BEAUTY

How to Start a Retinoid Without Wrecking Your Face

A four-step acne routine that keeps the effective ingredient, strips away needless irritation and tells you when your skin needs medical help.

Step 1: Check what you are treating

You have the retinoid. You also have a cleanser, several half-used treatments and the uneasy feeling that one wrong combination will set your face on fire. The best place to begin is not with more products. It is with a simpler question: does what you see look like ordinary acne?

Acne forms when oil and dead skin cells clog hair follicles. The resulting lesions can include whiteheads, blackheads, small inflamed bumps, pus-filled pimples and deeper, painful nodules. Blackheads are not trapped dirt; air discolours the oil at the surface. Scrubbing harder will not clear that process and may make acne worse.

Location and behaviour matter. Painful, boil-like lumps that repeatedly form where skin rubs together-particularly the armpits or groin-may be hidradenitis suppurativa (HS), a chronic condition that can cause draining abscesses, tunnels and scars. It can resemble acne early on, but it needs assessment by a healthcare professional rather than an improvised facial routine.

Deep or painful lesions, developing scars, or acne that is causing substantial distress also move this beyond a casual skincare experiment. A 2024 evidence-based guideline strongly recommends oral isotretinoin for acne that is severe, scars, creates a psychosocial burden or has not responded to standard topical or oral therapy. That is a prescription conversation, not a reason to apply more topical retinoid.

Step 2: Choose one topical retinoid

The working part of this routine is one topical retinoid. These vitamin A-derived medicines can treat existing lesions, reduce inflammation and help stop new acne forming. The 2024 guideline gives topical retinoids a strong recommendation, placing them alongside benzoyl peroxide (BPO) and certain antibiotics among the best-supported acne options.

That recommendation does not mean irritation is imaginary. Topical acne medicines can cause redness, burning and irritation, and a 2022 network meta-analysis found topical retinoids less

well tolerated than placebo. The analysis included 179 randomised controlled trials (RCTs) and about 35,000 observations, but the quality of the trials ranged from moderate to very low and uncertainty remained high in parts of the evidence.

Choice can therefore be about tolerability as well as ambition. A 2019 systematic review of 54 clinical trials found only minor efficacy differences among topical retinoids overall. Adapalene had the better tolerability profile among the retinoids reviewed, while adverse events were more common with one tested tretinoin strength than with the tested adapalene strengths. That does not guarantee a comfortable experience, but it gives you a defensible question to ask when choosing.

Use one retinoid product according to its instructions or your prescriber's directions. The supplied evidence does not establish a universal application schedule that will suit every product and every face, so inventing one would be false precision. If you develop burning, redness or irritation, tell your doctor rather than treating discomfort as proof that the medicine is working.

The best place to begin is not with more products.

Step 3: Keep everything else quiet

A retinoid routine does not need to become a shelf-clearing project. Clean your skin gently with a mild cleanser and lukewarm water. Strong soaps, astringents and rough scrub pads add aggression to skin that may already be irritated by a topical medicine.

Scrubbing also misunderstands acne. Pimples are not caused by dirty skin, and blackheads are not dark because they contain grime. Inside the follicle, oil and skin cells stick together, bacteria grow within the plug and inflammation follows. Cleaning can remove surface dirt, but force cannot scour out that biology.

Hands can cause trouble too. Rubbing, squeezing and picking lesions may lead to scars or dark marks. That restraint matters because acne itself can scar, while people of colour may also develop discoloration after a lesion heals. A routine intended to improve acne should not create a second injury around it.

Combination therapy has stronger evidence than an ever-growing collection of unrelated extras. The 2022 review found a retinoid combined with BPO among the most effective topical options for mild-to-moderate acne, while a retinoid combined with clindamycin performed strongly for moderate-to-severe disease. The 2024 guideline also supports combining treatments with different mechanisms. But antibiotics and prescription combinations belong in a clinician-led plan; do not build one from leftover products.

For a clean start, what you need is a mild cleanser and one topical retinoid-not scrubs, astringents or several competing acne treatments. If your acne is not responding, that is a reason to discuss another evidence-based treatment, not a cue to make the routine harsher.

Step 4: Put sunscreen beside it

Sun protection is not the decorative final step. Many acne medicines can make you more prone to sunburn, and general acne care advises using sunscreen and avoiding both sunburn and tanning. Sunscreen is especially important when dark marks remain after acne heals.

Choose cosmetics and hair products described as oil-free and noncomedogenic, meaning they are intended not to clog pores. Even these can worsen acne in some people, so a crowded routine can make it harder to identify what your skin does not tolerate. The goal is not to find a perfect label. It is to keep the number of variables manageable.

This is also where "without wrecking your face" becomes a realistic promise rather than a dramatic one. No evidence can promise zero irritation. What you can do is remove avoidable friction: do not scrub, do not pick, do not mistake burning for a required stage and do not leave acne-treated skin unprotected outdoors.

On Monday, clear the sink and leave out only three things: a mild cleanser, one topical retinoid and a sunscreen. Keep the product instructions with the retinoid, and write down any burning, redness or irritation to discuss with your doctor. That small kit will not guarantee flawless skin. It will give the treatment a fair trial without surrounding it with noise.

Where this comes from

- Acne

  MedlinePlus, U.S. National Library of Medicine · https://medlineplus.gov/acne.html
- Hidradenitis Suppurativa

  MedlinePlus, U.S. National Library of Medicine · https://medlineplus.gov/hidradenitissuppurativa.html
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