

## Position Statement on Minocycline for the management of Acne Vulgaris

**SW London \*CCGs do NOT support the routine prescribing of MINOCYCLINE in acne vulgaris in line with NHS England's national guidance on medicines which should no longer be routinely prescribed<sup>1</sup>**

### Rationale

There is no evidence to support the use of one tetracycline over another in terms of efficacy for the treatment of acne vulgaris.<sup>2</sup>

- Minocycline is **not** recommended for the treatment of acne vulgaris as other tetracyclines are more cost-effective with better safety profiles.<sup>3</sup>
- Alternative once daily tetracyclines are available to improve patient adherence to treatment, as per local guidelines.<sup>3</sup>
- There are safety concerns with Minocycline which have been known for some time: -
  1. Early onset dose- related toxicity reactions resulting in single organ dysfunctions.
  2. Hypersensitivity reactions (presenting as pneumonitis, eosinophilia, nephritis and serum sickness- like syndrome).
  3. Autoimmune disorders including systemic lupus erythematosus-like syndrome, the risk of which increases with duration of use).
  4. Skin pigmentation which in some cases may be irreversible.
  5. Hepatotoxicity.

### References

1. NHS England. Items which should not routinely be prescribed in primary care <https://www.england.nhs.uk/medicines/items-which-should-not-be-routinely-prescribed/>. June 2019
2. NHS PrescQIPP (Jan 2014) Minocycline use in acne vulgaris Bulletin 60 <https://www.prescipp.info/>
3. NICE CKS Acne Vulgaris. <https://cks.nice.org.uk/acne-vulgaris> Date accessed 04/07/2019

### Guidance for Clinicians: Recommendations

- Current patients who are prescribed minocycline for acne vulgaris should be reviewed. If therapy is still required, change to **lymecycline 408mg once daily or an alternative as per local guidelines**.
- For new patients requiring oral antibiotic treatment for acne vulgaris, prescribe as follows:
  - First line: lymecycline 408mg or doxycycline 100mg once daily as per local guidelines.
  - Please refer to your local Management of Infection or Dermatology guidelines for further information
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- Oral antibiotics should **not** be used alone; they should always be used in combination with a topical retinoid or benzoyl peroxide.<sup>2</sup>
- An adequate dose of an oral antibiotic must be given for at least 3 months before deciding a patient has failed to respond. If there is no improvement, another oral antibiotic must be used.<sup>2</sup>

### Guidance for Patients

- Minocycline is not recommended for the treatment of acne due to safety concerns.
- Your Clinician will review your medication and prescribe a suitable alternative.

**The NHS belongs to YOU, use it responsibly**