

Experts address lab monitoring of isotretinoin for treating acne

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Dermatology, data is provided for optimizing laboratory monitoring of acne patients treated with isotretinoin.

Eric Xia, from Harvard Medical School in Boston, and colleagues established a consensus for isotretinoin laboratory monitoring among clinical and research experts in acne. Four rounds of electronic surveys were administered from 2021 to 2022 using a modified electronic Delphi process. For [laboratory tests](#) reaching consensus (≥ 70 percent agreement) for inclusion, in subsequent rounds, questions regarding more time-specific monitoring throughout isotretinoin therapy were asked. The 22 experts had a mean of 23.7 years in practice, and represented a variety of practice settings.

The researchers found that consensus about testing or not testing was achieved for checking [alanine aminotransferase](#) within a month prior to initiation (89.5 percent) and at peak dose (89.5 percent), but not monthly (76.2 percent) or after treatment completion (73.7 percent), and for checking triglycerides within a month prior to initiation and at peak dose (89.5 and 78.9 percent, respectively), but not monthly or after treatment completion (84.2 and 73.7 percent, respectively). Consensus was also achieved for not checking complete blood cell count or basic metabolic panel parameters at any point during isotretinoin treatment (all >70 percent), and for not checking gamma-glutamyl transferase, bilirubin, albumin, total protein, [low-density lipoprotein](#), [high-density lipoprotein](#), or C-reactive protein (78.9, 81.0, 72.7, 72.7, 73.7, 73.7, and 77.3 percent, respectively).

"Reducing unnecessary laboratory monitoring may help decrease the pain, fear, and direct and indirect costs experienced by patients being treated with isotretinoin for acne," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

More information: Eric Xia et al, Isotretinoin Laboratory Monitoring in Acne Treatment, *JAMA Dermatology* (2022). [DOI: 10.1001/jamadermatol.2022.2044](https://doi.org/10.1001/jamadermatol.2022.2044)

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