**Materials and Methods**

The patients included in this study were those aged 25 or older, accompanied at the Lipids Outpatient Clinic from Medicine Department at UNIFESP/EPM, after approval of Institutional Ethics Commitee and signature of the Consent Form (CF). (see Photo 1 and Photo 2) [insert photo 1 and photo 2].

Inclusion criteria were: signature of CF, age 25 or older, metabolic alterations and/or diagnosis of metabolic syndrome, and agreement with the terms and conditions of the study.

Exclusion criteria were: non-agreement with the study criteria or CF signature and age younger than 25 years.

The patients electronic records were accessed, as well as those from new patients referred to the Lipid or Dermatology clinics, from July 2017 to June 2018. The ones presenting risk characteristics or presence of metabolic syndrome were evaluated by clinical examination in order to detect the presence of acne scars on face, anterior thorax an upper back the presence of metabolic syndrome. Data were submitted to correlations in both groups of patients.

The clinical analysis comprised anamnesis (emphasis to behaviors such as smoking and alcohol consumption), measurement of waist circumference, blood pressure, weight, height and body mass index.

The laboratory tests included: fasting glucose, blood count and serum levels of insulin, triglycerides, LDL, HDL, ALT, AST, urea and creatinine.

Statistical analysis consisted of prevalence with confidence interval, in a 95% range (95%CI) of acne history or scars among patients in treatment at the Lipids Clinic. The Chi-Square Pearson’s test or Fisher’s exact test were used to evaluate the association of social and demografic data, clinical and lab exams with acne scars. A statistical 5% significance level was adopted; that means, p-values smaller to 0.05 (p<0.05) were considered statistically significant.