


ATOPIC DERMATITIS

Atopic dermatitis (AD), also termed eczema, is a type of inflammatory skin disease that disrupts the skin barrier and its ability to hold moisture. It is the most common chronic skin disease and is genetically transmitted. AD affects individuals of all ages but most commonly begins in infancy and early childhood. It can last into adulthood and also can begin developing in adulthood.


Overall, up to 5-30% of the pediatric and 1-10% of the adult population have atopic dermatitis globally.



SKIN SYMPTOMS

- Acute form: itchy, red, small blisters or oozing
- Chronic form: dry, darkened, thickened skin
- Skin can show acute, subacute and chronic forms
- Infants: affects face and extensor surfaces of body
- Children and adults: folds of arms, legs, neck and less commonly face
- Hyperpigmentation possible in chronic, untreated cases

Diagnosis is based on a clinical picture of characteristic rash and itch. Testing aims at identifying allergic triggers.



THE “ATOPIC MARCH”

- Refers to a natural progression of allergic diseases that often begins early in life
- AD often is the first manifestation of allergic hypersensitivity, or atopy
 - usually in first months and years of life
 - development of food allergy, hay fever, and/or asthma can follow
- Eczema may flare in up to 1/4 to 1/3 of infants and children with AD who have a food trigger, but some may also experience more traditional food allergy symptoms such as hives and wheezing
- Early intervention with aid of allergist and dermatologist may help to prevent or modify the atopic march

What does “atopic” mean in this condition? Most people who have atopic dermatitis have a personal or family history of allergies.



SOCIOECONOMIC BURDEN

Out of pocket costs

- Co-pays for numerous specialists and medications
- Over-the-counter emollients
- Medications that insurance might not cover
- More clinic and urgent care visits, possibly hospitalizations


Lost work and school productivity

- Lost work and school days
- Increased sick days in bed

QUALITY OF LIFE CONCERNS

- Chronic symptoms
- Sleep disturbance
- Other skin manifestations such as bleeding, dryness, scaling, oozing and crusting
- Self-consciousness
- Limitations of daily activities
- Impact on relationships
- Effects of treatment
- Interruption of work and school activities
- Susceptibility to infections and viruses

Doing a Quality of Life Assessment with the physician can help with managing symptoms and possibly preventing them.



TRIGGERS

- Temperature and humidity
- Contact dermatitis
- Harsh soaps and detergents
- No protective clothing for dry and cold weather changes
- Stress
- Dust mites, animal dander and inhalant allergens in the environment
- Microbial infections
- Lack of sleep
- Sometimes food allergens (more common in children)

Physicians can help identify triggers to avoid in order to keep symptoms under control and stay comfortable and healthy.




TREATMENT OPTIONS

Management consists of a combination of trigger avoidance, skin care and medications for inflammation. Treatment varies depending on the severity and extent of the disease. Ask your doctor about treatment options.

- Topical corticosteroids
- Topical calcineurin inhibitors
- Immunosuppressants
- Antihistamines (sedating type)
- Phosphodiesterase inhibitors such as crisaborole
- Phototherapy
- Biologic therapy
- Oral corticosteroids (though not preferred)
- *Staphylococcus aureus* load reduction measures (bleach baths, triclosan wash)

Careful hydration and moisture application, as prescribed by the physician, are extremely important in managing atopic dermatitis.



The information in this infographic does not replace care of the doctor and should not be considered advice. You must consult your physician.

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