

Acne and Isotretinoin: About 17 Cases in Kinshasa

Muteba Baseke Christian

Service de Dermatologie, Clinique Bondeko, Kinshasa/R.D.Congo

***Corresponding author:** Muteba baseke Christian, Service de Dermatologie, Clinique Bondeko, Kinshasa/R.D.Congo, Tel: +243811865445; E-mail : cbaseke@yahoo.fr

Received Date: 27th April 2015

Accepted Date: 29th April 2015

Published Date: 30th April 2015

Keywords: Acne; Isotretinoin; Kinshasa

Introduction

Acne is a chronic inflammatory disease of the pilosebaceous follicle, very common among adolescents and adults. His treatment uses different molecules isotretinoin used since 1982 for the treatment of severe acne with an efficiency of 65 to 85%. The synthesis of current scientific studies is not in favor of an excess risk of suicide and depressive syndrome population treated with isotretinoin per os. No study was undertaken in Kinshasa to measure the safety and efficacy of isotretinoin in the treatment of severe acne, this state of affairs justifies this study.

Methodology

Prospective, multicenter study carried out over a period of 5 months (November 2013-April 2014) in 5 hospitals in Kinshasa (Hôpital Général de Référence de Matete, Clinique Bondeko, Victoria Médical Center, Centres Hospitaliers Akram et Centre Médical & Maternité le Rocher). were included all patients aged 15 years or older regardless of gender, with severe acne treated with oral isotretinoin and having agreed to submit to the constraints of our study. Security measures regarding confidentiality were guaranteed.

Results

A total of 115 patients consulted for acne which 25 severe acne a prevalence of 14.7%. 8 patients were excluded from this study (2 pregnant women, 3 refused contraception, 2 with a family history of mental disorder, 1 with allergic history to isotretinoin), only 17 have constituted the sample for this study and treated by oral isotretinoin. Male gender was the most affected in either 70.5% against 29.4% for females. The extremes of age were 18 and 37, mean age 25.5 years, age range 15-24 years was the most affected. The nodular acne was most met either with 9 participants. The initial daily dose was 0.5 mg / kg / day in 2 divided doses distributed with a cumulative dose of 120-150mg per treatment. The following adverse reactions have been met: 23.5% cheilitis, facial erythema 17.6%, mucosal dryness cuntaneo 11.7%, 47% reported no adverse effects. No patient had a depressive syndrome or psychiatric disorder. The favorable development was effective in 70.5% and 17.6% worsening of lesions over 16 weeks of treatment.

Citation: Christian MB (2015) Acne and Isotretinoin: About 17 Cases in Kinshasa. Enliven: Clin Dermatol 1(3): 004.

Copyright: @ 2015 Dr. Muteba Baseke Christian. This is an Open Access article published and distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution and reproduction in any medium, provided the original author and source are credited.

Discussion

The side effects encountered in our study are similar to those described in the literature by Caroline SJ et al Quebec. 70.5% of participants had a significant reduction in acne lesions, Kar BR and neck Odisha (India), Brown SE and neck Alcaniz (Spain) had success rates of respectively 73.4% and 84.4 %. Hasibur MR et al . [5] al found in our work as three cases of aggravation of acne lesions treated with isotretinoin in Bangladesh. Given the small size of our sample, more detailed studies on this topic are needed to document all aspects.

Conclusions

This work leads to the same conclusions that several studies on the efficacy of isotretinoin in the treatment of severe acne. Vigilance should always be the rule in the prescription and followed patients treated with oral isotretinoin [1-6].

References

1. Caroline SJ, Helene D (2011) Comment prescrire l'isotretinoïne sans faire des boutons. Le Medecin du Quebec 46: 73.
2. Kar BR, Tripathy S, Panda M (2013) Comparative study of oral isotretinoin versus oral isotretinoin + 20% salicylic Acid peel in the treatment of active acne. J Cutan Aesthet Surg 6: 204-208.
3. Marron SE, Tomas-Aragones L, Boira S (2013) Anxiety, depression, quality of life and patient satisfaction in acne patients treated with oral isotretinoin. Acta Derm Venereol 93: 701-706.
4. Rademaker M (2013) Isotretinoin: dose, duration and relapse. What does 30 years of usage tell us? Australas J Dermatol 54: 157-162.
5. Hasibur MR, Meraj Z (2013) Combination of low-dose isotretinoin and pulsed oral azithromycin for maximizing efficacy of acne treatment. Mymensingh Med J 22: 42-48.
6. Rademaker M, Wishart JM, Birchall NM (2013) Isotretinoin 5 mg daily for low-grade adult acne vulgaris - a placebo-controlled, randomized double-blind study. J Eur Acad Dermatol Venereol.

Curriculum Vitae

* Name, Post-name and First name: Christian MUTEBA BASEKE
* Place and date of birth: Kolwezi, March 3, 1978
* Son: MUTEBA and MBULA * Marital status: Married
* Gender: Male * Profession: Dermatologist
* Nationality: Congolese / R.D.Congo

Contact Information

* Address: No. 1473, Street Pangi, Q / Masano, C / Super-Lemba, Kinshasa
* Phone: (+243) 998 822 095, 811 865 445,
* Mail: cbaseke@yahoo.fr

Titles and Degrees

2012: Medical Specialist in Dermatology, University of Kinshasa, Kinshasa
2004 Doctor in General Medicine, University of Lubumbashi, Lubumbashi
1996 State Diploma end of Humanitarian Studies, Institute Mobutu I, Mbuji-Mayi.

Professional Experience

* From 2005 to 2007: Physician, Clinic Rapha, Kinshasa
* From 2007 to 2012: Assistant in Dermatology, University Hospital of Kinshasa
* From 2009 to date: Dermatologist / C.H. Akram, Kinshasa
* From 2010 to date: Dermatologist / Clinic Bondeko, Kinshasa
* From 2014 to date: Dermatologist /Hopital General Reference Matete/ Kinshasa

Participation in International Congress

* 28th Congress of the Association of Dermatologists Francophone (ADF) February 2011, Chamonix / France (oral communication).
* 6th World Congress on Itch (WCI), September 2011, Brest / France (Poster).
* XXIST International Pigment Cell Conferene (IPCC2011), September 2011 Bordeaux / France (Poster).
* JDP 2011, December 2011, Paris, France. * 7th World Congress on Itch (WCI), September 2013, Boston / U.S.A (Poster)
JDP 2014, December 2014, Paris, France.
* 2nd Belgian Dermatology Days (BDD), March 2015, Brussels, Belgium (Oral Communication)

Publications (Abstract)

* Muteba. Epidemiology of vitiligo to University of Kinshasa Hospital. Pigment Cell Res Mel 2011; 24, 829
* Muteba et al. Epidemiology of scabies to Akram Hospital, about 49 boxes in Kinshasa. Acta Derm Venerol 2011; 91: 637
* Muteba et al. Epidemiology of eczema to University Clinics of Kinshasa. Ann Venerol Derm 2011; 138 (suppl1): s49.
* Muteba. Epidemiolgy study of vitiligo in three private hospital in Kinshasa. Pigment Cell Mel Res 2012; 25, 645-675 * Muteba.
Epidemiological profile of dermatological conditions in hospitals. Ann Venerol Derm 2013; 140 (suppl1): S35.
* Muteba. Epidemiology of eczemas in Hospitalized Patients Younger than 18 in Kinshasa / R.D.Congo. Acta Derm Venerol 2013; 93: 626.

Scientific Societies

* Secretary General, Congolese Society of Dermatology (SCD)
* Member, French Society of Pediatric Dermatology (SFDP)
* Member, Association of Dermatologists Francophone (ADF)
* Member, International Forum for the Study of Itch (IFSI)
* Member, European Society for Pigment Cell Research, (ESPCR).

Other

* Advisory board “Our Dermatology Online Journal” www.odermatol.com

* Advisory board “Dermatologic Therapy Journal” onlinelibrary.wiley.com/journal * Editorial board

“ScienceRise Journal” <http://sr.org.ua/>

Languages Spoken and Written

* French, * Swahili, * English.

Submit your manuscript at

<http://enlivenarchive.org/submit-manuscript.php>

New initiative of Enliven Archive

Apart from providing HTML, PDF versions; we also provide **video version** and deposit the videos in about 15 freely accessible social network sites that promote videos which in turn will aid in rapid circulation of articles published with us.