Case Study: Rosacea

Hanna Mathis complains of breakouts on her face over the previous two weeks. On examination, it was found that the patient presents with inflammatory papules and pustules on the central third of the face and across the malar eminences. She was diagnosed with rosacea about 10 years ago. Until recently, she has always been able to control her rosacea using the skin care regimen recommended by her dermatologist.

Hanna says she doesn’t know if anything makes it worse. However, she recently purchased and has begun using a cleansing brush system in an effort to clear up her “pimples.”

The patient is a 38 year-old teacher’s aide who routinely skips breakfast, eats fast food for lunch and tries to prepare/eat a healthy meal in the evening. She takes indapamide for mild hypertension and omeprazole for GERD and has no known allergies.

Hanna has belonged to the same gym for six years where she participates in an indoor cycling program three times weekly. She recently began swimming laps four times weekly on the days when she does not have a cycling class.

1. What is Hanna’s problem?

2. List three factors that could be contributing to her symptoms.

3. What course of action would you recommend for this patient? Include your rationale for your decisions.

4. Prior to the Q&A period at end of webinar, using the “chat” feature, please feel free to share rosacea case questions you have seen or experienced in your practice.