



# A title should be the fewest possible words that accurately describe the content of the paper, no more than 16 words (Times New Roman, center, bold, 16pt)

Author 1\*, Author 2, Author 3, Author 4, Author 5 (12pt, bold, maximum consisting of 5 authors) 1 Name of University, Country (12pt, Times New Roman)

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## **ABSTRACT**

A well-prepared abstract allows readers to quickly and accurately identify the basic content of a document, determine its relevance to their interests, and thereby decide whether to read the document in its The abstract must be entirety. informative and clear enough, written clearly, and provide a clear statement of the problem, research objectives, research methods. findings, and conclusions. Abstracts should consist of 100 to 200 words. The abstract must be written in the past tense. Standard nomenclature should be used, and abbreviations should be avoided. No literature may be cited. Keyword lists provide the opportunity to add keywords used by indexing and abstracting services in addition to the keywords already present in the title. Wise use of keywords can increase the ease with which interested parties find our articles (12pt).

**Keyword**: The first keyword; the second keyword; the third keyword; The fourth keyword; The fifth keywords. (There are a minimum of five keywords and a maximum of six keywords)

# INTRODUCTION (Capital, bold, Times new romance 12 pt)

This section explains the three main components. First, to describe the phenomenon being studied, the introduction must contain the research background and research context. Second, the author explains the relationship between the phenomenon and existing theories (at least the journal cited must be less than ten years old), along with gap analysis and the novelty of the research, and finally explains the research objectives. All introductions should be presented in paragraph form, not pointers, with a proportion of 15-20% of the overall length of the article.

The introduction should not be divided into background sub-chapters, problem formulation, and objectives. Beginning of paragraph once tab. Citations are written in bodynote format and are relevant to the bibliography (recommended using the Mendeley application or other reference management application programs such as EndNote, Reference Manager, or Zotero) (12pt, spacing 1.5, spacing after paragraph 6pt).

The manuscript should be written as concisely, consistently, and as directly as possible. The number of pages consists of 10–20 (twenty) pages (including figures and tables). Manuscripts are written single-spaced on one side of A4-sized paper (210 x 297 mm). Manuscripts must have normal margins, or top, bottom, right, and left margins, namely 2.54 cm. The font used is Times New Roman. 12pt. Manuscripts must be written in English.

#### **METHODS**

The Methods section must be short but must include sufficient technical information and contain the type of research, research population, research samples or subjects, and data analysis techniques. Only new methods have to be described in detail. Cite previously published procedures in References.

**Table 1. Search Strategy** 

Database	Search Strategy	Hits
Pubmed	("acne" AND "microbiome")	7
Science	("acne" AND "microbiome")	79
Direct		
Sagepub	("acne" AND "microbiome")	17

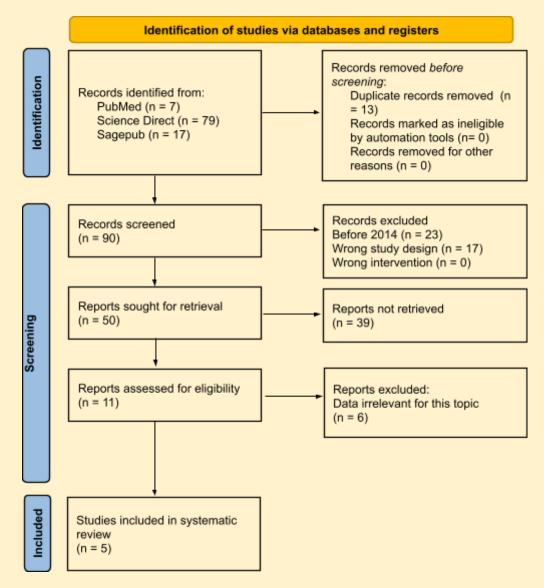


Figure 1. Article search flow chart

### **RESULT**

Results should include the rationale or design of the experiment as well as the results of the experiment. Results can be presented in the form of images, tables, and text. Research findings must be supported by adequate data. This section must answer the research hypothesis.

Avoid writing in the form of bullet numbering or item list style; it is best to write it in the form of a descriptive paragraph, even though it is a list item. If it contains

tables and figures, the numbering is a continuation of the previous number. Each table and figure must be given a title.

#### Table

The table is in the middle. Use Times New Roman and font sizes 8 to 11. Horizontal lines in the middle of the table do not need to be displayed; only display the heading and the very end, and there should also be no vertical lines. Make sure you create the table correctly via the Insert Table menu. Tables should be referenced in the text by writing something like: '... (Tables are written with a capital 'T').

Table 3. The literature included in this study

Schneider, et al. <sup>11</sup> (2023)	USA	Cross sectional study	48 patients	A significant shift in microbial diversity emerged between early (T1-T2) and late (T3-T5) stages of puberty, coinciding with increased sebum production on the face. The overall relative abundance of C. acnes in both normal and acne skin increased during puberty and individual C. acnes strains were uniquely affected by pubertal stage and the presence of acne. Further, an acne microbiome signature associated with unique C. acnes strain composition and metabolic activity emerges in late puberty in those with acne. This unique C. acnes strain composition is predicted to have increased porphyrin production, which may
				contribute to skin inflammation.

Cavallo et al. <sup>12</sup> (2022)	Italy	Cross sectional study	100 patients	Microbiota analysis showed a significantly lower alpha diversity in inflammatory lesions (LA) than in non-inflammatory (NI) lesions of acne patients and healthy subjects (HS). Differences at the species level were driven by the overabundance of C. acnes on LA than NI and HS. The phylotype IA1 was more represented in the skin of acne patients than in HS. Genes involved in lipids transport and metabolism, as well as potential virulence factors associated with host-tissue colonization, were detected in all IA1 strains independently from the site of isolation. Additionally, the IA1 isolates were more efficient in early adhesion and biomass production than other phylotypes showing a significant increase in antibiotic
Jusuf et al. <sup>13</sup> (2020)	Indonesia	Cross sectional study	40 patients	In non-inflammatory lesions, the growth of nine bacterial species was observed from 40 samples. In an anaerobic culture, Cutibacterium acnes (17,5%) was identified. In aerobic cultures, different bacterial species were found including Staphylococcus epidermis (52.5%), Staphylococcus hominis (12.5%), Staphylococcus haemolyticus (7.5%), Micrococcus luteus (7.5%), Leuconostoc mesentroides (7.5%), Staphylococcus aureus (5%), Kocuria varians

(5%), and Staphylococc vitulinus (2.5%). In	IS
inflammatory lesions, ni	ne.
bacterial species were	10
found, in which was the	•
anaerobic culture we	
identified Cutibacteriur	า
acnes (25.0%). Aerobio	
cultures have revealed the	ie
growth colonies of	
Staphylococcus	
epidermidis (42.5%),	
Staphylococcus homini	
(22.5%), Staphylococci	S
aureus (12.5%),	
Staphylococcus	
haemolyticus (10.0%). Leuconostoc mesentroid	20
(5.0%), Staphylococcu	
cohnii (2.5%),	
Staphylococcus arletta	,
(2.5%), and Dermacocci	
nishinomyaensis (2.5%	).
Two mixed bacterial	
growths were observed	
non-inflammatory lesion	
while four mixed bacter	al
growths were found in inflammatory lesions.	
Targeted amplicon	
sequencing of the 16S	
ribosomal RNA gene	
	20
(16S-seq), are enabling t	16
quantification of	
human-resident	
microorganisms at	
Finotello et Cross unprecedented resolutio	1
al. (2018)   Italy   sectional   patients   providing novel insight	S
study into the role of the	
microbiota in health an	
disease. Once microbia	
abundances are quantified	d
through NGS data	
analysis, diversity indice	es
provide valuable	
mathematical tools to	
describe the ecological	

				complexity of a single
				sample or to detect species
				differences between
				samples. However,
				diversity is not a
				determined physical
				quantity for which a
				consensus definition and
				unit of measure have been
				established, and several
				diversity indices are
				currently available.
				Skin microbiota appears as
				a key player involved in
				several skin dermatoses
				physiopathology. Here, we
				show that inflammatory
				skin is associated with
				changes in the skin
				microbiota composition on
				the back of severe acne
				patients but also on the
				face of patients where acne
D	Cross	40	was scored as mild to	
Dagnelie et	France	sectional	tudy patients healthy controls. Chan	moderate, comparing with
al. <sup>15</sup> (2019)		study		healthy controls. Changes
				were observed particularly
				on skin commensals
				Propionibacteriaceae,
				Staphylococcaceae and
				Enterococcaceae families,
				suggesting the importance
				of the balance between
				skin commensals to
				maintain skin homeostasis
				and control skin
				inflammatory process.

# **DISCUSSION**

The discussion should be an interpretation of the results, not a repetition of the results. This discussion includes at least: an explanation of the meaning of the

findings and why the findings are important; Support the answer with the results. Explain how your results relate to expectations and the literature; state clearly why the results are acceptable and whether there is any agreement or conflict with previous research results; consider alternative explanations for the findings; consider research implications; study limitations; and provide suggestions for further research.

Avoid writing in the form of bullet numbering or item list style; it is best to write it in the form of a descriptive paragraph, even though it is a list item. If it contains tables and figures, the numbering is a continuation of the previous number. Each table and figure must be given a title.

#### **CONCLUSION**

The conclusion must contain confirmation of the problems that have been analyzed in the results and discussion sections. Write a conclusion concisely and clearly. It is not recommended that the conclusion be written in several parts or points. The conclusion is intended to help readers understand why your research is important to them after they have finished reading the manuscript. A conclusion is not simply a summary of the main topics discussed or a restatement of your research problem, but rather a synthesis of the important points. It is important that the conclusion does not leave any questions unanswered.

#### **DISCLOSURE STATEMENT**

Disclosure Statement: The authors have no conflicts of Interest to declare.

#### REFERENCES

References should be listed in the order of their appearance in the text. Each cited source must include the author's name, article title, journal name, year of publication, volume, issue number, page numbers, and DOI (if available). Example of reference format:

- 1. Chen H, Zhang TC, Yin XL, Man JY, Yang XR, Lu M. Magnitude and temporal trend of acne vulgaris burden in 204 countries and territories from 1990 to 2019: an analysis from the Global Burden of Disease Study 2019. Br J Dermatol. 2022 Apr;186(4):673–83.
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- 3. Walters KE, Martiny JBH. Alpha-, beta-, and gamma-diversity of bacteria varies across habitats. PLoS One. 2020;15(9):e0233872.
- 4. Dréno B, Dagnelie MA, Khammari A, Corvec S. The Skin Microbiome: A New Actor in Inflammatory Acne. Am J Clin Dermatol. 2020 Sep;21(Suppl 1):18–24.
- 5. Barnard E, Shi B, Kang D, Craft N, Li H. The balance of metagenomic elements shapes the skin microbiome in acne and health. Sci Rep. 2016 Dec 21;6:39491.