

## Publication Summary

### An evaluation of a polyhydroxy acid skin care regimen in combination with azelaic acid 15% gel in rosacea patients

**Publication Reference:** Draelos ZD, Green BA, Edison BL. An evaluation of a polyhydroxy acid skin care regimen in combination with azelaic acid 15% gel in rosacea patients. *J Cosmet Dermatol* 2006;5:23-29.

#### Summary

This study evaluates the benefits and tolerability profile of combining a PHA skincare regimen with the use of 15% azelaic acid (Finacea®) gel in rosacea patients. The lead investigator and author of this study was Dr. Zoe Draelos, Associate Clinical Professor, Department of Dermatology, Wake Forest University School of Medicine.

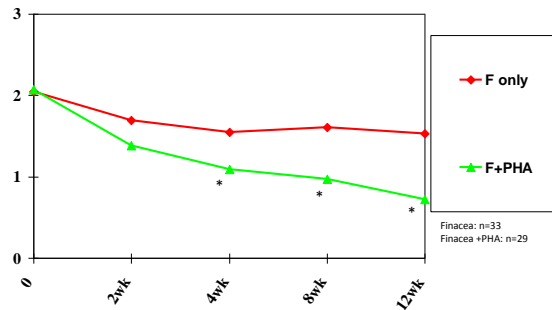
#### Method

- This study was a 12-week, Institutional Review Board approved, single site study with a blinded board certified dermatologist
- The study enrolled 67 female patients ages 19-66 years with:
  - Moderate rosacea (defined as a minimum of 5 but not more than 50 papules and pustules plus persistent erythema and telangectasia)
  - A prior history of regular skincare use including cleansers and moisturizers
- The subjects were divided into 2 groups, both groups to use 15% azelaic acid gel and skincare twice daily. Group 1 (the non-standardized treatment group) used their habitual self-selected skincare cleanser and moisturizer. Group 2 used a PHA standardized skincare regimen of NeoStrata Facial Cleanser (4% gluconolactone) and NeoStrata Ultra Moisturizing Face Cream (10% gluconolactone) twice daily

#### Results

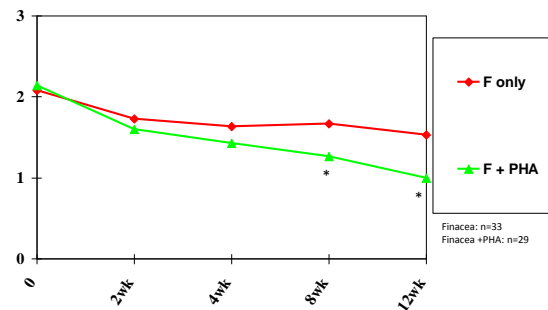
- 62 patients completed the study; 33 in the non-standardized (Finacea only) regimen, 29 in the PHA standardized skincare (Finacea + PHA (gluconolactone))
- At week 12, both groups showed substantial improvement of rosacea symptoms
- The PHA standardized skincare group (F+PHA) showed significantly greater improvement for global rosacea severity and erythema and a significantly lower severity of dryness, itching, and stinging than the non-standardized, azelaic acid alone group (F only),  $p < 0.05$
- Both groups conducted self-assessment of skin condition, with the PHA group reporting significant improvement from baseline in skin sensitivity, texture and smoothness, dryness and overall skin condition,  $p < 0.05$ . There were no significant improvements noted with the non-standardized treatment group
- Before and after clinical photos highlight visible improvements in fine lines and skin surface texture after 12 weeks of use of the PHA skincare regimen

#### Global - Average Scores



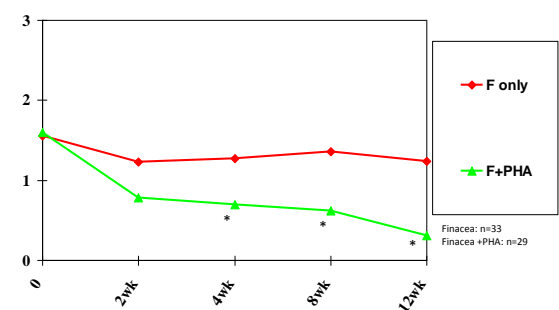
\* $p < 0.05$  Mann-Whitney two-tailed paired test: F+PHA<F

#### Erythema - Average Scores



\* $p < 0.05$  Mann-Whitney two-tailed paired test: F+PHA<F

#### Dryness - Average Scores



\*  $p < 0.05$  Mann-Whitney two-tailed paired test: F+PHA<F

Rosacea patient at baseline and after 8 weeks of treatment with 15% azelaic acid gel and a gluconolactone-containing cleanser and moisturizer twice daily.



Before

After

Rosacea patient at baseline and after 12 weeks of treatment with azelaic acid and gluconolactone-containing cleanser and moisturizer twice daily demonstrating the improvement in fine lines around the lateral right eye.



Before

After

### Discussion

The PHA standardized skincare regimen did not alter the efficacy of azelaic acid for rosacea but did add significant cosmetic benefit and an improvement in skin stinging, dryness and itchiness. Rosacea patients that desire a cosmetic improvement, in combination with azelaic acid gel, will see the benefit of using a PHA skincare regimen.