

# WHAT IS ROSACEA?

A chronic inflammatory skin condition that primarily affects the face. The condition is often characterized by flare-ups and remissions and the most common areas for symptoms are the cheeks, nose, chin, and forehead.



## SYMPTOMS

It often starts as a simple redness or blushing that comes and goes initially, but over time, it may become more persistent and visible. Symptoms may include:

 Redness (blushing or more permanent redness)	 Bumps and pimples	 Visible blood vessels (telangiectasias)	 Burning, stinging and itching sensations
 Facial swelling	 Dry flaky skin	 Eye irritation	 Skin thickening (especially on the nose)

### OTHER FACTS

- There is no cure for rosacea, but it can be controlled
- In some cases, rosacea can also appear on the neck, chest, scalp, ears and back
- Rosacea is not considered an infectious disease
- Symptoms can vary from one person to another, and there is no predicting severity
- Left untreated, rosacea tends to worsen over time

## THERE ARE 4 SUBTYPES OF ROSACEA

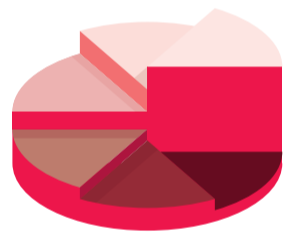
Patients may experience different subtypes simultaneously, and they can also appear one right after another. Symptoms can advance from mild to severe.

 <b>SUBTYPE 1</b> <i>Erythematotelangiectatic rosacea</i> Flushing, persistent redness and visible blood vessels	 <b>SUBTYPE 2</b> <i>Papulopustular rosacea</i> Redness, swelling and transient bumps and pimples	 <b>SUBTYPE 3</b> <i>Phymatous rosacea</i> Skin thickening, often resulting in an enlargement of the nose	 <b>SUBTYPE 4</b> <i>Ocular rosacea</i> Eye irritation such as blood-shot eyes that feel gritty
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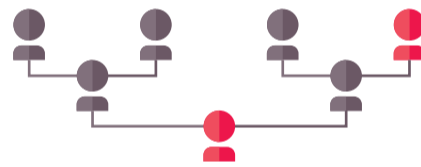
## WHO GETS ROSACEA



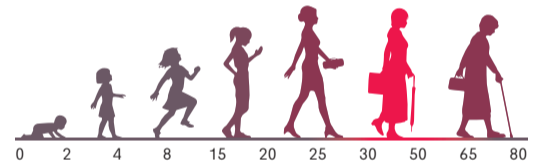
Approximately 415 million people worldwide have rosacea



Rosacea often affects people with fair skin, but can affect people of all skin types. It seems to be especially prevalent in people of northern or eastern European descent.



An NRS survey revealed that 40% of rosacea patients have a family member who also have rosacea or similar symptoms.<sup>1</sup>



Onset is usually between ages 30 and 50.



Rosacea is three times more common in women than in men. Women of menopausal age are at a greater risk, but in men, the disease tends to have a more severe course with an increased tendency to develop rhinophyma.

## PSYCHOLOGICAL EFFECTS

Rosacea may cause psychological effects such as embarrassment, lowered self-esteem and self-confidence, anxiety and even depression.

**SURVEYS BY THE NATIONAL ROSACEA SOCIETY SHOW<sup>2</sup>:**

### LOWERED SELF-CONFIDENCE



Nearly 90% of rosacea patients feel that their rosacea has lowered their self-confidence and self-esteem

### AVOID PUBLIC CONTACT



For 41% of rosacea patients, their rosacea has caused them to avoid public contact or cancel social engagements

### AFFECTED PROFESSIONAL INTERACTIONS



For nearly 88% of patients with severe rosacea, the disorder has adversely affected their professional interactions, and nearly 51% of these have even missed work because of their condition

## ROSACEA TRIGGERS

Many patients notice certain triggers seem to make their symptoms worse. An NRS survey of 1,066 rosacea patients found that the most common factors included<sup>3</sup>:

81% SUN EXPOSURE	41% INDOOR HEAT
79% EMOTIONAL STRESS	41% CERTAIN SKIN-CARE PRODUCTS
75% HOT WEATHER	36% HEATED BEVERAGES
57% WIND	27% CERTAIN COSMETICS
56% HEAVY EXERCISE	15% MEDICATIONS
52% ALCOHOL CONSUMPTION	15% MEDICAL CONDITIONS
51% HOT BATHS	13% CERTAIN FRUITS
46% COLD WEATHER	10% MARINATED MEATS
45% SPICY FOODS	9% CERTAIN VEGETABLES
44% HUMIDITY	8% DAIRY PRODUCTS

## WHAT CAUSES ROSACEA?

The exact cause is not well understood, but various theories about the disorder's origin have evolved over the years. The range of possible causes has included:



Abnormal functioning of the immune system



Vasodilation, result of a dysregulation that involves both, nerves and blood vessels



Presence of Demodex, a mite that lives in our skin but their presence is higher in rosacea patients

## ROSACEA TREATMENTS INCLUDE:

There is no cure for rosacea, but it can be managed with appropriate treatment. There are different kinds of treatments available, not only through the public healthcare system, but also in private clinics. By consulting a Dermatologist, the optimal treatment can be outlined.

 Medication (topical and systemic)	 Intense Pulsed Light	 Biophotonic technology/fluorescent light energy	 Laser (KTP, PDL, Nd:YAG)	 Surgical procedures (in severe cases of rhinophyma)
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REFERENCES: 1. National Rosacea Society. (12 July 2011). "The Great Impostor". Retrieved from: [https://www.rosacea.org/weblog/the\\_great\\_impostor](https://www.rosacea.org/weblog/the_great_impostor); 2. National Rosacea Society. All About Rosacea. Retrieved 25 May 2018 from: <https://www.rosacea.org/patients/allaboutrosacea.php>; 3. National Rosacea Society. Rosacea Triggers Survey. Retrieved 25 May 2018 from: <https://www.rosacea.org/patients/materials/triggersgraph.php>