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ORIGINAL ARTICLE

Acne awareness and perception among population in Jeddah, Saudi Arabia



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KEYWORDS

Acne; Awareness; Perception; Saudi Arabia; Jeddah **Abstract** *Background:* Acne is a common disease yet people have a lot of misconception regarding its causes and treatment.

Methods: A cross-sectional, self-administered questionnaire study was conducted on a population in Jeddah.

Results: 311 responded to the questionnaire. 64.5% suffered from acne. 85.6% think that more information about acne would be helpful. Diet 28.4% had the highest percentage as a cause of acne followed by bacteria 20.7% then poor hygiene 15.4% while 28.4% did not know the cause. Stress 58.4% and certain food 34.1% were the most believed factors to aggravate acne. Repeated frequent facial wash was thought to improve acne in 58.4%, while 63.3% thought it is a curable disease. Acne was believed to be a serious health problem by 53.82%. The younger age group thought that acne would cause depression and increase suicidal attempts more than individuals above 25 years of age. Regarding the psychological impact of acne, depression was believed to be a psychological consequence in 79.7% of the respondents, 71.7% agreed about its detrimental effect on social relationship and 55.8% agreed about its effect on marriage.

Conclusion: The study revealed that there is an actual defect in the general knowledge about acne regarding its causes and treatment.

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1. Introduction

Acne is a very common worldwide skin problem that is known to have a psychological impact on patients. Previous studies proved that people have a lot of wrong beliefs and misunderstandings about this disease. A French study on acne in adolescents, concluded that many of the studied groups thought that gender, excess weight, eating dairy products, and physical activity did not influence acne, and that frequent washing could improve acne. Eating chocolate and snacks, smoking

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48 S. Al Mashat et al.

cigarettes, sweating, not washing, touching/squeezing spots, eating fatty foods, using make-up, pollution, and menstruation were thought to worsen acne. The majority 80.8% did not believe acne to be a disease, but rather a normal phase of adolescence, although 69.3% agreed that it should be treated (Poli et al., 2011). Another study in Turkey indicated that there is an urgent need for education about etiopathogenesis, potential complications and importance of effective treatment for acne due to the deficient knowledge and wrong beliefs despite high prevalence (Uslu et al., 2008). Similar results were also found in Riyadh, Saudi Arabia (Al-Hoqail, 2003). Also, a study in Assir, Saudi Arabia found that there are no major differences in the beliefs, perception and psychological impact of acne patients from a developing society compared to more developed societies (Tallab, 2004). Because of these regional variations we conducted this study in Jeddah, Saudi Arabia, as it was not done here before. The goal of the research is to study our population general awareness about the disease, to gain better understanding of our community.

2. Method

A cross sectional study was conducted by distributing a self-administered questionnaire after taking a verbal consent. The questionnaire consisted of the personal data, knowledge and perception about the causes and pathogenesis of acne, the effectiveness of different treatment methods, preventive measures, prognostic values, and the psychological impact of acne on the individual and population. The questionnaire was distributed randomly among subjects 17 years and older. Subjects were recruited from medical college students, schoolteachers and outpatients in hospital waiting areas.

The study was conducted between April 2011and September 2012. Data entry and descriptive analysis were done using SPSS program.

3. Results

64.5% of the respondents suffered from acne, 44.5% were males and 55.5% were females. 53.82% think that acne is a serious health problem. 78.2% were between 17 and 25 and 21.8% were above 25.

3.1. Opinion about the causes of acne

Diet (28.4%) had the highest percentage as a cause of acne followed by bacteria (20.7%) then poor hygiene (15.4%). 28.4% did not know the cause. 3.7% thought virus was the cause and 3.3% related it to sexual desire. 88.2% believed that hormones have an effect on acne. 52% thought that acne blackheads are formed in the pores.

3.2. Opinion about what makes acne worse

Stress was thought to make acne worse in 58.4% of individuals while 34.1% of them related it to certain food in the diet. 7.2% blamed carbonated beverages and 3% believed computer screens made acne worse.

3.3. The perception and attitudes about acne care and treatment

61.3% agreed that some acne medications initially might make acne worse. 43% considered that the best way to treat acne is by dabbing medication on the individual pimples and 36.1% did not know. 58.4% believed that the more they wash their face the better their acne would be whereas 24.4% did not agree. 61.9% assumed that treating acne would prevent scarring. 63.3% thought that acne could be cured while 12.3% did not agree. Picking or squeezing acne is thought to improve acne in 11.1% of them and 76.8% did not think so. However, 85.6% of respondents think that more information about acne would be helpful.

3.4. The psychological impact of acne as thought by the participants

Depression was thought in (79.7%) of participants as a consequence of acne. A depression thought was highest 83.18% among respondents between 17 and 25 years of age, while it was 67.69% in those above 25 years of age.

71.7% believed acne can affect the social relationships, and (55.8%) thought it affects marriage. Suicidal attempts were thought in (17%), while (58%) thought that acne would not lead to suicidal attempts. This was common in individuals (20.25%) aged 17–25 years while it was 6.25% in those above 25 years of age.

4. Discussion

Acne is a very common chronic skin disease all over the world. Yet the knowledge of people about acne is still inadequate with a lot of misconceptions. We know that patients' knowledge of their disease is an essential part in its management, and leads to better control and compliance. We studied the perception and knowledge of acne in the population of Jeddah. It has been noticed that the knowledge of people about acne was poor in many studies. In our study, 85.6% of subjects think that more information about acne would be helpful. 53.7% think that acne is a serious health problem and 17.6% did not know if it was or not. Unlike the study that was done in Al-Qassim, by Al Robaee, 56% believed they have an adequate knowledge of acne (Al Robaee, 2005).

A study done in Riyadh, Saudi Arabia, concluded that Health education program about acne is needed to improve the understanding of the condition (Al-Hoqail, 2003). In this study, 62% believed that acne is not a serious problem, while 56.7% consider it as both a cosmetic and health problem. The investigators thought this may lead the youth to seek advice and treatment for their acne from the beauticians and through cosmetic salons rather than making a medical consultation with dermatologists. Similar results were reported in a study from France where they found that a large majority of individuals did not perceive acne as a disease, but rather as a normal phase of adolescence (Poli et al., 2011). Moreover, in Croatia, a study examined the perceptions of both acne patients and family physicians, and reported that acne was considered as a trivial and transitory condition by 52% of the acne patients and 44% of the family physicians, suggesting that better education is needed for both patients and physicians (Brajac et al., 2004).

Adolescents in many studies commonly thought diet and poor hygiene are the major cause of acne. In this study, diet (28.4%) had the highest percentage as a cause of acne followed by bacteria (20.7%) then poor hygiene (15.4%) and 28.4% of the studied subjects did not know the cause. Meanwhile, stress (58.4%) and certain food (34.1%) were the most believed factors to aggravate acne. Similarly in Riyadh, only 15.9% stated that acne is an infectious disease (Al-Hoqail, 2003). Also a study done in Greece among secondary school pupils in 2007, reported causal or exacerbating acne factors including: diet (62.3%), hormones (55.1%), poor hygiene (42.4%), stress (31.9%), infection (14.9%) and genetics (5.7%). Ameliorating factors included frequent washing (80.7%), sunbathing (38.6%) and adequate hours of sleep (32%) (Rigopoulos and Gregoriou, 2007).

The knowledge about ways of treating acne in our study is also not clear to more than half of the subjects. However, 58.4% think that the more you wash your face the better acne will be and acne was believed to be curable by 63.3% of individuals. Meanwhile a study done in Canada in 2001, revealed that acne was believed to be curable by 49% of patients with an anticipated treatment duration of less than 6 months (Tan et al., 2001).

Regarding the psychological impact of acne, their perception differed when age was considered, the younger age group thought that acne would cause depression and increase suicidal attempts more than individuals above 25 years. That was because that younger people are suffering more from acne. Depression was highly thought to be a possible consequence of acne (79.7%) followed by the effect of acne on social relationships (71.7%) then its effect on marriage (55.8%). On the other hand, only 17% think that acne may lead to suicidal attempts and 58% think that it would not. Likewise, in Riyadh, more than half of the studied group indicated that acne has an impact on loss of self-confidence and marriage avoidance (58.8% and 56.3%) Al-Hoqail, 2003. Though, in Al-Qassim most of the patients (73%) clarified that acne had no or minimal effect on their relationships (Al Robaee, 2005). Meanwhile, a Nigerian study accomplished in 2009, summarized that only a small number of respondents reported that their acne severely affected their relationship with their ability to make friends, relationship with their family, or school work (Yahya, 2009). Such differences could be due to culturally different ways of accepting the disease or the attitude of people toward understanding the disease. Although, in UK, Timms studied if moderate acne would be a potential barrier to social relationships and the conclusion was that moderate acne vulgaris could be a potential barrier to social relationships for young people not simply because of their social anxiety but because they may well be meeting with prejudice (Timms, 2013).

5. Conclusion

There is an actual defect in the general knowledge about acne while it is a very common disease. Also, studies that were done within the last 10 years in Saudi Arabia had the same conclusion. Most of the subjects think that knowing more about acne would be helpful which means they already know the lack of awareness about the disease.

6. Recommendation

Increasing awareness can be maintained by advising physicians to spend more time with the patient and explain the nature of the disease, pamphlets can be distributed in the clinics as a reference for some information and YouTube educating programs can be helpful for today's generation as long as they are willing to know.

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