrate through the silica shell to dissolve the BP



# Absolute Mean Inflammatory Lesion Count



# IGA Success Week 2



BASELINE



WEEK 2



IGA score: 4  
Lesion count: 31



IGA score: 1  
Lesion count: 2



BASELINE



WEEK 2



IGA score: 4  
Lesion count: 53



IGA score: 2  
Lesion count: 12

# MICROENCAPSULATED BENZOYL PEROXIDE 5%

Baseline



IGA 4

Week 2



3

Week 4



3

Week 8



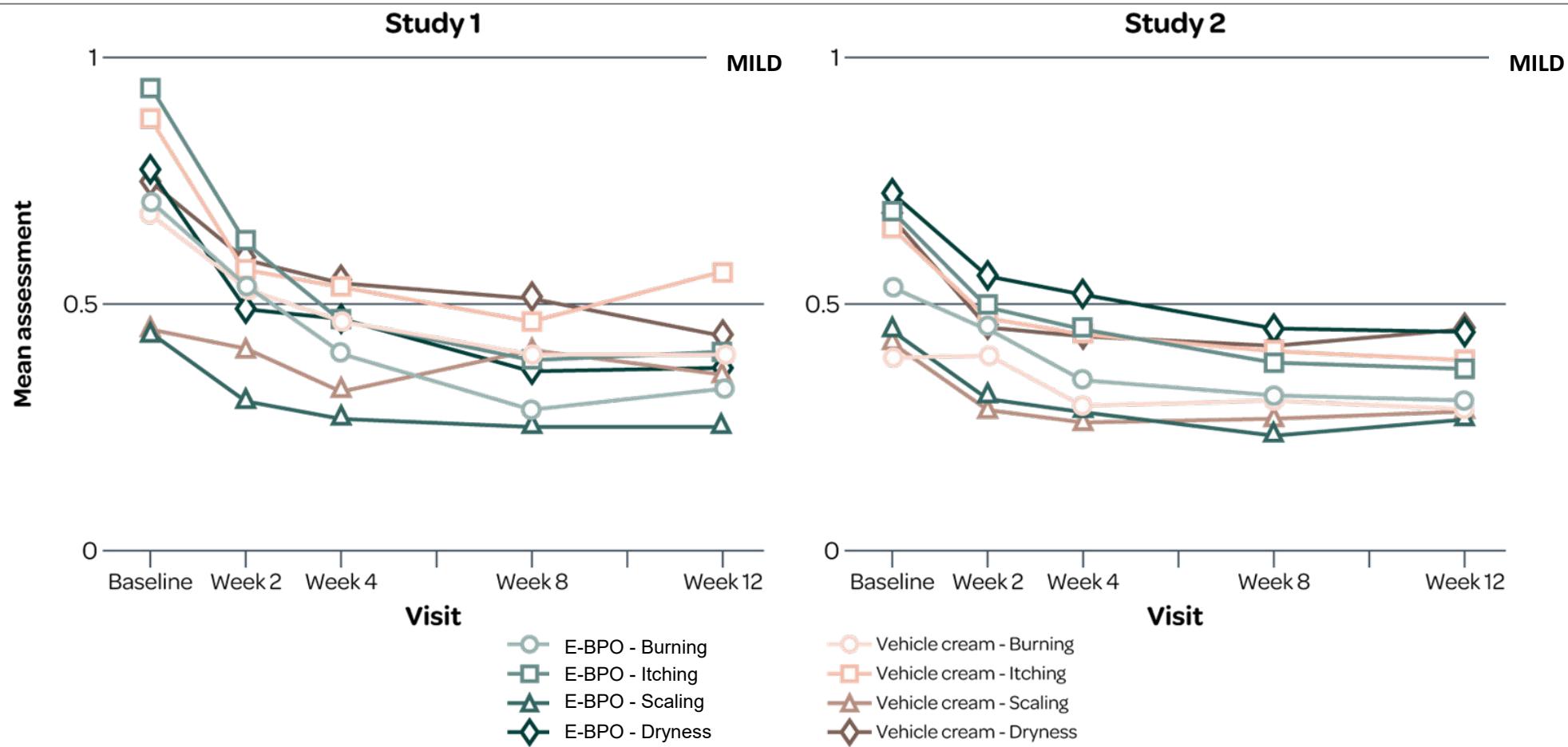
3

Week 12



2

# Microencapsulated BP 5% Tolerability



# Treatment options

## Vascular disease



# Differentiating Facial Redness in Rosacea<sup>1</sup>

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PERSISTENT FACIAL ERYTHEMA



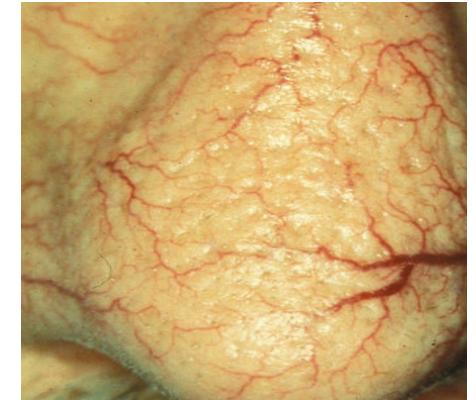
FLUSHING



PERILESIONAL ERYTHEMA



TELANGIECTASIAS



Alpha Agonists

Beta Blockers

PP disease meds

Energy Based therapies

1 Del Rosso JQ, et al. Cutis. 2013;92(5):234-240. 2. Tan J, et al. Br J Dermatol. 2017;176(2):431-438. 3. Gallo JR, et al. J Am Acad Dermatol. 2017;78(1): 148-155.  
4. Baldwin et al Dermatol Ther. 2019; 9:725–734

# New tools in our acne toolbox



Altreno®  
0.05% tretinoin lotion

Arazlo®  
Tazarotene 0.045% lotion

Akliel®  
Trifarotene .005% Cream  
4<sup>th</sup> generation retinoid

Twyneo®  
BP 3%, Tretinoin 0.1%  
Microencapsulated

Amzeeq®  
Minocycline foam 4%

Winlevi®  
Clascoterone 1% Cream

Seysara®  
Sarecycline

MinoLira®  
Minocycline extended - release  
tablets  
MUPS technology

IDP-126  
Clinda 1.2%, BP 3.1%, Adap 0.15%

Absorica LD®  
Micronized isotretinoin



Altreno®  
0.05% tretinoin lotion

Arazlo®  
Tazarotene 0.045% lotion

Akliel®  
Trifarotene .005% Cream  
4<sup>th</sup> generation retinoid

Twyneo®  
BP 3%, Tretinoin 0.1%  
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Sarecycline

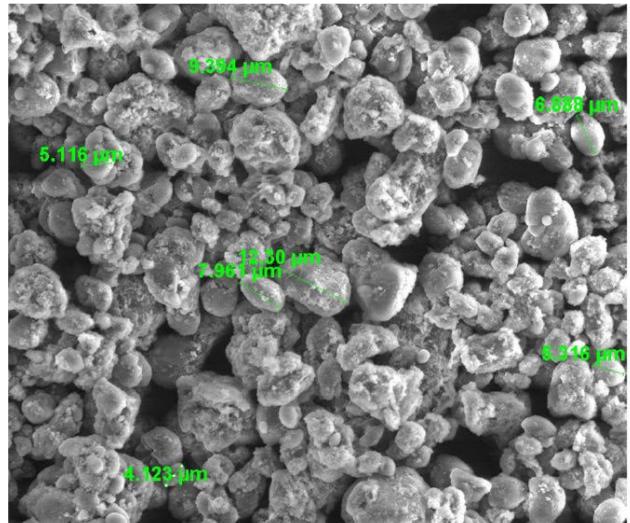
MinoLira®  
Minocycline extended - release  
tablets  
MUPS technology

IDP-126  
Clinda 1.2%, BP 3.1%, Adap 0.15%

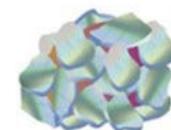
Absorica LD®  
Micronized isotretinoin

1726 nm laser  
Selective  
photothermolysis  
of sebocytes

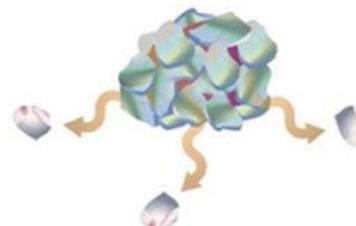
# Microencapsulated BP 3%/Tretinoin 0.1%



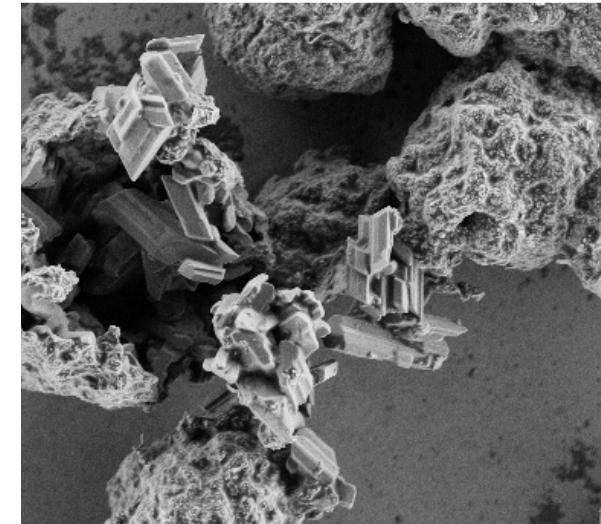
40 μm



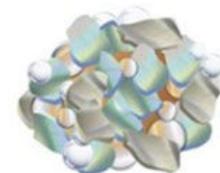
Silica Shell  
Formation



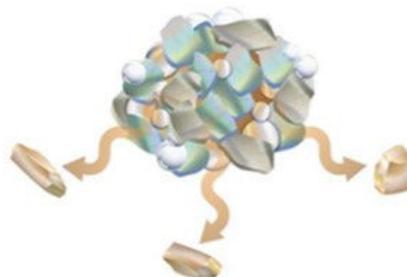
Release of BPO  
Through  
Microchannels  
in Silica



5 μm



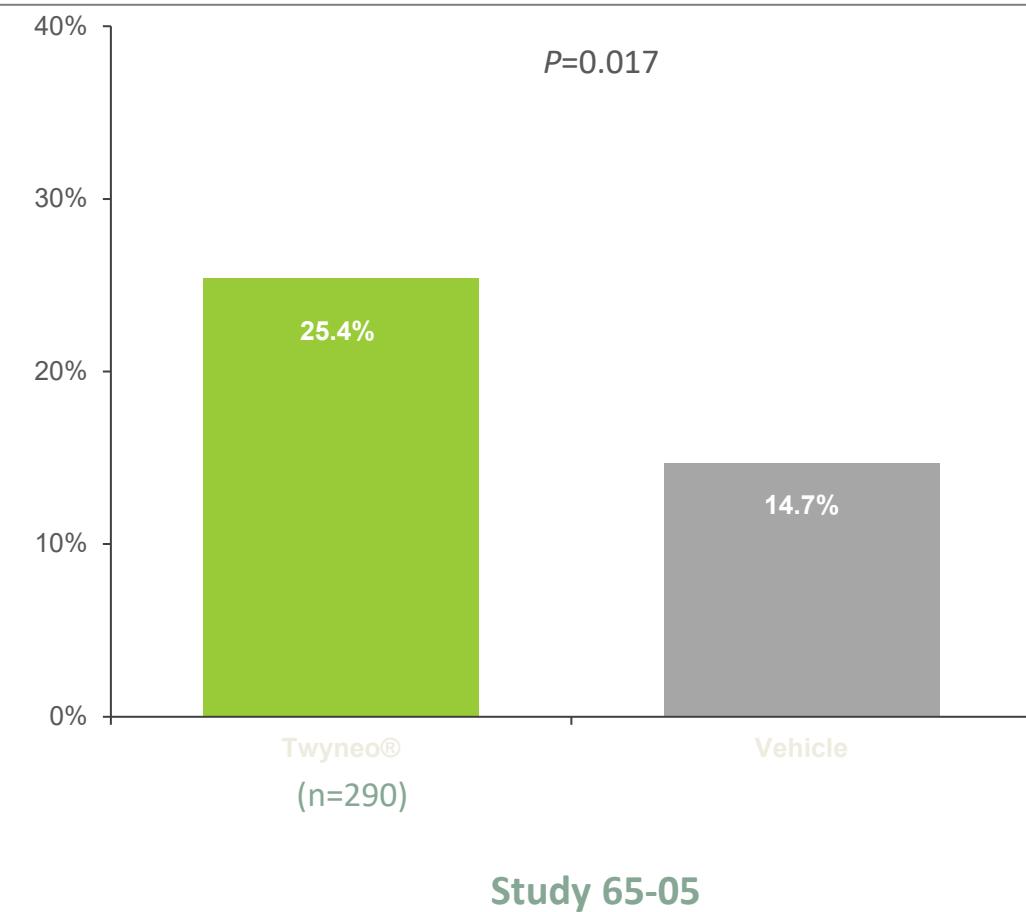
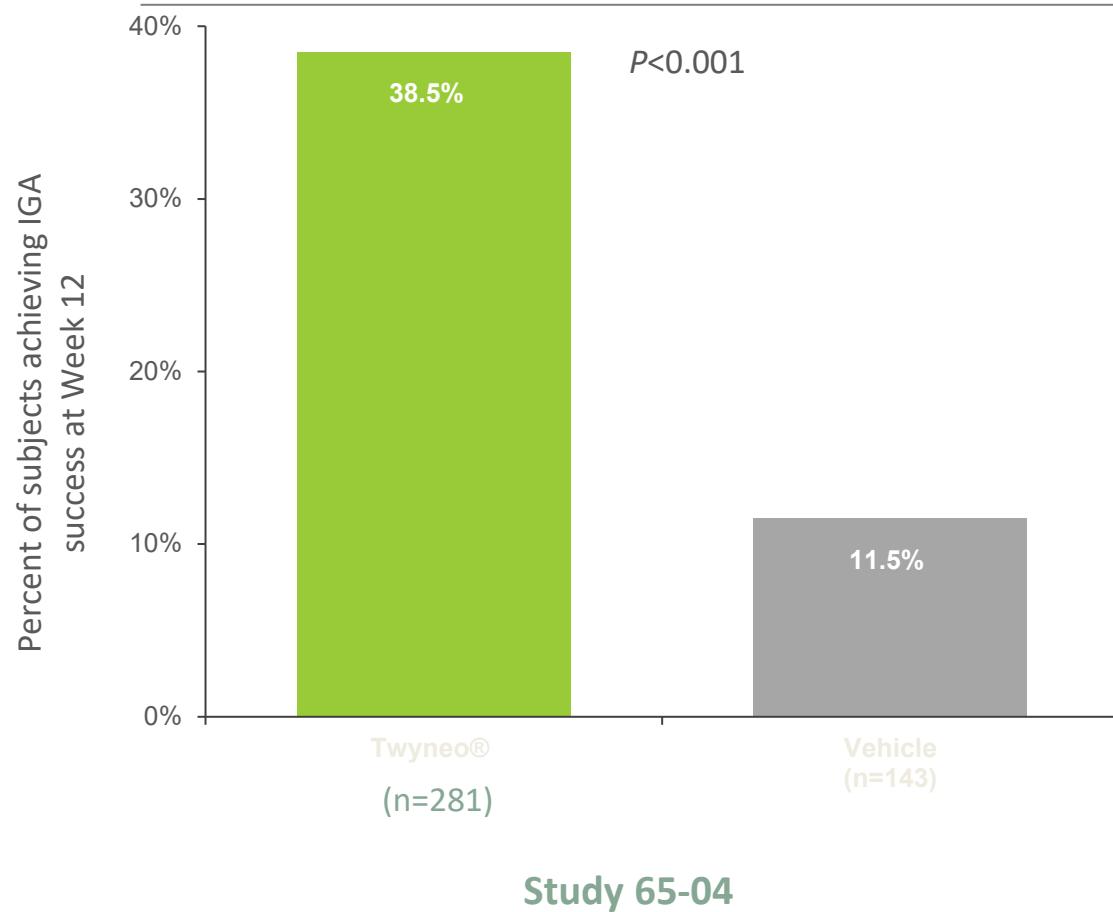
Silica Shell  
Formation



Release of  
Tretinoin Through  
Microchannels  
in Silica

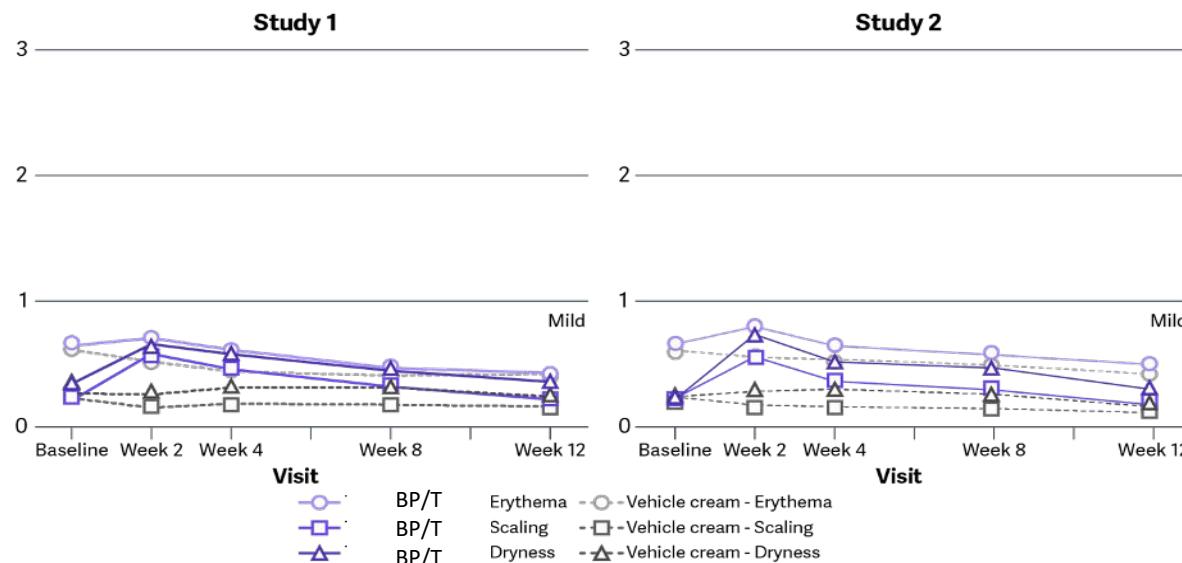
# MICROENCAPSULATED BP 3%/TRETINOIN 0.1%

*IGA Treatment Success at Week 12 (Clear/Near clear)*

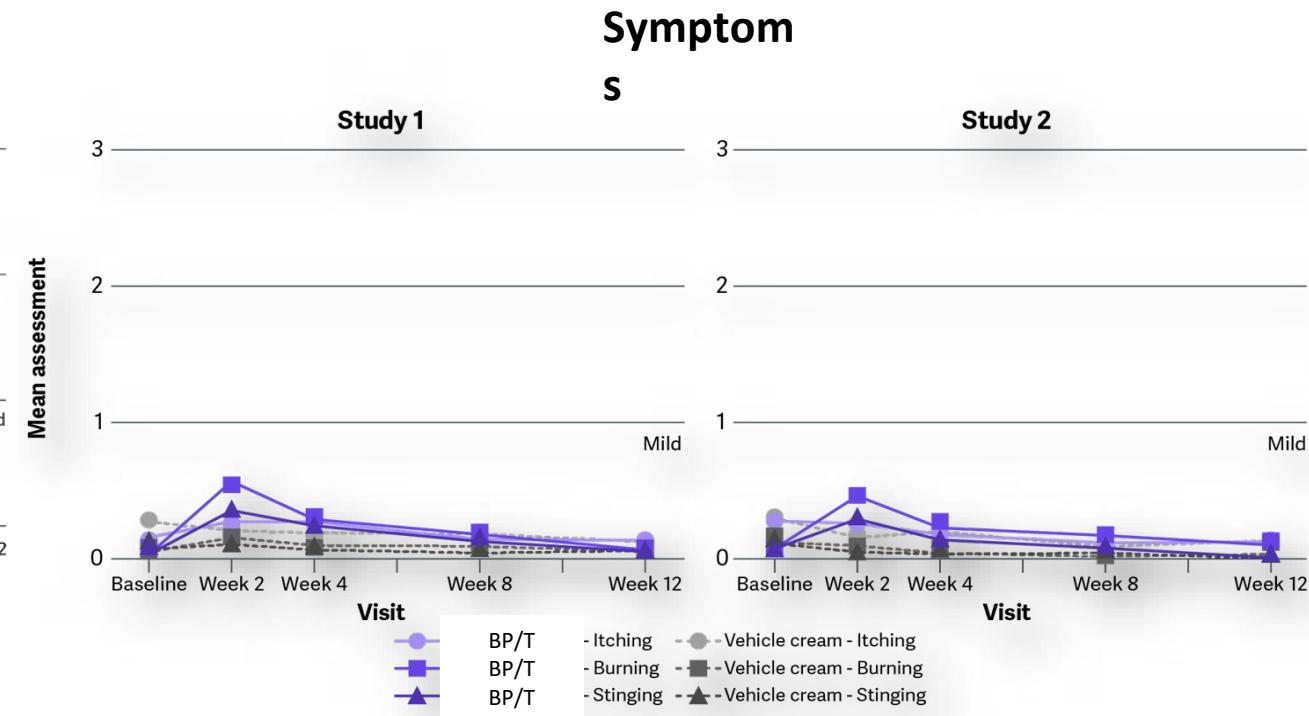


# Microencapsulated BP 3%/Tretinoin 0.1% Local Tolerability

## Signs



## Symptom



# Clascoterone 1% Cream

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First new mechanism of action for acne in many years

Androgen receptor inhibitor with anti-inflammatory properties

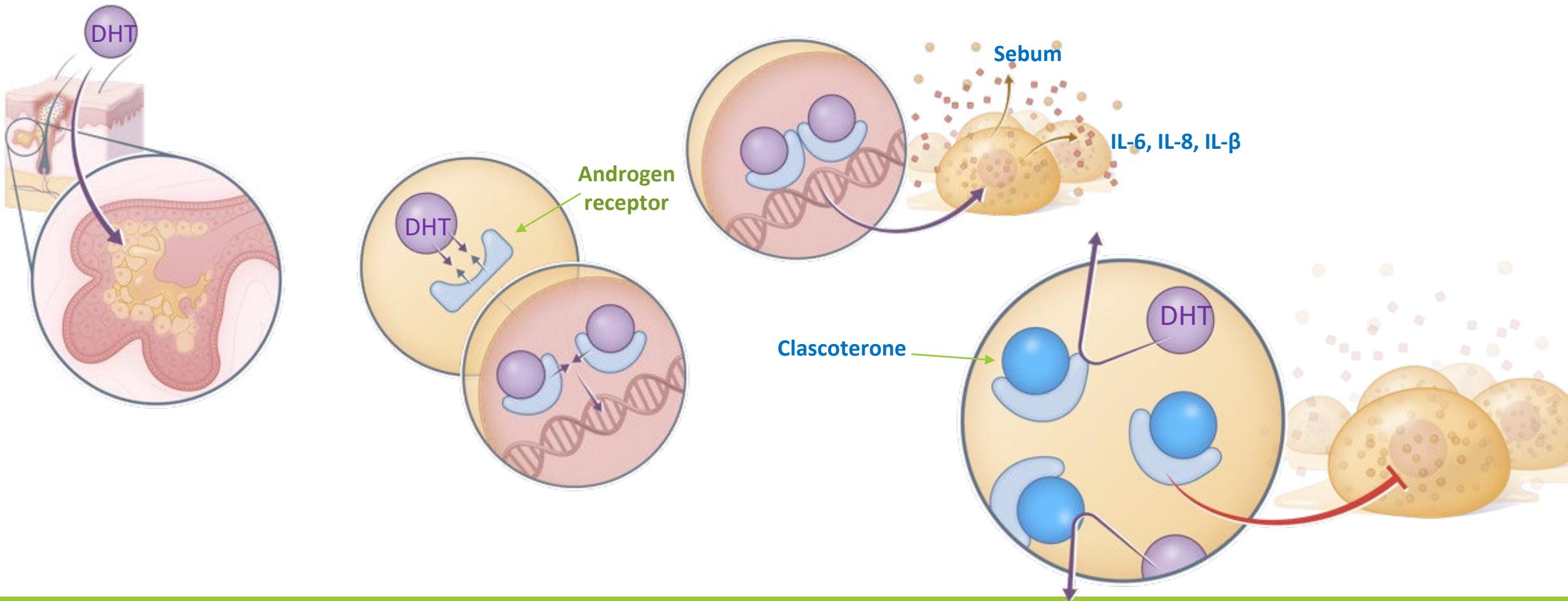
Rapidly metabolized in skin into cortexelone with no anti-androgenic activity

- Safe for use in men

Prior anti-androgens oral only, significant side effect profile

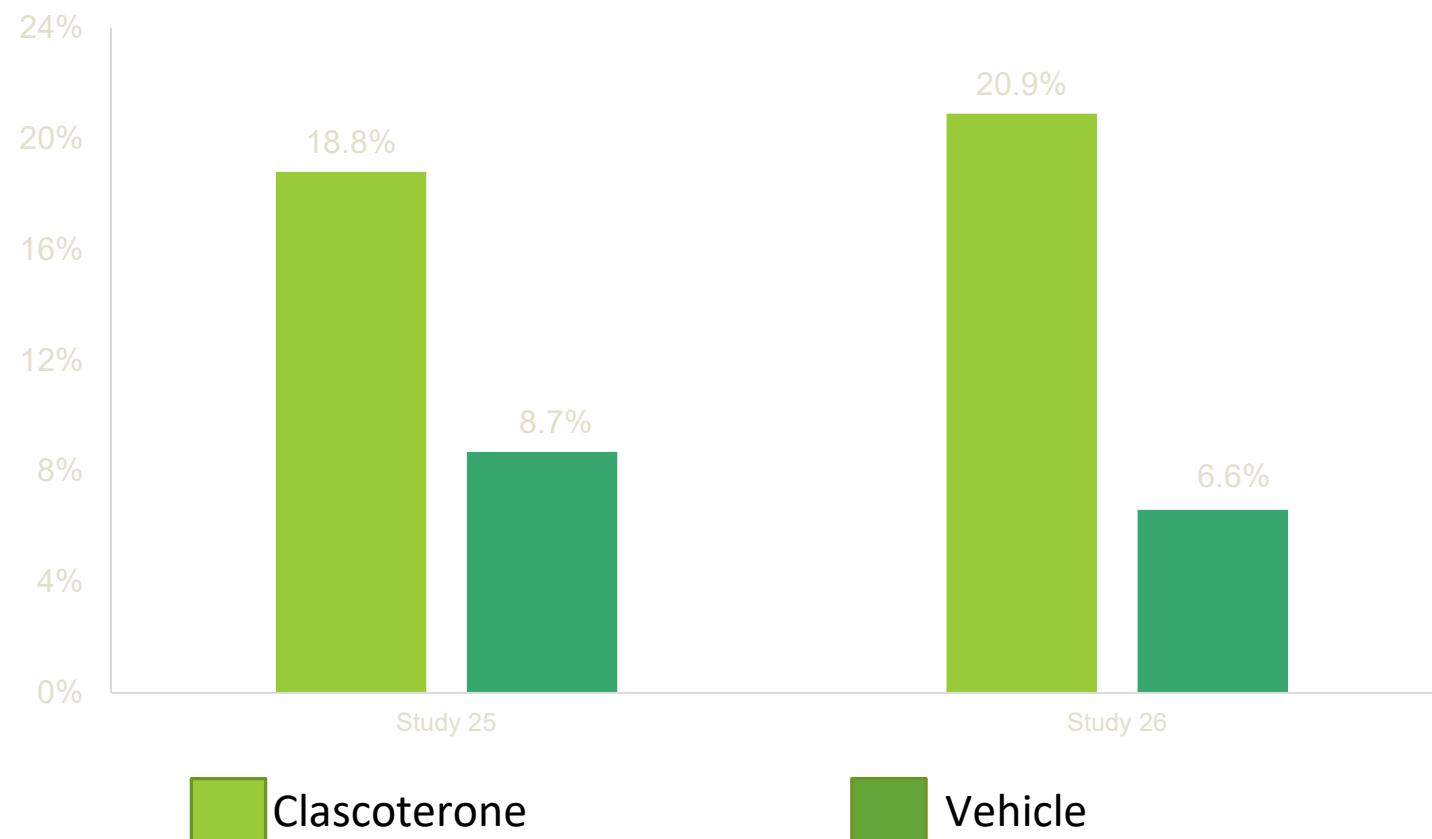
- Isotretinoin
  - Spironolactone
  - Oral contraceptives
- } Women only

# Clascoterone mechanism of action



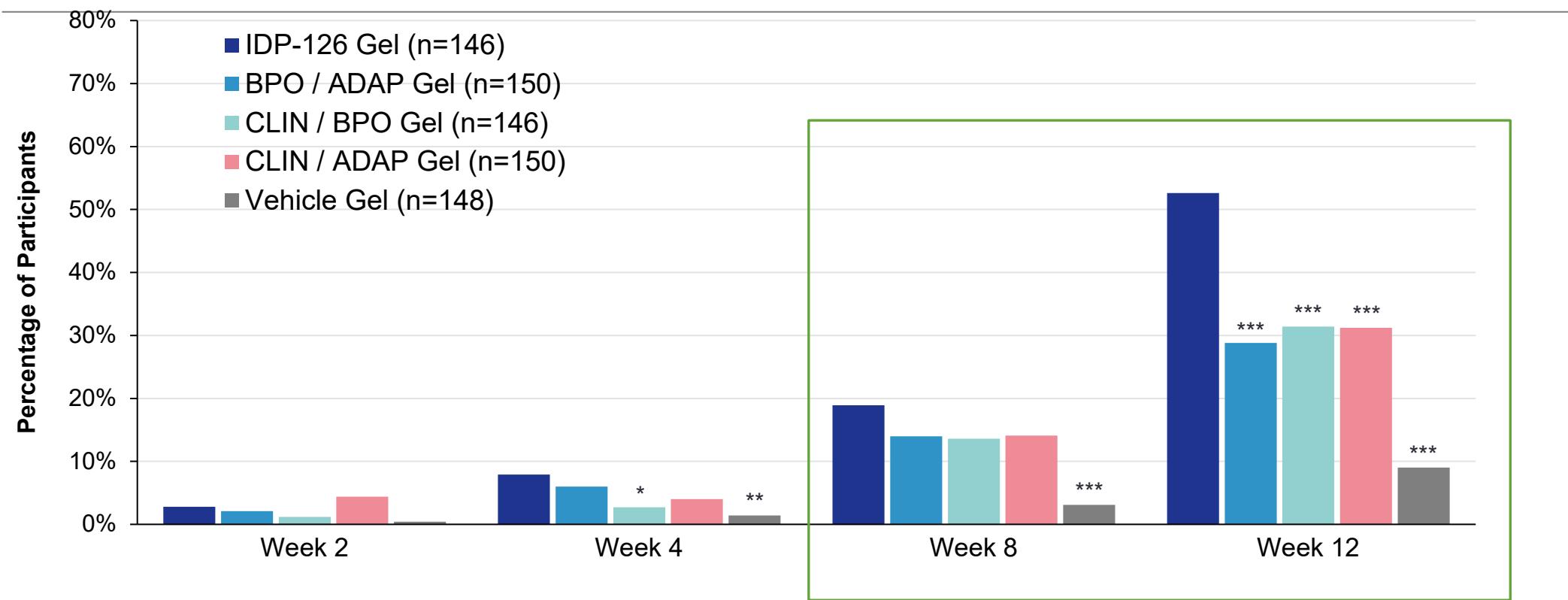
# Clascoterone 1% Cream

## Success (2-grade improvement and Clear/Almost Clear)



# IDP-126 (Clinda 1.2%, BP 3.1%, Adap 0.15%)

## Treatment success (2-grade and Clear/almost clear)



# Our toolbox runneth over!

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Thank you for your  
attention

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