European Evidence-based (S3) Guideline for the Treatment of Acne - Update 2016

List of abbreviations:

% NIL	% reduction in non-inflamed lesion count from baseline
% NO/CY	% reduction in nodules and cyst lesion count from baseline
% IL	% reduction in inflamed lesions count from baseline
% TL	% reduction in total lesion count from baseline
A	Assessor
AE's	Advers event/s
B	Blinding
BID	Bis in die / twice daily
BLD	Baseline differences between groups
BPO	Benzoyl peroxide
bw	body weight
C-BPO	Clindamycin-BPO
CC	Closed comedones
CO	Comedones
coa	Conclusion of author
conc	Concentration
d	Day/s
D	Duration (weeks)
E	Enroller
QOD	Quoque alternis die / every other day
LE	Evidence level / Level of evidence
ER	Extended-release
GIT	Gastrointestinal disorder
HCl	Hydrochloride
i.d.	insufficient data
IL	Inflamed lesions
I	Investigator
ITT	Intention to treat analysis (all randomized patients were evaluated)
LOCF	Last observation carried forward
LTF	Lost to follow up
m	month/s
mITT	modified ITT (patients with at least 1 dosage or the like were evaluated)
MR	Modified Release
N	Number of individuals randomised
n.a.	not applicable (e.g. summary of safety for vehicle vs placebo, efficacy data of placebo [when arm was switched to verum])
n.d.	Not described, no information about blinding
NIL	Non- inflamed lesions
NO	Nodules
NS	Not significant
O	Open / not blinded
OC	Open comedones
QD	Quaque die / once per day
P	Patient
PA	Papules
Php	Phosphate
po	Per os / by mouth / orally
PU	Pustules
QID	Quarter die sumendus / four times a day
rel.	related
S	Severity: 1= mild, 2= moderate, 3= severe
SS	Statistically significant (p≤0.05)
TEAE	Treatment-emergent adverse event

TID	Ter die sumendus / three times a day
TMG	Tretinoin microsphere gel
top.	Topical
v/vs.	Versus
VAS	Visual analogue scale
w	Week/s
w/o	with/without
-	No detailed information available