
- The results confirm other investigations showing that patients with moderate-to-severe atopic dermatitis often suffer from one or more psychosocial comorbidities, eg, anxiety, depression, sleep disorder.
- Psychosocial comorbidities often lead to reduced physical and mental health status and work-related impairment.


- The burden of atopic dermatitis is substantial, increases with disease severity, and affects not only the patient but the family and caregivers as well.
- Consequently, treatment directed at reducing the burden of disease, both the burden experienced by the patient, as well as the caregiver/family, is essential.


- Patients who don’t achieve a clear or almost clear response in the short term with topical crisaborole may achieve clear skin if the treatment is continued.
- Crisaborole is an effective and safe alternative for patients who do not want to use a topical corticosteroid.
- To achieve a faster response, clinicians might consider adding a topical corticosteroid initially.

Safety, efficacy, and pharmacokinetics of crisaborole ointment, 2%, in infants aged 3 to <24 months with mild-to-moderate atopic dermatitis (#16018). Schlessinger J, et al.

- Crisaborole has now been shown to be safe and effective in patients age 3 months to 2 years, thus serving as a good alternative to or reducing exposure to topical corticosteroid therapy in this young age group.
- Safety in young infants should provide reassurance as to the safety of crisaborole in older children.


- The topical Janus kinase inhibitor ruxolitinib is effective in reducing, and in some patients, eliminating itch.
- The results might be used to change the goal of treatment to being completely clear of itch, which has a major negative impact on patient functioning and quality of life.

Dupilumab treatment for up to 3 years demonstrates sustained efficacy in adult patients with moderate-to-severe atopic dermatitis: Results from LIBERTY AD Adult OLE (#16292). Blauvelt A, et al.

- Dupilumab is safe and effective in adults with moderate-to-severe atopic dermatitis treated for up to 3 years.
- The low drop-out rate suggests that patients were satisfied with dupilumab.
Patient-reported outcomes (PROs) with abrocitinib treatment in patients with moderate-to-severe atopic dermatitis: Results from a randomized, phase 3 clinical trial (#15315). Silverberg J, et al.

- The oral Janus kinase inhibitor abrocitinib is effective in reducing, and in some patients, eliminating itch.
- If it becomes available, abrocitinib will enable clinicians to help patients with atopic dermatitis feel better and improve their quality of life.


- The use of the oral Janus kinase inhibitor abrocitinib resulted in a dose-dependent reduction in itch severity beginning at day two.
- Since itch is a key complaint of patients with atopic dermatitis, the rapid onset of itch relief with abrocitinib is a major benefit.

Dupilumab treatment results in rapid improvement in itch in adult and adolescent patients with moderate-to-severe atopic dermatitis (LIBERTY AD SOLO 1 & 2, and ADOL trials) (#609). Yosipovitch G, et al.

- The reduction in itch observed with dupilumab in adolescents was comparable to that observed in adults.
- It is not clear if the statistically significant reduction in itch observed as early as days 2 to 6 with dupilumab was clinically meaningful to patients.


- The results support the current guidelines of care that discourage the long-term use of systemic corticosteroids.
- Patients prescribed dupilumab tend to stay on treatment long-term, suggesting that they are satisfied with the safety and efficacy of dupilumab.

Alterations in the composition, functional gene profiles and metabolite of the gut microbiome in infancy determines the natural course of AD (#613). Park YM.

- These results suggest that there is a pathophysiologic relationship between the gut microbiota and the skin with differences in the gut microbiota among patients with atopic dermatitis.


- The age of onset and the persistence of atopic dermatitis appear to have an impact on other allergic diseases, suggesting that there are several phenotypes of atopic dermatitis.