# Rosacea

osacea is a condition with chronic redness of the facial skin, easy flushing, and sometimes acne-like breakouts. It can happen to men or women and is a long-term problem that cannot be cured. However, like many other chronic medical disorders, rosacea can be controlled with treatment. Individuals of all ethnicities can have rosacea, but persons with lighter skin are more likely to be affected. Rosacea has several forms that affect the skin differently. If you have symptoms of rosacea, you should see a dermatologist (a doctor with specialized education in the management of diseases of the skin, hair, and nails). Persons who have eye (ocular) involvement should see an ophthalmologist (a doctor with specialized education in medical and surgical problems of the eye).



- Acne rosacea is common and usually begins in middle age. There may be breakouts, pimples, and severe redness with flushing.
- Vascular rosacea leads to enlarged small blood vessels in the facial skin that may appear broken (telangiectasias).
- Ocular rosacea affects the eyes, leading to dryness, redness of the eyes, and **chalazia** (swelling due to inflammation affecting glands at the base of the eyelashes).
- Rhinophyma is a severe form of rosacea that causes persistent and visible thickening of the skin, especially around the nose. Pores are often enlarged and the skin may be oily.

## CAUSES

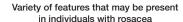
The cause of rosacea is unknown. Some persons with rosacea symptoms that are triggered by environmental exposure can have excessive production of chemicals in the skin that cause inflammation in response to the exposure. This tendency of the skin to overreact to its environment may be inherited, so rosacea may run in families. Rosacea was linked to the bacterium Helicobacter pylori, which is responsible for peptic ulcer disease. However, this bacterium has not been identified in all persons who have rosacea, and rosacea does not always develop in persons who have this bacterial infection.

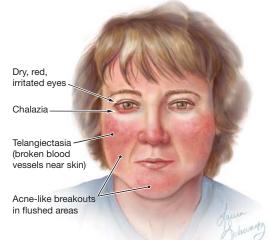
#### TREATMENT

- Avoid alcohol, hot beverages, spicy foods, or other items that trigger your facial flushing.
- Wear sunscreen daily.
- Avoid extremes of temperature.
- Wash your face with lukewarm water, not hot water.
- Apply antibiotic lotion or cream (topical treatments, applied to the skin) that may be prescribed by your doctor, or take oral antibiotics that your doctor may also prescribe for acne-like breakouts.
- Seek mental health care if you have anxiety or depression related to your rosacea.

For patients who have telangiectasias, dermatologists may offer specialized treatments, including laser or light therapy. Rhinophyma can be treated with surgery or laser.

Sources: National Institute of Arthritis and Musculoskeletal and Skin Diseases; American Academy of Dermatology; National Rosacea Society





Types of rosacea

Ocular rosacea

Vascular rosacea

Acne rosacea





### FOR MORE INFORMATION

- National Institute of Arthritis and Musculoskeletal and Skin Diseases www.niams.nih.gov
- American Academy of Dermatology www.aad.org
- National Rosacea Society www.rosacea.org

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