We conclude that 5% solubilized BPO ± salicylic acid offers greater BPO/clindamycin products in reducing inflammatory and non-inflammatory lesions at weeks 2-4 and/or weeks 10-12 by:

- Inflammatory lesion count:
  - Greater efficacy than 5% BPO and 1%-1.2% clindamycin in reducing the inflammatory lesion count.
  - Comparable efficacy to BPO/clindamycin combination products, with non-overlapping 95% confidence intervals. 5% solubilized BPO ± salicylic acid was more effective than clindamycin alone and significantly more effective than 5% BPO alone (Figure 2).

- Non-inflammatory lesion count:
  - Greater efficacy than 5% BPO ± salicylic acid attained statistically greater percent reductions in inflammatory lesion count and non-inflammatory lesion count than any of the other treatments, with non-overlapping 95% confidence intervals (Figure 2). BPO/clindamycin combination products were more effective than clindamycin alone and significantly more effective than 5% BPO alone (Figure 2).

- Weighted mean reductions in inflammatory lesion count were:
  - 51.8% with 5% solubilized BPO ± salicylic acid
  - 43.7% with 5% BPO
  - 40.7% with 1%-1.2% clindamycin
  - 35.8% with BPO/clindamycin combination

- Weighted mean reductions in non-inflammatory lesion count were:
  - 47.5% with 5% solubilized BPO ± salicylic acid
  - 39.0% with 5% BPO
  - 33.5% with 1%-1.2% clindamycin
  - 33.0% with BPO/clindamycin combination

- Weighted mean reductions in inflammatory lesion count were as follows:
  - 38.4% with placebo
  - 32.6% with clindamycin
  - 40.7% with BPO/clindamycin combination

CONCLUSIONS

1. 5% solubilized BPO ± salicylic acid offers greater efficacy than 5% BPO and 1%-1.2% clindamycin, and comparable BPO/clindamycin products in reducing inflammatory and non-inflammatory lesions. 5% solubilized BPO ± salicylic acid is as effective as these products in reducing lesion counts at weeks 10-12.

REFERENCES