

Internet acne education with automated counseling tested in clinical trial

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An Internet-based acne education program that included automated counseling was not better than a standard educational website in improving acne severity and quality of life in adolescents, according to an article published online by *JAMA Dermatology*. If e scores was not signi the two groups as well. The authors suggest th by lower-than expected They note that "despite

Acne vulgaris is a chronic inflammatory skin disease that is prevalent among adolescents. Patient education is an important part of managing acne along with medication. However, the effect of patient education on clinical outcomes is not well characterized in dermatology publications.

Researcher April W. Armstrong, M.D., M.P.H., of the University of Colorado, Aurora, and her coauthors developed an educational website on acne that incorporated automated online counseling to simulate face-to-face encounters. A standard educational website on acne was also developed for comparison. Both websites included suggestions on preventing acne, as well as information on medications and an anti-acne <u>skin</u> <u>care</u> routine.

The authors assessed the websites' effect on acne severity and quality of life in a <u>randomized clinical</u> <u>trial</u>. Ninety-eight high school students with mild to moderate acne were enrolled, and 95 students completed the study. The students were divided equally between the enhanced online <u>education</u> <u>program</u> with automated counseling and the standard website.

Students in both groups had similar acne lesion counts at the start of the randomized trial (an average of 21.33 <u>lesions</u> per person in the standard-website group vs. 25.33 lesions in the automated-counseling group). After 12-weeks, the change in the average number of acne lesions in the automated-counseling group (3.90 lesions) compared with the standard-website group (0.20 lesions) was not statistically significant, according to the results. Average improvement in quality of

life scores was not significantly different between the two groups as well.

The authors suggest their results may be explained by lower-than expected use of the study websites. They note that "despite a lack of differential effect between websites, our results indicate that the automated-counseling website improved short-term skin care behaviors."

"Therefore, interactive Internet-based education may still carry the potential to improve long-term clinical factors, such as <u>acne</u> severity and quality of life. This conclusion is significant given the importance of discovering modern and novel techniques to deliver patient education in dermatology," the study concludes.

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