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# Formulation and Standardization of Herbal Cream for Acne Vulgaris

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Abstract: At some point in their lives, everyone develops acne, pimples, sunburn scars, and pigmentation. In order to treat their skin issues and provide them a good, healthy complexion, customers have started shopping for goods like anti-acne cream. However, the majority of anti-acne creams on the market are loaded with ingredients to which some people may have an adverse reaction. Using two gram-positive bacteria (Staphylococcus aureus and Bacillus cereus) and two gram-negative bacteria, the extract and cream's antibacterial activities were tested using the disc diffusion method (Escherichia coli and Salmonella enterica). The bactericidal effects of the extract were investigated at dosages of 5, 10, and 25 mg/ml. The extract's antibacterial properties were incredibly ineffectual against all investigated species. As soon as the extract was added to the cream's recipe at Concentrations of 10, 25, and 50 successfully maintained this activity. After two months, the cream's formulation remained the same. After clinical and toxicology testing are complete, this cream formulation can be successfully utilised to treat skin infections, including acne vulgaris. The primary pathogenic factors include androgen-stimulated stimulation of sebaceous gland secretion, hyperkeratinization, abnormal infundibular epithelium keratinization that blocks sebaceous follicles, and Propionibacterium acnes colonisation of the pilosebaceous unit, which causes inflammation around the sebaceous follicles. The common formulations that are already on the market typically have a variety of unfavourable consequences, including poor patient compliance, skin irritation, dryness, peeling, and itching, as well as decreased therapeutic efficiency. A skin condition called acne vulgaris will almost certainly affect everyone at some point in their lives. Herbal therapies are thought to be safer than allopathic ones because they are less likely to have adverse effects such contact allergies, localised irritation, scaling, photosensitivity, itching, pruritus, skin peeling, etc. This study showed that a variety of herbal extracts had anti-acne properties. The cream's recipe included a sizeable amount of poly herbal extract. An in vitro method of measuring antibacterial activity was used to test the anti-acne effects of the suggested formulation (broth dilution method and sub culturing method). Using the skin feel test, the spreadability, greasiness, tackiness, film-forming, softening, soothing, and pleasantness of cream were evaluated. The outcomes demonstrated that the formula chosen also possessed potent anti-acne properties. As a result, we might encourage more invivo research and testing on items that are already on the market. Acne is a pilosebaceous-related skin condition that is continuously inflammatory. This condition is widespread and affects 85% of youngsters worldwide. Acne's disfiguring dermatosis might significantly lessen emotional discomfort by weakening selfconfidence. Available as topical and systemic therapy for treating acne are comedolytic medicines, antibiotics, and many anti-inflammatory medications. Because of the undesirable side effects, frequently high cost, and antibiotic resistance in acne-causing bacteria, the need for medicinal plants has been gradually rising. This review provides the most recent information on medicinal plants and the phytoconstituents used to treat acne. The most popular anti-acne drugs, like as retinoids, systemic and topical antibiotics, and hormones, have a number of dangerous side effects. According to the literature, Calendula officinalis, Rosa canina, Zataria multiflora, Trigonal foeman graecum, and Glycine max all have antibacterial, antiinflammatory, and antioxidant qualities that could be used to treat the disease's inflamed sores. Before making changes, a standard washing cream recipe containing bees wax, spermaceti, borax, liquid paraffin, and water was considered.

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214

# **IJARSCT**



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