1.6.4 If acne relapses after a second course of oral isotretinoin and is currently moderate to severe, further care should be decided by the consultant dermatologist-led team or the nationally accredited GPwER working within a consultant dermatologist-agreed pathway. If the person is no longer under their care, offer re-referral.

For a short explanation of why the committee made these recommendations and how they might affect practice, see the rationale and impact section on relapse.

Full details of the evidence and the committee's discussion are in evidence review H: management options for refractory acne.

1.7 Maintenance

1.7.1 Encourage continued appropriate skin care (see recommendations 1.2.1 to 1.2.4).

1.7.2 Explain to the person with acne that, after completion of treatment, maintenance treatment is not always necessary.

1.7.3 Consider maintenance treatment in people with a history of frequent relapse after treatment.

1.7.4 Consider a fixed combination of topical adapalene and topical benzoyl peroxide as maintenance treatment for acne. If this is not tolerated, or if 1 component of the combination is contraindicated, consider topical monotherapy with adapalene, azelaic acid, or benzoyl peroxide (see also recommendation 1.5.7 on starting topical treatment).

1.7.5 Review maintenance treatments for acne after 12 weeks to decide if they should continue.