



“**IMAGINE** that there was
a newly recognized dermatologic
disease that affected
55 MILLION AMERICANS,
particularly targeting our
CHILDREN and ADOLESCENTS.”

This disease unapologetically affected the most visible locations on the face at a crucial and tender time in psychosocial development. Lesions were red, painful and sometimes full of pus. In no small number, some of these lesions would leave permanent scars that would serve as a lifelong reminder to both the sufferer and the casual observer that they had been affected by this dreadful disease. Fortunately, there were no casualties from this disease, with the sad but very real exception of those that suffered so from disease-associated depression that they committed suicide.

And imagine that our scientifically advanced and wealthy society observed this newly diagnosed skin disease and responded by saying “it is a rite of passage.” Perhaps they would say “it doesn’t really kill anyone,” or “it only affects people for about 10% of their lifetime.” I find it impossible to believe that they would deem it as “a cosmetic problem” which would then dictate that those with financial means could treat it and the rest could work on improving their character by learning to deal with this facial eruption during a truly challenging time in human development.

Clearly, I am not talking about a new disease. **I AM TALKING ABOUT ACNE.** I am concerned that acne is being marginalized in our health care system and I am not sure why. Have we become desensitized to it? Is it just too common? And yet, consistently, when I poll an audience of dermatology providers and I ask them how many acne lesions (aka zits) on their face does it take to negatively impact their day, the overwhelming answer is “1”!

As an advocate for my acne patients, I am jealous of what is happening in the psoriasis market. We are bombarded with new and very expensive medications for psoriasis. These medications are also very effective, offering patients with psoriasis “clear or almost clear” skin in 80% of users or more. I am grateful for these medications and I invest the effort it requires to get these drugs approved for my psoriasis patients. Psoriasis warrants this great effort and expenditure because it greatly impacts quality of life, is associated with depression and anxiety, can lead to destructive arthritis and has been associated with major adverse cardiovascular events.

ACNE ALSO DESERVES OUR GREAT EFFORT. We, as dermatology providers, must strive to get our acne patients “clear or almost clear,” not just better. We must recognize the significant lifelong impact that acne has on its sufferers, both psychosocially and physically. We must take the time to ensure that acne patients get the medications that they need. We must raise our unified voices to “save acne” and to insist that acne remain a covered entity in our health care system.

DO YOU STAND WITH THE AARS TO AFFECT THE CHANGE TO SAVE ACNE?

Please sign your name:

Print name: _____ Email: _____

We invite anyone affected by acne to input your signature under Dr. Harper’s and to print your name in the area provided. Provide your email if you would like.

Return to the AARS by fax to (973) 783-4576 or email to info@aarsmember.org.