

Table SI. Treatment options for inflammation of rosacea

Treatment	Mode of action	Approved/off-label use	Notes
Facial erythema – transient flushing			
Facial erythema – non-transient			
<i>Topical treatments</i>			
Brimonidine tartrate (82)	Selective α ₂ -adrenergic receptor agonist	Approved for patients with erythema of rosacea	First approved treatment for erythema of rosacea
Oxymetazoline (89)	Selective α ₁ -adrenergic receptor agonist	Still in development; not yet approved	Preliminary observations show an improvement in erythema
Light/laser therapy			
Pulse-dye laser	Laser/light treatment (90)	Pulse-dye laser	Laser/light treatment (90)
Potassium-titanyl-phosphate laser		Potassium-titanyl-phosphate laser	
Intense pulsed light		Intense pulsed light	
<i>Off-label treatments</i>			
Beta blockers (e.g. carvedilol) (84)	β-adrenergic receptor antagonists	Used off-label	Suppresses flushing reactions
Papules, pustules			
Azelaic acid (91) (dicarboxylic acid)	Antibacterial, anti-inflammatory and anti-keratinising	Approved for patients with PPR	Reduces inflammatory lesions and overall facial erythema
Metronidazole (92) (imidazole antibiotic)	Antimicrobial and anti-inflammatory	Approved for patients with PPR	Reduces papules and pustules and erythema ^a
Sodium sulphacetamide + sulphur (93)	Antibacterial, antifungal, antidemodectic and keratolytic	Approved for patients with acne rosacea	Reduces inflammatory lesions and erythema
Clindamycin (94)	Antibiotic	Off-label use	Reduces inflammatory lesions and erythema
Tretinoin	Retinoids (95)	Off-label use in some countries	Limited evidence to support use, especially with regards to erythema
Adapalene			
Tazarotene			
Ivermectin (96)	Anti-inflammatory (97) and antiparasitic (98)	Approved for patients with PPR	Reduces inflammatory lesions and erythema

^aNote that assessment of erythema included both overall background erythema and perilesional erythema.