

Discrimination of Acne Vulgaris with Human Scalp Hair Tissues Using - FTIR-ATR Spectroscopy

Padmavathi R^{1*}, Gunasekaran S², Rajamannan B³, Ramkumar GR⁴, Sankari G⁵, Muthu S⁶

1 Department of Physics, Meenakshi Sundararajan Engineering College, Kodambakkam, Chennai, 600024, TN, India.

2 Research and development St. Peter's institute of Higher Education and Research, St. Peter's University, Avadi, Chennai, 600054, TN, India.

3 Engineering physics, FEAT Annamalai University, Annamalai Nagar, 608002, Chidambaram, TN, India.

4 Department of Physics, C. Kandaswaminaidu College for Men, Chennai-600102, India.

5 Department of Physics, Meenakshi College for Women's, Kodambakkam, Chennai-600024, India.

6 Department of Physics, Govt. Thirumagal Mills College, Gudiyatham-632602, Vellore, TN, India.

Correspondence; padmavati@gmail.com

Abstract: Acne vulgaris is a chronic skin disease which occurs due to inflammation of the hair follicles and sebum producing (sebaceous) glands of the skin called pilosebaceous unit and the anaerobic propionic acne bacterium, *P. acne*. Human sebum is dominantly made up of 57.5% of triglycerides and fatty acids, 26% wax esters, 12% Squalene and 4.5% Cholesterol. The increased level Androgen hormone, sebum lipid composition, *P. acne* over growth which induces monocytes and pro inflammatory cytokines attracts neutrophils, basophils, and T cells to the pilosebaceous unit and drive epithelial hyper proliferation i.e., Acne vulgaris. The actual biomolecular changes due to acne vulgaris disease are present in the blood and in the sebum and also in the noninvasive sample of human scalp hair follicles. The main objectives of the present study are to analyze human scalp hair follicles samples using FTIR-ATR spectroscopy to compare and discriminate the spectral signatures of acne vulgaris and healthy scalp hair tissue samples through acne bio-markers Protein, Amide I, Amide II and Squalene (LDL), using the method of internal ratio parameters.

Keywords: Acne Vulgaris; hair tissue samples; discrimination; FTIR-ATR

1. Introduction

Acne is a multifactorial disease characterized by pathological alteration in pilosebaceous units of the neck and upper trunk. It results in the formation of comedones and inflammatory lesions such as papules, pustules and nodules [1]. Acne is a chronic inflammatory skin disease and is generally found in adolescence [2]. The exact pathophysiology of acne remains unclear, the following are the four main interacting factors in the pathogenesis of acne vulgaris: viz., (i) The Keratinization, (ii) Excess sebum production, (iii) Colonization by *P. acnes* and (iv) Inflammation. The hair, sebum and keratinocytes that fill the narrow follicle may produce a plug, an early sign of acne. The follicular plugging (comedones) prevents sebum from reaching the skin surface through a pore. The mixture of oil and dead skin cells provide a suitable environment for gram-positive anaerobic bacterium (*P. acnes*) that normally live in the skin to grow in the plugged follicles [3]. The Propionic bacterium *acnes* plays an important role in the initiation and prolongation of inflammation [4]. The *P. acnes* induces monocytes through the activation of toll-like receptor 2 (TLR-2) to secrete pro-inflammatory cytokines, such as tumor necrosis factor (TNF) α , interleukin (IL)-1 β and IL-8 [5, 6]. Among the all cytokines that are released, a chemotactic factor IL-8 is pivoted in attracting neutrophils, basophils, and T cells to the pilosebaceous unit, leading to the development of chronic inflammation [7] and accumulation of neutrophils at the site of acne comedons

44 [8]. Due to phagocytosis, these accumulated neutrophils generate reactive oxygen and nitrogen species
45 (ROS) and (RNS) respectively. ROS contains super oxide radicals (O_2^-), hydrogen peroxide (H_2O_2),
46 hydroxyl radical ($\cdot OH$), singlet oxygen (1O_2), peroxide radical ($LOO\cdot$) and RNS contains nitric oxide (NO)
47 and peroxynitrite (ONOO). These two ROS and RNS species cause inflammation and tissue injury.

48 Although the acne pathology involves many factors, a number of studies indicate that
49 oxidative stress caused by imbalance between ROS and antioxidants in favor of ROS is one of the major
50 factors [9-14]. Lipid peroxides, products of lipid per oxidation, may function as a cause of acne or as an
51 acne genic agent or both. Oxidative stress causes damages to all cellular components through attack on
52 lipids, proteins and DNAs. Due to increase in free radicals, changes in structure and functions of the
53 proteins, lipids and nucleic acids can lead to tissue damages. Based on this hypothesis, antioxidants
54 which decrease oxidative stress and lipid peroxidation would be preventive and therapeutic agents
55 against acne. The lipid damage hypothesis in the pathogenesis of acne was proposed half a century ago
56 [15]. The biomarkers of oxidative stress are very important clinically and the evaluation of body tissue
57 and fluids is used to diagnose pathological conditions, diseases. A component of sebum, particularly
58 squalene is the main biomarker exhibit enhanced comedogenicity when oxidized. Squalene, which is
59 specific to human sebum, protects skin surface from lipid peroxidation. Both squalene and its oxidized
60 products are at much higher levels in acne patients than in healthy individuals [16-19].

61 In recent days many investigations are carried out for the treatment of acne vulgaris. Among
62 them few recent treatment are gives us follows. Herbs possessing antimicrobial and anti-inflammatory
63 activity have been applied as a medical option for centuries. Lu-Je Chauary et al studied and examined,
64 the suppressive effect of ethanolic oregano (*Origanum Vulgare*) extract on live *P.acnes*- induced in vivo
65 and in vitro inflammation [20]. Mohammed H.Talebe et al in 2018 in their studies, they assessed the
66 healing and antimicrobial activity of the developed nanoemulsion of the most effective Essential oils (EO)
67 in vivo in an acne mouse model as a potential new formulation for acne treatment [3]. *Sanguisorba*
68 *officinalis* L.Root (SOR) known to be effective against skin diseases, including urticarial, eczema and
69 allergic dermatologist [21] and against numerous bacteria [22-24]. Seongdae kime et al in 2018 investigate
70 on anti-bacterial activity against *p.acnes*, and the in vitro antioxidant activities of SOR. Shean-Chung
71 Tang studied about the dual effects of Alpha-Hydroxy Acids (AHAS) on the skin. They review the
72 various biological effects and mechanisms of AHAS on human keratinocytes and in animal model [25].
73 The encapsulation of anti-acne drugs in various nanotechnological carriers improve their efficacy and
74 reduce side effects [26]. Agamia NF et al in 2018, investigate on effects of oral isotretinoin on the nucleo-
75 cytoplasmic distribution of FoxO1 and FoxO3 proteins in sebaceous glands of patients with acne vulgaris
76 [27].

77 In recent days different methods are being used to diagonize diseases. Hair is a non-invasive
78 tissue that would enable clinicians to monitor diseases frequently, easily and would have impact on the
79 medical research and drug therapy. The main aim of this study is to discriminate the hair follicle tissue
80 of acne vulgaris patients with healthy subjects as hair follicle undergoes biochemical changes due to acne
81 vulgaris. The biomolecules present in the hair follicle is used as a probe in the investigation and its
82 scrutiny using the FTIR-ATR molecular spectroscopic technique.

83 2. Materials and Methods

84 FTIR –ATR spectral measurements of human hair samples were carried out at Sophisticated
85 Analytical Instrumentation Facility (SAIF-SPIHER), St. Peter's Institute of Higher Education and

86 Research, Avadi, Chennai, India, using Perkin Elmer Spectrum-Two FTIR Spectrometer with Attenuated
87 Total Reflectance accessory having highly reliable and single bounce diamond as its Internal Reflectance
88 Element (IRE). Human scalp hair follicle samples from 20 healthy persons and 20 acne vulgaris patients
89 were collected from the persons with their consent, between the age group of 20-25. The single hair
90 sample was plucked from the hair root (i.e., anagen phase, active growing stage of the hair fiber) and
91 collected in an airtight plastic cover and stored in room temperature. The hair samples were soaked in
92 acetone for 1 minute and soaked in distilled water later. In order to avoid noise signals occurring due to
93 water content in the hair roots, the hair specimens are taken into laminar dry air flow to remove the water
94 thoroughly. All the diseased and healthy hair samples were analyzed in the Mid IR region of 4000-450
95 cm^{-1} . Since water is a good absorbent of IR radiation, it affects the actual spectral response of the test
96 tissue and dominated in the FTIR spectrum of the hair tissue sample. After the removal of water content,
97 the root of the hair sample was placed on the IRE crystal. Force is applied by the pressure gauge on the
98 hair sample to provide good optical contact with the internal reflectance crystal. FTIR spectral
99 measurements were recorded at room temperature and each sample, measurements were repeated to
100 ensure the reproducibility of the spectra. The spectra were baseline corrected and normalized at a
101 particular vibrational band.

102 3. FTIR-ATR spectral profile of human scalp hair tissue

103 The FTIR-ATR absorption spectrum of healthy scalp hair is represented in Figure 1 and the
104 vibrational band assignments of the biomolecules of the human hair fiber are shown in the Table 1
105 Vibrational band assignment is done with the idea of the group frequencies of the various biomolecules
106 present in the human scalp hair. The spectral region 3600-3000 cm^{-1} comprises of C-H, N-H and OH
107 stretching modes of Amide (A) [28]. For the methyl (CH_3) group of proteins and lipids asymmetric
108 and symmetric modes were observed at 2962 cm^{-1} and 2864 cm^{-1} respectively, CH_2 for the methylene
109 group of Fatty acids, the asymmetric mode occurred at 2880 cm^{-1} [29]. The strong absorption band at
110 1633 cm^{-1} corresponds to C=O stretching vibration coupled with an in-plane bending of N-H and C-N
111 stretching modes (Amide I band) [30]. The vibration at 1516 cm^{-1} due to C=O stretching coupled with
112 C-N stretching and bending deformation of N-H in the protein backbones [31]. The absorption in the
113 keratin spectrum is attributed to the deformation and bending modes of the C-H/ CH_2 / CH_3 groups
114 originating from the various amino acid (SC) side chains [32]. The bands are exemplified as medium,
115 broad absorption at 1454 cm^{-1} (LDL), while the band at 1245 cm^{-1} is due to asymmetric (PO_2) stretching
116 vibrations of Lipid phosphate of amino acid [33]. The Spectral band at 1068 cm^{-1} is due to the contribution
117 of C-O stretching vibrations of glucose.

118 4. Discrimination of Acne vulgaris Human Scalp Hair

119
120 The present paper focuses mainly on qualitative and quantitative studies on healthy and acne
121 vulgaris human scalp hair tissues using FTIR-ATR spectroscopy. FTIR absorption spectra of 20 healthy
122 human scalp hair samples and 20 Acne hair human scalp hair samples were recorded. The spectral
123 signatures of overlaid average spectra of healthy and acne vulgaris tissues are represented in Figure 2.
124 The Figure 2 emphasizes the difference in the intensity of IR absorption exhibited by the tissues, there is
125 no spectral difference between the healthy and acne hair tissue samples with respect to wave numbers of
126 various vibrational modes but considerable difference in the intensity of IR absorption of some specific
127 vibrational modes of biomolecules present. The squalene main biomarker for acne vulgaris has occurred
128 at 1454 cm^{-1} , whose absorption is high in acne patients when compared to healthy subjects.

129 Ottaviani et al. 2010 the renowned researcher suggests the direct involvement of squalene
130 peroxidation products on the onset of an inflammatory state in early acne lesions [34]. Hence the
131 abnormalities in lipid and protein metabolism in acne are higher in above said, secretion of β -defensing
132 and IL-8 protein and squalene (LDL) on target (i.e. hair) tissues. Among the lipid alterations, high density
133 lipoprotein (HDL) levels, which significantly decrease in patients with lesions, and the difference in the
134 height of the histogram is important in the discrimination of acne vulgaris tissues from healthy subjects
135 to LDL (low-density lipoproteins) levels. Which increase as the acne condition becomes more severe [35].

136 Based on these, vibrational bands observed at 3264 cm^{-1} (Protein), 1633 cm^{-1} (Amide I), 1516 cm^{-1} (Amide
 137 II), 1454 cm^{-1} (Squalene- LDL) have been considered as biomarkers for diagnosis of acne vulgaris. In order
 138 to get exact deviations and the intensity of absorption in the discrimination of acne vulgaris from healthy
 139 tissues, internal parameter ratios are calculated. This deals with the ratio of the intensity of infrared
 140 absorption of specific sensitive infrared bands. The sensitivity exhibited by the FTIR spectral bands of
 141 protein and lipid bands due to the IR absorption of acne vulgaris tissues clearly indicates that these are
 142 the key markers in the investigation of acne vulgaris.
 143

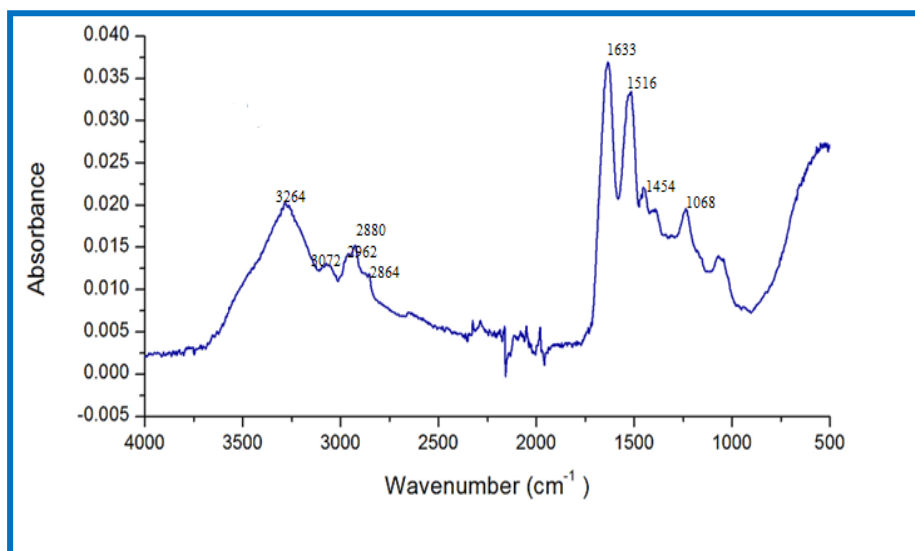


Figure 1 Average FTIR-ATR Spectrum of healthy Human Scalp Hair tissue

144
 145

Table 1 FTIR-ATR spectrum and vibrational analysis of biomolecules present in the human scalp Hair tissue

Wavenumber (cm ⁻¹)	Band Assignment
3264	N-H stretching mode (Amide A) of Protein
3072	Amide -B band due to overtone of Amide I band
2962	Asymmetric stretching vibrations of CH ₃ of proteins and Lipids
2880	Asymmetric stretching vibrations of CH ₂ methylene group of fatty acids
2864	CH ₃ symmetric stretching of methane groups of proteins and Lipids
1633	C=O symmetric stretching vibrations of amide group Amide I
1516	Amide II band due to N-H bending vibration strongly coupled C-N stretching of Proteins
1454	δ C-H/CH ₂ /CH ₃ of both lipid and protein groups (LDL), Squalene
1245	Asymmetric P=O stretching vibrations of PO ₂ stretching of Lipid Phosphate
1068	C-O stretching vibrations of glucose region

146
 147

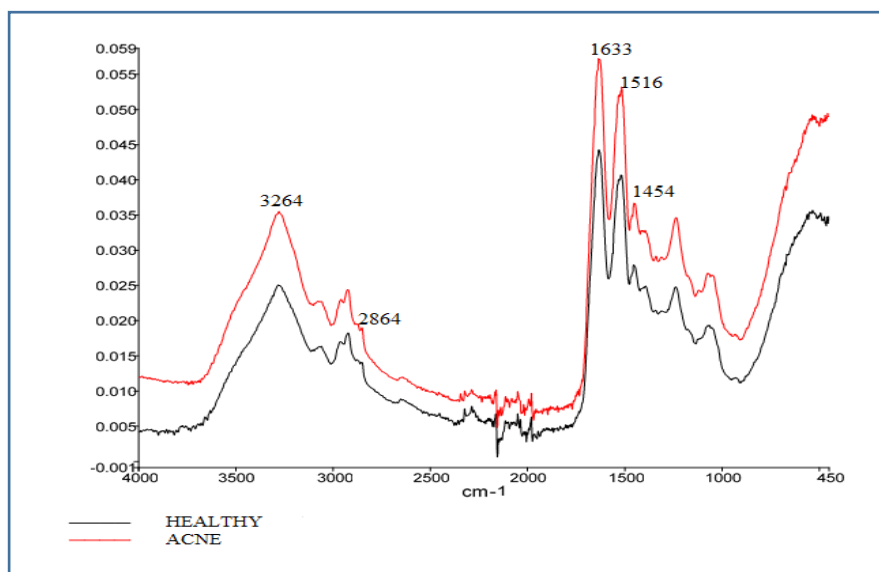


Figure 2 Overlaid Average FTIR-ATR Spectra of Healthy and Acne Vulgaris Human Scalp Hair tissues

5. Statistical Analysis

Internal parameter ignores the difference in the amount of sample under investigation, it nullifies the contradiction in the quantity of the sample and gives measured out exact deviation in the ratio of R_1 (3264/2864), R_2 (1633/2864), R_3 (1516/2864) and R_4 (1454/2864) of acne hair tissue. It is clear that, the absorption peaks of proteins and lipids for acne patients are more than the healthy person. The deviations in the internal ratio parameters of proteins and lipids of healthy and acne vulgaris tissues are provided clearly in Tables 2. For better understanding in deviation observed from internal ratio parameter calculations, the data obtained from internal ratio parameters is picturized using histograms as shown in Figure 3. The histograms drawn between the ratios of Protein / Lipid, Amide I / Lipid, Amide II / Lipid and Squalene / Lipid shows the increase in height of the histogram of acne vulgaris. The statistical test was carried out for these four intensity ratio parameters. The results are summarized in Tables 3 and also pictorial representation with standard deviations is shown in Figure 4. It is noticed from the Table 3 that the hair tissues of acne vulgaris patients had statistically significantly higher levels of protein and lipid content than the healthy persons. The mean intensity ratio R_1 levels is 2.0460 ± 0.3584 in acne patients and 1.6971 ± 0.1485 in healthy individuals. This shows the mean intensity ratio of protein and lipids for acne patients are very much greater than healthy individuals. The mean intensity ratio R_2 level is 4.2167 ± 1.3056 in acne patients and 2.8878 ± 0.5313 in healthy individuals there by justifying the means intensity ratio of Amide I and lipid for acne patients are very much greater than healthy individuals. The mean intensity ratio R_3 levels is 3.8105 ± 1.2124 in acne patients and 2.6356 ± 0.4867 in healthy individuals. This again confirms the mean intensity ratio of Amide II and lipids for acne patients are very much greater than healthy individuals. The mean intensity ratio R_4 levels is 2.6935 ± 0.7971 in acne patients and 1.7591 ± 0.3603 in healthy individuals. This gives strong support that the mean intensity ratio of squalene and lipids for acne patients are very much greater than those of healthy individuals.

179

Table 2 Intensity ratio parameters of Healthy and Acne Vulgaris tissues

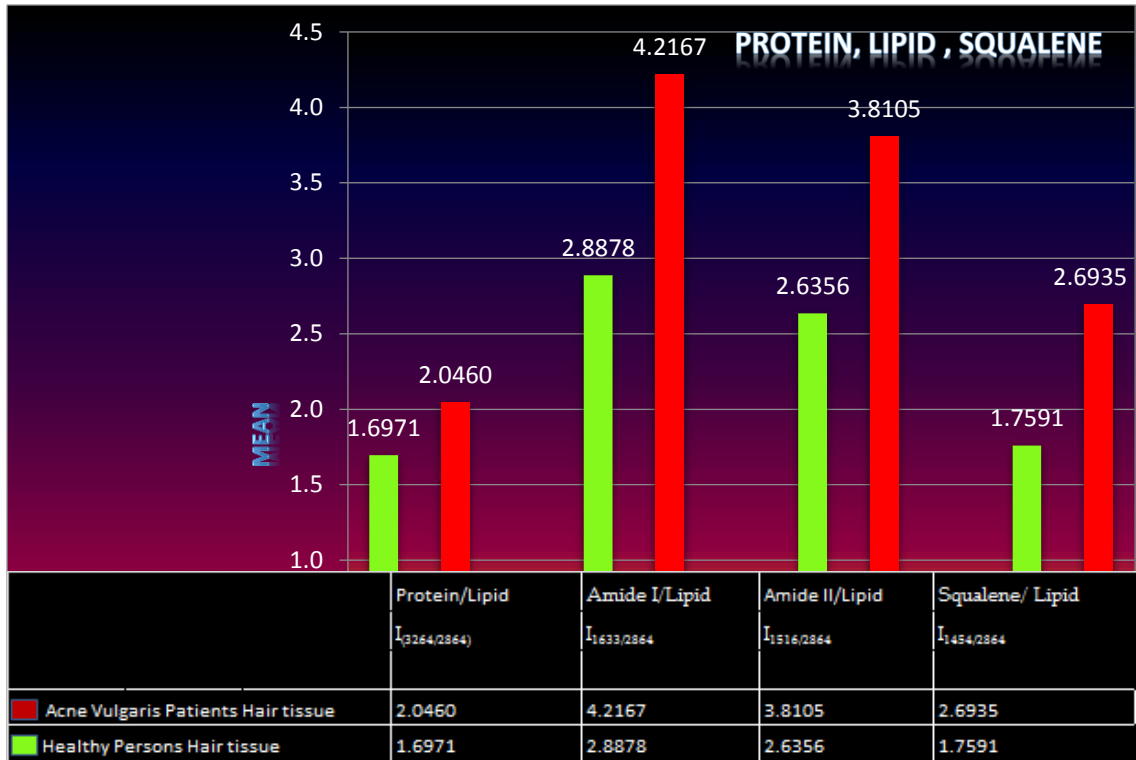
Samples	Protein / Lipid		Amide I / Lipid		Amide II / Lipid		Squalene / Lipid	
	I _{3264 / 2864}		I _{1633 / 2864}		I _{1516 / 2864}		I _{1454 / 2864}	
	Healthy	Acne Vulgaris	Healthy	Acne Vulgaris	Healthy	Acne Vulgaris	Healthy	Acne Vulgaris
1	1.9606	2.8254	3.5906	7.2222	3.3307	6.6508	2.1969	4.3968
2	1.7778	1.9606	2.963	3.6535	2.7099	3.3386	1.016	2.1732
3	1.6233	2.9211	2.214	6.9605	2.0605	6.3158	1.4186	4.3026
4	2.0000	2.0758	4.5606	4.2424	4.1364	3.7273	2.8485	2.6136
5	1.7241	2.2661	3.1724	5.2110	2.8793	4.6881	1.9052	3.3028
6	1.7711	2.2427	2.811	5.3786	2.607	4.8155	1.7662	3.2816
7	1.6933	1.7591	2.6626	3.4234	2.4601	3.0949	1.6503	2.1825
8	1.8571	2.0918	3.0357	5.2449	2.6929	4.7347	1.7786	3.2347
9	1.5848	1.8293	2.2712	3.0732	1.9915	2.6768	1.3051	1.8293
10	1.6418	1.7349	2.8806	2.9628	2.6119	2.7372	1.8060	1.7930
11	1.5773	1.7667	2.493	2.9528	2.2448	2.7444	1.6399	1.7922
12	1.7750	1.8122	2.975	2.9771	2.7875	2.7863	1.9000	1.9542
13	1.3119	2.1529	2.1835	3.9529	2.0367	3.6000	1.5688	2.4118
14	1.6310	1.7725	2.506	2.5059	2.2798	2.2797	1.5536	1.5536
15	1.6418	1.7035	2.8806	3.6627	2.6119	2.7209	1.806	2.5930
16	1.6340	1.6901	3.0825	3.7777	2.8041	3.4327	1.8763	2.6783
17	1.7238	2.0000	3.1429	4.1066	2.8952	3.8361	1.9429	2.5000
18	1.6995	2.0544	2.8653	3.9116	2.5959	3.4966	1.7668	3.2176
19	1.7407	2.4944	2.9722	5.4607	2.7315	5.0899	1.7963	3.3371
20	1.5734	1.7666	2.493	3.6527	2.2448	3.4444	1.6399	2.7222

180

181

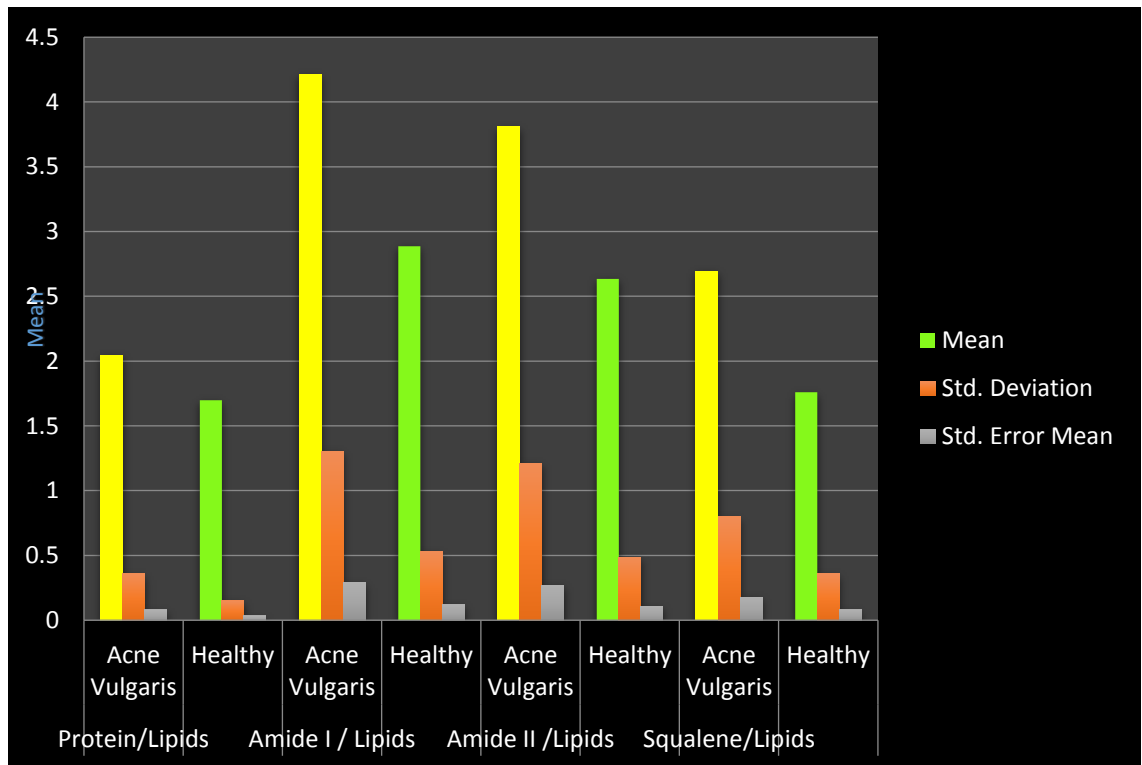
Table 3 Group Statistics T-Test of Hair tissues of Healthy and Acne Vulgaris tissues

	Group	N	Mean	Std. Deviation	Std. Error Mean
Protein / Lipid	Acne Vulgaris	20	2.0460	0.3584	0.0801
	Healthy	20	1.6971	0.1485	0.0332
Amide I / Lipid	Acne Vulgaris	20	4.2167	1.3056	0.2919
	Healthy	20	2.8878	0.5313	0.1188
Amide II / Lipid	Acne Vulgaris	20	3.8105	1.2124	0.2711
	Healthy	20	2.6356	0.4868	0.1089
Squalene / Lipid	Acne Vulgaris	20	2.6935	0.7971	0.1782
	Healthy	20	1.7591	0.3603	0.0806



182
183
184
185

Figure 3. Histogram Indicating the Mean Intensity Ratios of Healthy and Acne Vulgaris Hair tissues



186
187
188

Fig 4. Group Statistics T-Test of Hair tissue of Healthy and Acne Vulgaris tissues

Table 4 Independent Samples t-Test of Healthy and Acne Vulgaris Hair tissues

Internal Ratio Parameter (IRP)	Levene's Test for Equality of Variances			t-test for Equality of Means						
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
R ₁ = Protein / Lipid	Equal variances assumed	8.893	0.005	4.022	38	0.000	0.3488	0.0867	0.1732	0.5244
	Equal variances not assumed			4.022	25.33	0.000	0.3488	0.0867	0.1703	0.5274
R ₂ = Amide I / Lipid	Equal variances assumed	10.637	0.002	4.684	38	0.000	1.4148	0.3021	0.8032	2.0263
	Equal variances not assumed			4.684	25.72	.000	1.4148	0.3021	0.7935	2.0360
R ₃ = Amide II /Lipid	Equal variances assumed	10.518	.002	4.463	38	.000	1.2532	0.2808	0.6847	1.8217
	Equal variances not assumed			4.463	25.51	.000	1.2532	0.2808	0.6755	1.8310
R ₄ = Squalene/ Lipid	Equal variances assumed	9.204	.004	5.288	38	.000	0.9856	0.1863	0.6083	1.36290
	Equal variances not assumed			5.288	27.29	.000	0.9856	0.1864	0.6033	1.3678

190

191 The independent sample t-test table as shown in Table 4 provides the actual results from the independent
 192 t-test and the Levene's test for the equality of the variances. This analysis revealed a significant difference
 193 between the healthy subjects and acne patients. Several studies that were done in China and Brazil
 194 showed association between lipid profile with acne vulgaris [36,37]. In the present study, since $p = 0.000$,
 195 the null hypothesis that the mean ratio (R_1, R_2, R_3, R_4) of acne and healthy subjects are the same. The
 196 intensity ratio parameters of R_1, R_2, R_3 and R_4 for acne vulgaris patient's hair tissues were statistically
 197 higher than the healthy subjects. The Levene's test for the equality of variances helps in checking whether
 198 the two variables have similar variances. According to this test, if the variances are equal, then the "Sig"
 199 will be greater than 0.05. However, if the "Sig" value is less than 0.05, the variance are unequal. In the
 200 present study, the results showed the value of "Sig" was less than 0.05; for the ratios of (R_1, R_2, R_3, R_4), thus
 201 the variance were found to be different in healthy subjects and acne patients.

202

203 **6. Conclusion**

204 The pathogenesis of acne vulgaris is not completely clear for the past several decades and
205 various studies have indicated that patients with acne suffered due to lipid per oxidation in particular
206 acne growth. Several studies indicate that mainly the oxidative stress is the main culprit which initiated
207 inflammation in pilosebaceous unit creating a suitable environment for the P acnes by the oxidation of
208 sebum is the initial step for the pathogenic process of acne. Hence in this investigation, the normal human
209 scalp hair sample was analyzed using FTIR-ATR spectrum and they were compared with spectral
210 signatures of diseased acne samples and revealed major differences in absorption levels of metabolic
211 components, viz., Protein, Amide I, Amide II and Squalene (LDL) i.e., $R1 = I(3264 / 2864)$ (Protein / Lipid),
212 $R2 = I(1633 / 2864)$ (Amide I / Lipid), $R3 = I(1516 / 2864)$ (Amide II / Lipid) and $R4 = I(1454 / 2864)$ (Squalene
213 / Lipid). From the internal ratio parameters results, it is clear that the acne patients have a high level of
214 Protein and Lipid Squalene when compared with the healthy ones. Thus, FTIR-ATR spectroscopic
215 technique shows very well results in detecting quantity variation in the functional groups present in the
216 tissue components such as lipids and proteins. The results were compared with the group statistical data,
217 which are exactly similar to the mean values of internal parameter ratios. Observed results are analyzed
218 using an independent samples t-test, where the p-value $p = 0.000$ and "Sig" was less than 0.05 ; for the
219 ratios of (R1, R2, R3, R4) where the variances are unequal, and value of 'Sig' (2), observed to be 0.005,
220 0.002, 0.002 and 0.004, it shows that the two independent variable were highly significant at 1% level.
221 Thus, the variance was found to be different in healthy subjects and acne patients, which indicated that
222 the spectral variations have provided significant differences in the healthy and acne vulgaris subjects.

223

224 **Acknowledgments**

225 The authors are thankful for the generous support rendered by Sophisticated Analytical
226 Instrumentation Facility (SAIF-SPIHER), St. Peter's Institute of Higher Education and Research, Avadi,
227 Chennai- 600054, for permitting to deploy the advanced instrumentation FTIR-ATR spectrophotometer..

228

229 **REFERENCES**

- 230 1. Williams, H.C.; Dellavalle, R.P.; Garner, S. Acne vulgaris. *Lancet* **2012**, *379*, 361-372.
231 2. Bergfeld, W.F.; The pathophysiology of acne vulgaris in children and adolescents, Part 1.
232 *Cutis*. 2004; *74*,92-97.
233 3. Mohammed, H.Taleb.; Nourtan F. Abdeitawab.; Rehab N. Shamma.; Sherein S, Abdelgayed.; Sarah
234 S.Mohamed A.Farag and Mohammed A. Ramadan.; Origanum vulgare L. Essential Oil as a Potential
235 Anti-Acne Topical Nanoemulsion-In Vitro and in Vivo Study, *Molecules*. 2018, *23*,2164.
236 4. Omer, H.; McDowell, A.; Alexeyev, O.A.; Understanding the role of Propionibacterium acnes in acne
237 vulgaris: The critical importance of skin sampling methodologies. *Clin. Dermatol*. 2017, *35*, 118-129.
238 [[CrossRef](#)] [[PubMed](#)].
239 5. Kim,J.; Ochoa, M.T.; Krutzik, S.R.; Takeuchi, O.; Uemats, S.; Legaspi, A.J.; Brightbill, H.D.; Holland,
240 D.' Cunliffe, W.J.; Akira S et al. Activation of toll-like receptor 2 in acne triggers inflammatory Cytokine
241 responses. *J.Immunol*. 2002, *169*, 1535-1541. [[CrossRef](#)] [[PubMed](#)].
242 6. Kim, J. Review of the innate immune response in acne vulgaris: Activation of Toll-like receptor 2 in

- 243 Acne triggers inflammatory cytokine responses. *Dermatology*. 2005, 211, 193–198. [[CrossRef](#)]
244 [[PubMed](#)].
- 245 7. Brennan K, Zheng J, Interleukin 8. In *xPharm: The Comprehensive Pharmacology Reference*; Elsevier
246 Inc.: New York, NY, USA, 2011; 1–4.
- 247 8. Akamatsu H, Horio T, Hattori K (2003) Increased hydrogen peroxide generation by neutrophils
248 from patients with acne inflammation. *Int J Dermatol*, 2003; 42: 366-369.
- 249 9. Al-Shobaili, H.A. Oxidants and anti-oxidants status in acne vulgaris patients with varying severity,
250 *Ann Clin Lab Sci*. 2014, 44, 202-207.
- 251 10. Bowe, W.P.; Patel, N.; Loan, A.C. Acne vulgaris: the role of oxidative stress and the potential
252 Therapeutic value of local and systemic antioxidants. *Drugs Dermatol*. 2012, 11, 742-746.
- 253 11. Sahib, A.S.; Al-anbari, H.H.; Abu Raghil, A.R.; Oxidative stress in acne vulgaris: an important
254 Therapeutic target. *J Mol Pathophysiol*, 2013, 2, 27-31.
- 255 12. Arican, O.; Kurutas, E.B.; Sasmaz, S. Oxidative stress in patients with acne vulgaris. *Mediators*
256 *Inflamm*. 2005, 380-384.
- 257 13. Sarici, G.; Cinar, S.; Armutcu, F.; Altinyazar, C.; Koca, R. et al. Oxidative stress in acne vulgaris.
258 *J Eur Acad Dermatol Venereol*. 2010, 24, 763-767.
- 259 14. Al-Shobaili, H.A.; Alzolibani, A.A.; Al Robaee, A.A.; Meki, A.R.; Rasheed, Z.; Biochemical markers
260 of oxidative and nitrosative stress in acne vulgaris: correlation with disease activity. *J Clin Lab*
261 *Anal*, 2013, 27, 45-52.
- 262 15. Lorincz, A.I. Human skin lipids and their relation to skin diseases. *Armed Services Technical*
263 *Information Report*, 1965, AD467008: 1-2.
- 264 16. Saint-Lager, D.; Baque, A.; Cohen, E.; Chivot, M.; A possible role for squalene in the pathogenesis of
265 acne. I. In vitro study of squalene oxidation. *Br J Dermatol*, 1986, 114, 535-542.
- 266 17. Hanaoka, H.; Ohkido, A.; Hattori, Y.; Maruta, T.; Arai T (1971) Reexamination of the sebaceous
267 function with relation to squalene. *Japanese J Dermatol*. 1971, 81, 103.
- 268 18. Cotterill, J.A.; Cunliffe, W.J.; Williamson, B.; Bulusu, L. Further observations on the pathogenesis of
269 acne. *Br Med J*, 1972, 3, 444-446.
- 270 19. Saint-Lager, D.; Baque, A.; Lefebvre, E.; Cohen, E.; Chivot, M. A possible role for squalene in the
271 pathogenesis of acne. II in vivo study of squalene oxides in skin surface and intra-comedonal lipids
272 patients. *Br J Dermatol*. 1986, 114, 543-552.
- 273 20. Lu-Je Chauary, Tsung-Hsien Tsai, Tsung-Jung Lien, Wen-Cheng Huang, Jun-Jen Liu, Hsiang
274 Chang, Mei-Ling Chang and Po-Jung Tsai, Ethanol Extract of *Origanum vulgare* Suppresses
275 Propionibacterium acnes-Induced Inflammatory Responses in Human Monocyte
276 and Mouse Ear Edema Models, *Molecules*. 2018, 23, 1987.
- 277 21. Kim, S.H.; Kim, D.K.; Eom, D.O.; Kim, S.Y.; Kim, S.H.; Shin, T.Y.; *Sanguisorba officinalis* inhibits
278 immediate-type allergic reactions. *Nat. Prod. Sci*. 2002, 8, 177-182.
- 279 22. Shan, B.; Cai, Y.Z.; Brooks, J.D.; Corke, H. The in vitro antibacterial activity of dietary spice and
280 medicinal herb extracts. *Int. J. Food Microbiol*. 2007, 117, 112-119.
- 281 23. Gawron-Gzella, A.; Witkowska-Banaszczak, E.; Bylka, W.; Dudek-Makunch, M.; Odwrot,
282 A.; Skrodzka, N.; Chemical composition, antioxidant and antimicrobial activities of
283 *sanguisorba officinalis* L. extracta. *Pharm. Chem. J*. 2016, 50, 244-249.
- 284 24. Ginovyan, M.; Petrosyan, M.; Trchounian, A.; Antimicrobial activity of some plant materials

- 285 used in Armenian traditional medicine. *BMC complement. Altern.Med.*2017, 17,50.
- 286 25. Shean-Chung Tang and Jen-Hung Yang. Dual effects of Alpha-Hydroxy Acids on the Skin
287 ,*Molecules.* 2018, 23, 23-863.
- 288 26. Verma, S.; Utreja ,P.; Kumar, L.; Nanotechnological carriers for treatment of acne, *Recent Pat*
289 *Antiinfect Drug Discov;* 2018 Sep, *Epub Ahead of print.*
- 290 27. Agamia, N.F.; Hussein, O.M. Effect of oral isotretinoin on the nucleo-cytoplasmic distribution
291 of FoxO1 and FoxO3 proteins in sebaceous glands of patients with acne vulgaris,
292 Abdelmaksoud, RE et al, *Exp Dermatol.*2018 Sep 21.
- 293 28. Sankari, G.; Krishnamoorthy, E.; Jayakumaran, S.; Gunasekaran, S.; VishnuPriya, V.; Shyama,
294 Subramanian.; Subramaniam, S.; Surapaneni Krishna Mohan, Analysis of serum immunoglobulins
295 using Fourier transform infrared spectral measurements, *J. Biology and Medicine.* 2010, 2, 42-48.
- 296 29. Akhtar, W.; Edwards HGM, Farwell DW, Nutbrown, M.; Fourier –Transform Raman apectroscopic
297 study of human hair, *Spectrochimica Acta Part A.* 1997, 53 ,1021-1031.
- 298 30. Tu AT, Raman spectroscopy in Biology: Principles and applications, *John wiley and Sons* 1982.
- 299 31. Chen, Y.J.; Cheng, Y.D.; Liu, H.Y.; Lin, P.Y.; Wang, C.S.; Observation of biochemical imaging
300 changes in human pancreatic cancer tissue using Fourier-transform infrared microspectroscopy,
301 *Chang Gung, Med J.* 2006, 29, 518-27.
- 302 32. Barton ,P.A, Forensic Taphonomy Investigation of Single α -Keratin Fibres Under Environmental
303 Stress Using A Novel Application of Ftir-Atr Spectroscopy of Chemetrics, Honours Thesis,
304 Queensland University of Technology 2004.
- 305 33. Bantignies, L.; Fushs, G.; Carr, G .L.; Williams, G .P.; Lutz, D.; Marull, S.. Organic Reagent
306 Interaction With Hair Spatially Characterized By Infrared Microspectroscopy, Using Synchrotron
307 Radiation, *Int Cosmet Sci.* 1998, 20, (38), 94.
- 308 34. Ottaviani, M.; Emanuela Camera, and Mauro Picardo. Lipid Mediators in Acne, *Mediators of*
309 *Inflammation.* 2010, 858176-6
- 310 35. Cunha ,M.G; Batista, A,L.; Macedo, M.S.; Filho, C.; Fonseca, F. Study of Lipid Profile in Adult
311 Women with Acne. *Clin Cosmet Investig Dermatol.* 2015, 8 , 449-54.
- 312 36. Jiang, H.; Li, C.Y.; Zhou, L.; Lu, B.; Lin, Y.; Huang, X. et al. Acne Patients Frequently Associated
313 with Abnormal Plasma Lipid Profile. *J Dermatol.* 2015; 42(3): 296-9.
- 314 37. Arora,M.K.; Seth, S.; Dayal, S.; Trehan, A.S.; Seth, M. Serum Lipid Profile in Female Patients with
315 severe Acne Vulgaris. *Clin Lb.* 2014, 60, (7),1201-5.
- 316
- 317