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CORRECTION

Acne vulgaris: Spironolactone dosage error

(AUGUST 2003)

"Acne vulgaris: One treatment does not fit all" by Drs. Sharon J. Longshore and Kimberly Hollandsworth (Cleve Clin J Med 2003; 70:670–680) contained a typographic error. In TABLE 3 the dosage of spironolactone is incorrectly listed as 500 mg daily for 2–4 weeks. It should be 50 mg. The corrected table appears here. The editors apologize for this error, and we thank reader James H. Dernberg, MD, of Tyler, Texas, for pointing it out.

TABLE 3

Systemic acne treatments

Oral antibiotics
- Erythromycin 333–500 mg three or four times a day
- Tetracycline 500 mg twice a day
- Minocycline 50–100 mg daily or twice a day
- Doxycycline 50–100 mg daily or twice a day

Antiandrogens
- Oral contraceptives*
  - Norgestimate/ethinyl estradiol (Ortho Tri-Cyclen)
  - Drospirenone/ethinyl estradiol (Yasmin)
- Spironolactone 50 mg daily for 2–4 weeks, then 100 mg daily if tolerated

Retinoid
- Isotretinoin 0.5–2 mg/kg/day for 4–6 months (most common 1 mg/kg/day)

*Ortho Tri-Cyclen is FDA-approved for treating acne vulgaris; other low-dose combination oral contraceptives with estrogen dominance are also effective