Dermatology Update

January 2024

Welcome to the latest copy of the Dermatology Update. The aim of this publication is to bring together a range of recently published research and guidance that will help you make evidence-based decisions.

Accessing Articles

The following abstracts are taken from a selection of recently published articles.
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Please contact Holly if you would like more information, or further evidence searches: holly.cook3@nhs.net.

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Published: 20 September 2023
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Selection of papers from Medline and CINHAL (most recent first)

1. Effectiveness and persistence of acitretin, ciclosporin, fumaric acid esters and methotrexate for patients with moderate-to-severe psoriasis: a cohort study from BADBIR

Item Type: Journal Article

Authors: Alabas, Oras A.;Mason, Kayleigh J.;Yiu, Zenas Z. N.;Hampton, Philip J.;Reynolds, Nick J.;Owen, Caroline M.;Bewley, Anthony;Laws, Philip M.;Warren, Richard B.;Lunt, Mark;Smith, Catherine H. and Griffiths, Christopher,E.M.

Publication Date: 2023a

Journal: The British Journal of Dermatology 188(5), pp. 618-627

Abstract: Background: Real-world data evaluating effectiveness and persistence of systemic therapies for patients with psoriasis are limited. Objectives To determine the effectiveness and persistence of acitretin, ciclosporin, fumaric acid esters (FAEs) and methotrexate in patients with moderate-to-severe psoriasis.; **Methods:** Data from the British Association of Dermatologists Biologics and Immunomodulators Register (BADBIR), a prospective, multicentre pharmacovigilance register of patients with moderate-to-severe psoriasis receiving biologic and/or conventional systemic therapies, were analysed. Eligible patients were ≥ 16 years of age receiving a first course of acitretin, ciclosporin, FAEs or methotrexate between 2007 and 2021 with ≥ 6 months' follow-up. Effectiveness was defined as achieving absolute Psoriasis Area and Severity Index (aPASI) ≤ 2 reported ≥ 4 weeks after treatment start date until date of cessation. To identify baseline clinical variables associated with treatment effectiveness, we used multivariable logistic regression models estimating the adjusted odds ratio (aOR) of achieving aPASI ≤ 2. To describe drug persistence associated with ineffectiveness, occurrence of adverse events or other reasons for discontinuation, survival estimates with 95% confidence intervals (CIs) were obtained using a flexible parametric model. Results were obtained using multiple imputed data.; **Results:** In total, 5430 patients were included in the analysis. Overall, 1023 (19%) patients were receiving acitretin, 1401 (26%) patients were on ciclosporin, 347 (6%) patients were on FAEs, and 2659 (49%) patients were receiving methotrexate at registration. The proportion of patients who achieved aPASI ≤ 2 was lower for those treated with acitretin n = 118 (21%)] compared with those receiving ciclosporin n = 233 (34%)], FAEs n = 43 (29%)] and methotrexate n = 372 (32%)]. Factors associated with ineffectiveness included prior experience to previous nonbiologic systemic therapies (acitretin) (aOR 0.64, 95% CI 0.42-0.96), male sex (methotrexate) (aOR 0.58, 95% CI 0.46-0.74), comorbidities (aOR 0.70, 95% CI 0.51-0.97) and alcohol consumption (≤ 14 units per week) (ciclosporin) (aOR 0.70, 95% CI 0.50-0.98). Persistence associated with all reasons for discontinuation showed better survival for methotrexate compared with acitretin, ciclosporin and FAEs cohorts at 12 months survival estimate 46.1 (95% CI 44.0-48.3), 31.9 (95% CI 29.4-34.7), 30.0 (95% CI 27.5-32.4) and 35.0 (95% CI 29.9-40.9), respectively].; **Conclusions:** The real-world effectiveness and persistence of acitretin, ciclosporin, FAEs and methotrexate were generally low. Previous nonbiologic systemic therapies, male sex, comorbidities and alcohol consumption were risk factors associated with treatment ineffectiveness.; **Competing Interests:** Conflicts of interest P.J.H. has received educational grants, consultancy fees and research funding from Janssen, AbbVie, Eli Lilly and LEO Pharma. P.M.L. has received honoraria and/or grants as an investigator, speaker, and/or acted as an advisory board member for AbbVie, Almirall, Amgen, Celgene, Janssen Cilag, Eli Lilly, Pfizer, Sanofi, LEO, UCB Pharma and Novartis. N.J.R. has received travel support, research grants (Newcastle University) and income to Newcastle University for advisory boards/lectures from AbbVie, Almirall, Celgene, Boehringer Ingelheim, Janssen Cilag, Novartis and UCB Pharma. A.B. has received travel bursaries and performed ad hoc consultancy and lecturing roles with AbbVie, Almirall, Galderma, Eli Lilly, Janssen, LEO Pharma, Novartis, UCB Pharma, Pfizer, BMS, MSD and Sanofi. R.B.W. has acted as a consultant and/or speaker for and/or received research grants from AbbVie, Amgen, Almirall, Celgene, Eli Lilly, Pfizer, LEO Pharma, Novartis, Janssen Cilag, Medac, UCB Pharma and Xenoport. C.H.S. reports grants from a Medical Research Council-funded stratified medicine consortium with multiple industry partners, grants from an Innovative

Medicines Initiative (Horizon 2020)-funded European consortium with multiple industry partners, and other grants from AbbVie, Novartis, Pfizer, Sanofi, Boehringer Ingelheim and Sobi, outside the submitted work; she is also chair of UK guidelines on biologic therapy in psoriasis. C.E.M.G. has received honoraria and/or research grants from AbbVie, Almirall, Amgen, AnaptysBo, Bristol Myers Squibb, Celgene, Galderma, LEO Pharma, Eli Lilly, GSK-Stiefel, Janssen Cilag, MSD, Novartis, Pfizer, Sandoz and UCB Pharma. (© The Author(s) 2023. Published by Oxford University Press on behalf of British Association of Dermatologists.)

Access or request full text: https://libkey.io/10.1093/bjd/ljad004

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=36763783&custid=ns023446

2. Effectiveness and survival of methotrexate versus adalimumab in patients with moderate-to-severe psoriasis: a cohort study from the British Association of Dermatologists Biologics and Immunomodulators Register (BADBIR)

Item Type: Journal Article

Authors: Alabas, Oras A.;Mason, Kayleigh J.;Yiu, Zenas Z. N.;Warren, Richard B.;Lunt, Mark;Smith, Catherine H. and Griffiths, Christopher,E.M.

Publication Date: 2023b

Journal: The British Journal of Dermatology 189(3), pp. 271-278

Abstract: Background: Most information on the comparative effectiveness and survival of methotrexate (MTX) and adalimumab (ADA) in the treatment of psoriasis is from randomized control trials and may not translate to the everyday clinical setting.; Objectives: To determine the real-world effectiveness and survival of MTX and ADA in patients with moderate-to-severe psoriasis registered in the British Association of Dermatologists Biologics and Immunomodulators Register (BADBIR).; **Methods:** Eligible patients were registered in BADBIR, ≥ 16 years of age and receiving a first course of MTX or ADA between September 2007 and December 2021, with ≥ 6 months of follow-up. Effectiveness was defined as achieving an absolute Psoriasis Area and Severity Index (PASI) ≤ 2 reported ≥ 13 weeks after the treatment start date until the stop date. The average treatment effect (ATE) was estimated using inverse probability of treatment weighting with propensity score, including baseline covariates. ATE results were presented as risk ratios (RR). A flexible parametric model was used to estimate adjusted standardized average survival, defined as treatment discontinuation associated with ineffectiveness or the occurrence of adverse events (AEs) at 6, 12 and 24 months. Restricted mean survival time (RMST) at 2 years of treatment exposure was calculated.; **Results**: In total, 6575 patients (median age 44 years; 44% female) were analysed; 2659 (40.4%) were prescribed MTX and 3916 (59.5%) ADA. The proportion of patients achieving PASI ≤ 2 was higher in the ADA cohort (77.4%) than in the MTX cohort (37.4%). ADA was more effective than MTX RR 2.20, 95% confidence interval (CI) 1.98-2.45]. Overall survival associated with ineffectiveness or AEs was lower in the MTX cohort than in the ADA cohort at 6 months survival estimate 69.7 (95% CI 67.9-71.5) vs. 90.6 (95% CI 89.8-91.4)], 1 year survival estimate 52.5 (95% CI 50.4-54.8) vs. 80.6 (95% CI 79.5-81.8)] and 2 years survival estimate 34.8 (95% CI 32.5-37.2) vs. 68.6 (95% CI 67.2-70.0)]. The difference in RMST (years) overall, or when stratified by ineffectiveness and AEs, was 0.53 (95% CI 0.49-0.58), 0.37 (95% CI 0.33-0.42) and 0.29 (95% CI 0.25-0.33), respectively.; **Conclusions:** Patients on ADA were twice as likely to be clear or nearly clear of psoriasis and were less likely to discontinue their medication than patients on MTX. Findings from this real-world cohort provide important information to aid clinicians managing patients with psoriasis.; Competing Interests: Conflicts of interest R.B.W. has acted as a consultant and/or speaker for and/or received research grants from AbbVie, Amgen, Almirall, Celgene, Eli Lilly, Pfizer, LEO Pharma, Novartis, Janssen Cilag, Medac, UCB Pharma and Xenoport. C.H.S. reports grants from a Medical Research Council-funded stratified medicine consortium with multiple industry partners, grants from an Innovative Medicines Initiative (Horizon 2020)-funded European consortium with multiple industry partners, and others from AbbVie, Novartis, Pfizer, Sanofi,

Boehringer Ingelheim and SOBI, outside the submitted work; she is also chair of UK guidelines on biological therapy in psoriasis. C.E.M.G. has received honoraria and/or research grants from AbbVie, Almirall, Amgen, Anaptysbio, Bristol-Myers Squibb, Celgene, Galderma, LEO Pharma, Eli Lilly, GSK–Stiefel, Janssen Cilag, MSD, Novartis, Pfizer, Sandoz and UCB Pharma. O.A.A., K.J.M., Z.Z.N.Y. and M.L. declare no conflicts of interest. (© The Author(s) 2023. Published by Oxford University Press on behalf of British Association of Dermatologists.)

Access or request full text: https://libkey.io/10.1093/bjd/ljad179

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37226927&custid=ns023446

3. Acute Exfoliative Dermatitis/Erythroderma Secondary to Gliclazide

Item Type: Journal Article

Authors: Al-Badawi, Saifaldeen;Ahmed, Nada and Akber, Mohammed

Publication Date: 2023

Journal: Cureus 15(9), pp. e45965

Abstract: Erythroderma is a general term used to describe severe, intense skin inflammation. The condition is also known as exfoliative dermatitis when it is associated with exfoliation. Erythroderma has many causes, such as adverse drug eruption, dermatitis, psoriasis, pityriasis rubra pilaris, immunobullous disease, cutaneous T-cell lymphoma (Sézary syndrome), underlying systemic malignancy, graft versus host disease, and HIV infection. Many medications can cause erythroderma, including antibiotics, antiepileptics, angiotensin-converting enzyme (ACE) inhibitors, and sulfonamides. Here, we report a rare case of erythroderma secondary to gliclazide, an oral antidiabetic. This presentation is rare, as we found only one case report of gliclazide causing erythroderma in the literature. Erythroderma is considered a medical emergency requiring immediate diagnosis and prompt management; therefore, early intervention should start on suspicion without waiting for dermatologist confirmation, as this will significantly reduce the mortality and morbidity of this potentially life-threatening emergency.; Competing Interests: The authors have declared that no competing interests exist. (Copyright © 2023, Al-Badawi et al.)

Access or request full text: https://libkey.io/10.7759/cureus.45965

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37766779&custid=ns023446

4. The future is now: the Global Atopic Dermatitis Atlas (GADA)

Item Type: Journal Article

Authors: Arents, Bernd W. M.;van Zuuren, Esther,J.;Hughes, Olivia;Fedorowicz, Zbys and Flohr, Carsten

Publication Date: 2023

Journal: The British Journal of Dermatology 189(6), pp. 761-763

Abstract: Competing Interests: Conflicts of interest B.W.M.A., E.J.v.Z., O.H. and Z.F. have received compensation from King's College London for their work on the GADA report featured in this article. B.W.M.A., E.J.v.Z. and O.H. are Associate Editors of the British Journal of Dermatology. C.F. is Director of the GADA project

and Section Editor of the British Journal of Dermatology. He is also Chief Investigator of the UK National Institute for Health Research-funded TREAT (ISRCTN15837754) and SOFTER (ClinicalTrials.gov: NCT03270566) trials, the UK-Irish Atopic Eczema Systemic Therapy Register (A-STAR; ISRCTN11210918) and a Principal Investigator in the EU Horizon 2020-funded BIOMAP Consortium. He also leads the EU Trans-Foods consortium. His department has received funding from Sanofi Genzyme and Pfizer for skin microbiome work. He has also received compensation from the British Journal of Dermatology (reviewer and Section Editor) and EuroGuiDerm (guidelines lead).

Access or request full text: https://libkey.io/10.1093/bjd/ljad286

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37566747&custid=ns023446

5. Global Guidelines in Dermatology Mapping Project (GUIDEMAP): a systematic review of alopecia areata clinical practice guidelines

Item Type: Journal Article

Authors: Asfour, Leila;De Brito, Marianne;Al-Janabi, Ali;Haw, William W. Y.;Johnson, Amy;Flohr, Carsten and Yiu, Zenas Zee Ngai

Publication Date: 2023

Journal: Clinical and Experimental Dermatology 48(2), pp. 100-107

Abstract: Introduction: Alopecia areata (AA) is a nonscarring alopecia with an estimated global prevalence of 2% and limited data on the efficacy of current treatment. Clinical practice guidelines (CPGs) provide recommendations based on best available evidence. It is unclear how many AA CPGs are available globally.; **Aim:** To systematically search for and identify CPGs on AA and to critically appraise their quality using validated tools.; **Methods:** We performed a literature search to identify CPGs published between October 2014 and April 2021, using the following databases: MEDLINE, Embase, National Institute for Health and Care Excellence (NICE), Guidelines International Network, Emergency Care Research Institute guidelines trust, Australian CPGs, Turning Research Into Practice database and DynaMed. The systematic review was conducted and reported in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses framework. Three critical appraisal tools were used: Appraisal of Guidelines for Research and Evaluation (AGREE) II instrument, Lenzer's red flags and United States Institute of Medicine's (IOM) criteria of trustworthiness.; **Results:** In total, six AA CPGs from seven manuscripts (one CPG was in two parts published in separate papers) were included. The majority (four of six) of the CPGs focused on treatment. Four CPGs (total of five papers) were in English and two CPGs were only available in the original language (one Russian and one Japanese). All AA CPGs demonstrated low quality in several domains in the AGREE II appraisal, including stakeholder involvement and applicability, with the latter being deemed the worst domain for all CPGs, with an average of 29%. The mean (SD) number of Lenzer's red flags for the included CPGs was 3.4 (1.5) out of a total of 8 possible red flags, while the IOM criteria showed 1.6 (0.8) 'fully met' criteria and 3.1 (1.2) 'not met' out of a total of 9 criteria.; **Conclusion:** We found a limited number of AA CPGs, all of which had significant methodological deficiencies. We encourage guideline development groups to use validated checklists/tools to develop reliable and trustworthy CPGs.; Competing Interests: Conflict of interest LA and AJ are members on the guideline development group for the updating of the British Association of Dermatologists alopecia areata guidelines. AA has received educational support from Almirall, Janssen and UCB to attend conferences, and has received funding from the UK North West MRC Scheme, which is part-funded by Eli Lilly, UCB, Roche and Novartis. CF is chief investigator of the UK National Institute for Health Research-funded TREAT (ISRCTN15837754) and SOFTER (ClinicalTrials.gov: NCT03270566) trials and the UK-Irish Atopic Eczema Systemic Therapy Register (A-STAR; ISRCTN11210918), is a principal investigator in the European Union Horizon 2020-funded BIOMAP Consortium (http://www.biomap-imi.eu/) and also leads the EU Joint Program Initiative TRANS-FOODS

consortium; his department has received investigator-led funding from Sanofi-Genzyme for skin microbiome work. The other authors declare that they have no conflict of interest. (© Crown copyright 2022.)

Access or request full text: https://libkey.io/10.1093/ced/llac025

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=36641755&custid=ns023446

6. A Sensorised Glove to Detect Scratching for Patients with Atopic Dermatitis

Item Type: Journal Article

Authors: Au, Cheuk-Yan;Leow, Syen Yee;Yi, Chunxiao;Ang, Darrion;Yeo, Joo Chuan;Koh, Mark Jean Aan and Bhagat, Ali Asgar Saleem

Publication Date: 2023

Journal: Sensors (Basel, Switzerland) 23(24)
Abstract: In this work, a lightweight compliant glove that detects scratching using data from microtubular stretchable sensors on each finger and an inertial measurement unit (IMU) on the palm through a machine learning model is presented: the SensorIsed Glove for Monitoring Atopic Dermatitis (SIGMA). SIGMA provides the user and clinicians with a quantifiable way of assaying scratch as a proxy to itch. With the quantitative information detailing scratching frequency and duration, the clinicians would be able to better classify the severity of itch and scratching caused by atopic dermatitis (AD) more objectively to optimise treatment for the patients, as opposed to the current subjective methods of assessments that are currently in use in hospitals and research settings. The validation data demonstrated an accuracy of 83% of the scratch prediction algorithm, while a separate 30 min validation trial had an accuracy of 99% in a controlled environment. In a pilot study with children (n = 6), SIGMA accurately detected 94.4% of scratching when the glove was donned. We believe that this simple device will empower dermatologists to more effectively measure and quantify itching and scratching in AD, and guide personalised treatment decisions.

Access or request full text: https://libkey.io/10.3390/s23249782

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=38139628&custid=ns023446

7. Confronting Racial Disparities in Dermatologic Education...Kwatra S

Item Type: Journal Article

Authors: BADER, KAITLYN

Publication Date: 2023

Journal: Dermatology Times 44(9), pp. 50-51

Abstract: An interview with physician scientist Christopher Bunick and dermatology associate professor Shawn Kwatra is presented. They talk about the depiction of dermatologic conditions in patients with skin of color in medical school and the inclusion of patients with skin of color in educational and training materials. They discuss the importance of representation in patients with skin of color with psoriasis and differences in clinical presentations of psoriasis.

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=rzh&AN=171904512&custid=ns023446

8. Describing Skin Lesions in Dermatology: A 2023 Update

Item Type: Journal Article

Authors: Brickley, Sylvana and Lipworth, Adam

Publication Date: Nov ,2023

Journal: Journal of the Dermatology Nurses' Association 15(6), pp. 294-300

Abstract: This article serves as a primer for dermatology nurses and others practicing dermatology, to define and summarize the most commonly used primary and secondary terms to describe skin lesions in dermatology. The importance of a standardized approach to describing examination findings is discussed. Photos of primary and secondary lesions as well as examples of each are presented.

Access or request full text: https://libkey.io/10.1097/JDN.0000000000000767

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=rzh&AN=174314026&custid=ns023446

9. Guideline for allergological diagnosis of drug hypersensitivity reactions: **S2k Guideline of the German Society for Allergology and Clinical Immunology (DGAKI) in cooperation with the German Dermatological Society (DDG), the Association of German Allergologists (ÄDA), the German Society for Pediatric Allergology (GPA), the German Contact Dermatitis Research Group (DKG), the German Society for Pneumology (DGP), the German Society of Otorhinolaryngology, Head and Neck Surgery, the Austrian Society of Allergology and Immunology (ÖGAI), the Austrian Society of Dermatology and Venereology (ÖGDV), the German Academy of Allergology and Environmental Medicine (DAAU), and the German Documentation Center for Severe Skin Reactions (dZh)**

Item Type: Journal Article

Authors: Brockow, Knut;Wurpts, Gerda;Trautmann, Axel;Pfützner, Wolfgang;Treudler, Regina;Bircher, Andreas J.;Brehler, Randolph;Buhl, Timo;Dickel, Heinrich;Fuchs, Thomas;Jakob, Thilo;Kurz, Julia;Kreft, Burkhard;Lange, Lars;Merk, Hans F.;Mockenhaupt, Maja;Mülleneisen, Norbert;Ott, Hagen;Ring, Johannes;Ruëff, Franziska, et al

Publication Date: 2023

Journal: Allergologie Select 7, pp. 122-139

Abstract: Not available.

Access or request full text: https://libkey.io/10.5414/ALX02422E

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37705676&custid=ns023446

10. **Quality of life measurement in teledermatology. Position statement of the European Academy of Dermatology and Venereology Task Forces on Quality of Life and Patient Oriented Outcomes and Teledermatology**

Item Type: Journal Article

Authors: Chernyshov, P. V.;Finlay, A. Y.;Tomas-Aragones, L.;Tognetti, L.;Moscarella, E.;Pasquali, P.;Manolache, L.;Pustisek, N.;Svensson, A.;Marron, S. E.;Bewley, A.;Salavastru, C.;Suru, A.;Koumaki, D.;Linder, D.;Abeni, D.;Augustin, M.;Blome, C.;Salek, S. S.;Evers, A. W. M., et al

Publication Date: 2023

Journal: Journal of the European Academy of Dermatology and Venereology : JEADV

Abstract: Many events, including the COVID-19 pandemic, have accelerated the implementation of teledermatology pathways within dermatology departments and across healthcare organizations. Quality of Life (QoL) assessment in dermatology is also a rapidly developing field with a gradual shift from theory to practice. The purpose of this paper organized jointly by the European Academy of Dermatology and Venereology (EADV) Task Force (TF) on QoL and patient-oriented outcomes and the EADV TF on teledermatology is to present current knowledge about QoL assessment during the use of teledermatology approaches, including data on health-related (HR) QoL instruments used in teledermatology, comparison of influence of different treatment methods on HRQoL after face-to-face and teledermatology consultations and to make practical recommendations concerning the assessment of QoL in teledermatology. The EADV TFs made the following position statements: HRQoL assessment may be an important part in most of teledermatology activities; HRQoL assessment may be easily and effectively performed during teledermatology consultations. It is especially important to monitor HRQoL of patients with chronic skin diseases during lockdowns or in areas where it is difficult to reach a hospital for face-to-face consultation; regular assessment of HRQoL of patients with skin diseases during teledermatology consultations may help to monitor therapy efficacy and visualize individual patient's needs; we recommend the use of the DLQI in teledermatology, including the use of the DLQI app which is available in seven languages; it is important to develop apps for dermatology-specific HRQoL instruments for use in children (for example the CDLQI and InToDermQoL) and for disease-specific instruments. (© 2023 European Academy of Dermatology and Venereology.)

Access or request full text: https://libkey.io/10.1111/jdv.19570

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37877648&custid=ns023446

11. Sex differences in dermatologic conditions

Item Type: Journal Article

Authors: COHEN, BERNARD and TEMBUNDE, YAZMEEN

Publication Date: 2023

Journal: Contemporary OB/GYN 68(9), pp. 26-29

Abstract: The article discusses the differences between the sexes in the manifestation of atopic dermatitis and psoriasis. Topics include results from a study on hand eczema, difference between men and women in terms of severe forms of psoriasis, and possible effects of genital psoriasis. Also mentioned are the median age of diagnosis of psoriasis in children and the most quality of life-limiting or bothersome factor of psoriasis according to 39.7 percent of patients with psoriasis.

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=rzh&AN=171809750&custid=ns023446

12. Off-label Prescription in Paediatric Dermatology: A Retrospective Observational Study in a Tertiary Hospital

Item Type: Journal Article

Authors: Couselo-Rodríguez, Carmen;Batalla, Ana;Martínez-Fernández, Sandra;Dávila-Pousa, Carmela;Soto-García, Diego;Vilanova-Trillo, Luc and Flórez, Ángeles

Publication Date: 2023

Journal: Acta Dermato-Venereologica 103, pp. adv11937

Abstract: Off-label prescription in paediatric patients is common, where some studies indicate that dermatological conditions are more prone to off-label treatment. This is the first study to analyse the prevalence of off-label prescription in paediatric dermatology consultation. This retrospective observational study was performed using the medical records of paediatric patients who were evaluated in a paediatric dermatological consultation in Pontevedra University Hospital, Pontevedra, Spain. Of the 468 patients reviewed, 186 prescriptions were issued and 51.10% were off-label prescription drugs. The dermatological conditions for which off-label prescription was most common were atopic dermatitis (29.0%), followed by warts (12.9%) and infantile haemangiomas (11.8%). With respect to drugs, topical tacrolimus (23.7%) was the most frequently prescribed off-label drug. The main reason for prescribing an off-label drug was for a disease not included on the label (62.4%), followed by issuing it at a lower age than authorized (55.9%). There was a significant association between a higher percentage of off-label prescription and younger age ($p < 0.001$), and the treatment of vitiligo, infantile haemangiomas and warts ($p < 0.001$). Likewise, the off-label prescription was significantly more common in the case of topical terbinafine, timolol, desloratadine and topical salicylic acid ($p < 0.001$). To conclude, off-label prescription is predominant in paediatric dermatology, as observed in 51.1% of our patients.

Access or request full text: https://libkey.io/10.2340/actadv.v102.11937

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=38078687&custid=ns023446

13. Psoriasis and Psoriatic Arthritis Have a Major Impact on Quality of Life and Depressive Symptoms: A Cross-Sectional Study of 300 Patients

Item Type: Journal Article

Authors: Frede, Natalie;Hiestand, Sonja;Schauer, Franziska;Endres, Dominique;Tebartz van Elst, Ludger;Zeisbrich, Markus;Craig-Mueller, Nils;Finzel, Stephanie;Thiel, Jens;Voll, Reinhard E.;Schempp, Christoph and Venhoff, Nils

Publication Date: 2023

Journal: Rheumatology and Therapy 10(6), pp. 1655-1668

Abstract: Introduction: Psoriasis (Pso) and psoriatic arthritis (PsA) can reduce the quality of life (QoL) and are known to be associated with depression. Within this study, we aimed to assess the burden of disease, functional capacity, quality of life, and depressive symptoms and identify factors predicting functional impairment and depression in patients with psoriatic disease.; **Methods:** A cross-sectional survey was conducted in a cohort of 300 patients with psoriatic disease including 150 patients from a university hospital

dermatology outpatient clinic and 150 patients from a university hospital rheumatology outpatient clinic. Questionnaire-based assessment of signs of arthritis (Psoriasis Epidemiology Screening Tool; PEST), functional status (Functional Questionnaire Hannover; FFbH), quality of life (World Health Organization Quality of Life Brief Version; WHOQOL-BREF), and depressive symptoms (Patient health questionnaire 9; PHQ-9) and retrospective medical chart analysis were performed.; **Results:** Despite treatment, burden of disease was high. Joint pain was reported in multiple regions in patients with Pso (n = 111) and patients with PsA (n = 189), but with differences in frequency and distribution patterns of symptoms. Functional impairment in everyday life was independently associated with diagnosis of PsA (odds ratio OR] 9.56, p = 0.005), depressive symptoms (OR 5.44, p < 0.001) and age (OR 1.04, p = 0.033). At least mild depressive symptoms were demonstrated in 54% and 69% of patients with Pso and PsA, respectively. In a logistic regression model, depressive symptoms were independently associated with functional impairment (OR 4.50, p = 0.003), axial complaints (OR 2.80, p = 0.030), diagnosis of psoriatic arthritis (OR 2.69, p = 0.046), and number of joint regions with complaints (OR 1.10, p = 0.032).; **Conclusion:** Functional impairment, QoL, and depressive symptoms are mutually interdependent. Early diagnosis of PsA and initiation of anti-inflammatory therapy are essential to avoid long-term damage, disability, and mental health complications. However, despite therapy many patients with PsA, and especially female patients, report a substantial residual disease burden due to their psoriatic disease which will need to be addressed by a more patient-centered approach. (© 2023. The Author(s).)

Access or request full text: https://libkey.io/10.1007/s40744-023-00602-9

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37843747&custid=ns023446

14. Atopic dermatitis and risk for headache disorders and migraines: a population-based cohort study in children and adults from the UK

Item Type: Journal Article

Authors: Fuxench, Zelma C. Chiesa;Wan, Joy;Wang, Sonia;Syed, Maha N.;Shin, Daniel B.;Abuabara, Katrina and Gelfand, Joel M.

Publication Date: 2023

Journal: The British Journal of Dermatology 190(1), pp. 120-123

Abstract: Competing Interests: Conflicts of interest J.W. has received research and fellowship funding from Pfizer, Inc. (paid to Johns Hopkins University) and served as a consultant to Janssen and Sun Pharmaceuticals, receiving honoraria. M.N.S. has received fellowship funding from Pfizer, Inc. (paid to the University of Pennsylvania). K.A. has received research funding from Pfizer, Inc. and L'Oréal (paid to University of California San Francisco), and receives consulting fees for serving on the academic steering committee for TARGET RWE. Z.C.C.F. has received research grants from Lilly, LEO Pharma, Regeneron, Sanofi, Tioga and Vanda for work related to atopic dermatitis and from Menlo Therapeutics and Galderma for work related to prurigo nodularis. She has also served as consultant for the Asthma and Allergy Foundation of America, National Eczema Association, AbbVie, Incyte Corporation and Pfizer, and received honoraria for continuing medical education work in atopic dermatitis sponsored by education grants from Regeneron/Sanofi and Pfizer and from Beirsdorf for work related to skin cancer and sun protection. J.M.G. has served as a consultant for Abcentra, AbbVie, BMS, Boehringer Ingelheim, GSK, Lilly (DMC), Janssen Biologics, Novartis Corp, UCB (DSMB), Neuroderm (DSMB), Trevi, and Mindera Dx, receiving honoraria. J.M.G. receives research grants (to the Trustees of the University of Pennsylvania) from Boehringer Ingelheim and Pfizer Inc. and has received payment for continuing medical education work related to psoriasis that was supported indirectly by pharmaceutical sponsors. J.M.G. is a copatent holder of resiquimod for the treatment of cutaneous T-cell lymphoma, serves as a Deputy Editor for the Journal of Investigative Dermatology, receiving honoraria from the Society for Investigative Dermatology, is Chief Medical Editor for Healio Psoriatic Disease (receiving honoraria), and is a member of the Board of

Directors for the International Psoriasis Council, receiving no honoraria.

Access or request full text: https://libkey.io/10.1093/bjd/ljad325

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37671663&custid=ns023446

15. Efficacy and safety of dupilumab plus topical tacrolimus for atopic dermatitis in 6- to 12-year-old patients

Item Type: Journal Article

Authors: Gao, S-S;Chen, M.;Wang, R. and Chen, J-G

Publication Date: 2023

Journal: European Review for Medical and Pharmacological Sciences 27(20), pp. 9830-9837

Abstract: Objective: The aim of this study was to evaluate the efficacy and safety of combining dupilumab with topical tacrolimus for the treatment of atopic dermatitis (AD) in children aged 6 to 12 years.; Patients and **Methods:** A total of 168 pediatric (aged 6 to 12 years) patients with severe AD admitted to our hospital between April 2022 and April 2023 were included in this retrospective study. These patients are grouped according to different medication methods, assigned them to receive either tacrolimus plus topical corticosteroids (control group) or dupilumab combined with tacrolimus and topical corticosteroids (study group), with 84 patients in each group. Clinical efficacy and adverse reactions were primary clinical endpoints.; **Results:** The use of dupilumab significantly increased the total effective rate for the patients by 14.29%, from 77.38% (65/84) in the control group to 91.67% (77/84) in the study group. Following treatment, patients given dupilumab showed a more significantly decreased peripheral blood eosinophils (EOS) and immunoglobulin E (IgE) levels than those without dupilumab treatment. Patients administered with dupilumab exhibited markedly lower scores on the Patient-oriented Eczema Measure (POEM) at weeks 12 and 16 and lower Eczema Area and Severity Index (EASI) scores at weeks 8, 12, and 16 when compared to those patients who did not receive dupilumab therapy. At the 16-week, 37 patients in the study group obtained a score of 1/0 on the Verified Investigator's Global Assessment (v-IGA) scale, whereas the control group had 24 such cases, indicating a significantly higher response rate provided by the protocol incorporating dupilumab. After 16 weeks of treatment, both groups demonstrated a marked decrease in itch numeric rating scale (NRS) scores and Dermatology Life Quality Index (DLQI) scores, with lower scores observed in the study group than in the control group. The absence of a significant difference in the incidence of adverse reactions between the two groups suggested a high safety profile of dupilumab.; **Conclusions:** The combination of dupilumab with topical tacrolimus demonstrated favorable efficacy in the management of AD in children aged 6 to 12 years. This treatment protocol effectively alleviates symptoms, enhances the quality of life of patients, and shows no increased risk of adverse reactions.

Access or request full text: https://libkey.io/10.26355/eurrev_202310_34159

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37916349&custid=ns023446

16. Use of Deep Neural Networks in the Detection and Automated Classification of Lesions Using Clinical Images in Ophthalmology, Dermatology, and Oral Medicine—A Systematic Review

Item Type: Journal Article

Authors: Gomes, Rita Fabiane Teixeira;Schuch, Lauren Frenzel;Martins, Manoela Domingues;Honório, Emerson Ferreira;de Figueiredo, Rodrigo Marques;Schmith, Jean;Machado, Giovanna Nunes and Carrard, Vinicius Coelho

Publication Date: 2023

Journal: Journal of Digital Imaging 36(3), pp. 1060-1070

Abstract: Artificial neural networks (ANN) are artificial intelligence (AI) techniques used in the automated recognition and classification of pathological changes from clinical images in areas such as ophthalmology, dermatology, and oral medicine. The combination of enterprise imaging and AI is gaining notoriety for its potential benefits in healthcare areas such as cardiology, dermatology, ophthalmology, pathology, physiatry, radiation oncology, radiology, and endoscopic. The present study aimed to analyze, through a systematic literature review, the application of performance of ANN and deep learning in the recognition and automated classification of lesions from clinical images, when comparing to the human performance. The PRISMA 2020 approach (Preferred Reporting Items for Systematic Reviews and Meta-analyses) was used by searching four databases of studies that reference the use of IA to define the diagnosis of lesions in ophthalmology, dermatology, and oral medicine areas. A quantitative and qualitative analyses of the articles that met the inclusion criteria were performed. The search yielded the inclusion of 60 studies. It was found that the interest in the topic has increased, especially in the last 3 years. We observed that the performance of IA models is promising, with high accuracy, sensitivity, and specificity, most of them had outcomes equivalent to human comparators. The reproducibility of the performance of models in real-life practice has been reported as a critical point. Study designs and results have been progressively improved. IA resources have the potential to contribute to several areas of health. In the coming years, it is likely to be incorporated into everyday life, contributing to the precision and reducing the time required by the diagnostic process.

Access or request full text: https://libkey.io/10.1007/s10278-023-00775-3

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=rzh&AN=164473102&custid=ns023446

17. Improving the Management and Follow-up of Atopic Dermatitis: A Delphi Process Report of Consensus Between Hospital Dermatologists and Pharmacists

Item Type: Journal Article

Authors: Herranz-Pinto, P.;Figueras Nart, I.;Monte-Boquet, E. and Tortajada Goitia, B.

Publication Date: 2023

Journal: Actas Dermo-Sifiliograficas 114(8), pp. 708-717

Abstract: Managing atopic dermatitis, one of the most common dermatologic conditions, is often challenging. To establish consensus on recommendations for responding to various situations that arise when treating atopic dermatitis, a group of hospital pharmacists and dermatologists used the Delphi process. A scientific committee developed a Delphi survey with 2 blocks of questions to explore the group's views on 1) evaluating response to treatment in the patient with atopic dermatitis and 2) cooperation between the dermatology department and the hospital pharmacy service. The experts achieved an overall rate of consensus of 86% during the process. Conclusions were that dermatologists and hospital pharmacists must maintain good communication and coordinate their interventions to optimize the management of atopic dermatitis and patients' responses to treatment. (Copyright © 2023. Publicado por Elsevier España, S.L.U.)

Access or request full text: https://libkey.io/10.1016/j.ad.2023.04.019

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37088291&custid=ns023446

18. Value in psoriasis (IRIS) trial: implementing value-based healthcare in psoriasis management - a 1-year prospective clinical study to evaluate feasibility and value creation

Item Type: Journal Article

Authors: Hilhorst, Niels;Roman, Erin;Borzée, Joke;Deprez, Elfie;Hoorens, Isabelle;Cardoen, Brecht;Roodhooft, Filip and Lambert, Jo

Publication Date: 2023

Journal: BMJ Open 13(5), pp. e067504

Abstract: Introduction: Currently, the healthcare sector is under tremendous financial pressure, and many acknowledge that a dramatic shift is required as the current system is not sustainable. Furthermore, the quality of care that is delivered varies strongly. Several solutions have been proposed of which the conceptual framework known as value-based healthcare (VBHC) is further explored in this study for psoriasis. Psoriasis is a chronic inflammatory skin disease, which is associated with a high disease burden and high treatment costs. The objective of this study is to investigate the feasibility of using the VBHC framework for the management of psoriasis.; **Methods and Analysis:** This is a prospective clinical study in which new patients attending the psoriasis clinic (PsoPlus) of the Ghent University Hospital will be followed up during a period of 1 year. The main outcome is to determine the value created for psoriasis patients. The created value will be considered as a reflection of the evolution of the value score (ie, the weighted outputs (outcomes) divided by weighted inputs (costs)) obtained using data envelopment analysis. Secondary outcomes are related to comorbidity control, outcome evolution and treatment costs. In addition, a bundled payment scheme will be determined as well as potential improvements in the treatment process. A total of 350 patients will be included in this trial and the study initiation is foreseen on 1 March 2023.; **Ethics and Dissemination:** This study has been approved by the Ethics Committee of the Ghent University Hospital. The findings of this study will be disseminated by various means: (1) publication in one or more peer-reviewed dermatology and/or management journals, (2) (inter)national congresses, (3) via the psoriasis patient community and (4) through the research team's social media channels.; Trial Registration Number: NCT05480917.; Competing Interests: Competing interests: None declared. (© Author(s) (or their employer(s)) 2023. Re-use permitted under CC BY-NC. No commercial re-use. See rights and permissions. Published by BMJ.)

Access or request full text: https://libkey.io/10.1136/bmjopen-2022-067504

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37221023&custid=ns023446

19. Skin of colour: essentials for the non-dermatologist

Item Type: Journal Article

Authors: Hutchison, Eliza;Yoseph, Rakeb and Wainman, Hannah

Publication Date: 2023

Journal: Clinical Medicine 23(1), pp. 2-8

Abstract: Doctors-in-training often receive an inadequate dermatology education. Furthermore, studies have

highlighted the under-representation of skin of colour (SOC) in dermatological teaching, learning resources and research. Our image-based questionnaire, distributed to all internal medicine trainees in southwest England, highlighted knowledge gaps regarding SOC among training physicians. It is intrinsically more challenging for clinicians to confidently formulate dermatological diagnoses in SOC. In this review, we provide guidance for physicians to help make the diagnostic process more straightforward. First, we outline how skin colour is determined and classified. We discuss how inflammation presents in SOC, with the typical 'erythema' that physicians often associate with inflammation being a less prominent feature in darker skin tones. We then summarise nine important conditions that we believe physicians working in all specialties should be able to identify in patients with SOC, covering both conditions encountered on the medical take and conditions disproportionately affecting individuals with SOC. The population of the UK is rapidly diversifying; thus, as physicians, we have a professional duty to educate ourselves on dermatological conditions in SOC to provide the best quality of care for all our patients, regardless of their skin type.

Access or request full text: https://libkey.io/10.7861/clinmed.2022-0335

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=rzh&AN=161638097&custid=ns023446

20. Defining the short-term and long-term skin manifestations of COVID-19: insights after more than three years of the pandemic

Item Type: Journal Article

Authors: Ică, Oana Maria;Mitroi, George;Ianoşi, Simona Laura;Tutunaru, Cristina Violeta;Leru, Polliana Mihaela;Matei, Daniela;Avramescu, Elena Taina;Tănasie, Cornelia Andreea;Mitroi, Iulia Bianca;Neagoe, Carmen Daniela and Cazacu, Sergiu Marian

Publication Date: 2023

Journal: Romanian Journal of Morphology and Embryology = Revue Roumaine De Morphologie Et Embryologie 64(3), pp. 291-304

Abstract: Aim: This review aimed to assess the impact of coronavirus disease 2019 (COVID-19) on skin health to establish a classification of the skin lesions that occur most frequently during the disease and whether a particular category of skin damage is more likely to occur both in the short term and in the long term.; **Methods:** We conducted a literature search of the PubMed database. Ultimately, 109 articles were included in this review. The exact phrases⁄syntax and connectors used for the database search⁄query were as follows: "Coronavirus and skin", "COVID-19 and skin", "SARS-CoV-2 and skin", "Coronavirus cutaneous manifestations", "COVID-19 cutaneous manifestations", "SARS-CoV-2 cutaneous manifestations", "Coronavirus dermatology", "SARS-CoV-2 and dermatology", "COVID-19 and dermatology", "COVID-19 and skin eruption", "Coronavirus and skin rash", "COVID-19 and hair", "Coronavirus and hair", "Coronavirus and nails", "SARS-CoV-2 and hair", and "SARS-CoV-2 and nails". Only articles with abstracts referring strictly to cutaneous manifestations of COVID-19 were chosen. Articles without abstracts were not considered.; **Results:** We established six of the most frequently reported clinical patterns associated with COVID-19 and their probability of occurring during COVID-19 disease evolution based on the current literature reports. We did not identify the particular types of skin lesions that are most prone to long-term persistence; most such cases are rare, and no conclusion can be drawn based on them.; **Conclusions**: Apart from classified COVID-19-related skin disorders, this pandemic has been a challenge for dermatologists and a wide range of cutaneous side effects related to severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) treatments have been reported. We are aware of other polymorphic clinical presentations, with novel data being reported periodically, but the pathophysiological mechanisms and evolution are largely unknown.

Access or request full text: https://libkey.io/10.47162/RJME.64.3.01

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37867347&custid=ns023446

21. Treatment of Hidradenitis Suppurativa Evaluation Study: the THESEUS prospective cohort study

Item Type: Journal Article

Authors: Ingram, John R.;Bates, Janine;Cannings-John, Rebecca;Collier, Fiona;Gibbons, Angela;Harris, Ceri;Hood, Kerenza;Howells, Laura;Howes, Rachel;Leighton, Paul;Riaz, Muhammad;Rodrigues, Jeremy;Stanton, Helen;Thomas, Kim S. and Thomas-Jones, Emma

Publication Date: 2023

Journal: Health Technology Assessment (Winchester, England) 27(30), pp. 1-107

Abstract: Background: Hidradenitis suppurativa is a chronic inflammatory skin disease characterised by recurrent inflammatory lesions and skin tunnels in flexural sites such as the axilla. Deroofing of skin tunnels and laser treatment are standard hidradenitis suppurativa interventions in some countries but not yet introduced in the United Kingdom.; **Objective:** To understand current hidradenitis suppurativa management pathways and what influences treatment choices to inform the design of future randomised controlled trials.; **Design:** Prospective 12-month observational cohort study, including five treatment options, with nested qualitative interviews and an end-of-study consensus workshop.; **Setting:** Ten United Kingdom hospitals with recruitment led by dermatology and plastic surgery departments.; **Participants:** Adults with active hidradenitis suppurativa of any severity not adequately controlled by current treatment.; **Interventions:** Oral doxycycline 200 mg once daily; oral clindamycin and rifampicin, both 300 mg twice daily for 10 weeks initially; laser treatment targeting the hair follicle (neodymium-doped yttrium aluminium garnet or alexandrite); deroofing; and conventional surgery.; **Main Outcome Measures:** Primary outcome was the proportion of participants who are eligible, and hypothetically willing, to use the different treatment options. Secondary outcomes included proportion of participants choosing each of the study interventions, with reasons for their choices; proportion of participants who switched treatments; treatment fidelity; loss to follow-up rates over 12 months; and efficacy outcome estimates to inform outcome measure instrument responsiveness.; **Results:** Between February 2020 and July 2021, 151 participants were recruited, with two pauses due to the COVID-19 pandemic. Follow-up rates were 89% and 83% after 3 and 6 months, decreasing to 70% and 44% at 9 and 12 months, respectively, because pandemic recruitment delays prevented all participants reaching their final review. Baseline demographics included an average age of 36 years, 81% female, 20% black, Asian or Caribbean, 64% current or ex-smokers and 86% with a raised body mass index. Some 69% had moderate disease, 19% severe disease and 13% mild disease. Regarding the study's primary outcome, laser treatment was the intervention with the highest proportion (69%) of participants who were eligible and hypothetically willing to receive treatment, followed by deroofing (58%), conventional surgery (54%), the combination of oral clindamycin and rifampicin (44%) and doxycycline (37%). Considering participant willingness in isolation, laser was ranked first choice by the greatest proportion (41%) of participants. The cohort study and qualitative study demonstrated that participant willingness to receive treatment was strongly influenced by their clinician. Fidelity to oral doxycycline was only 52% after 3 months due to lack of effectiveness, participant preference and adverse effects. Delays receiving procedural interventions were common, with only 43% and 26% of participants commencing laser therapy and deroofing, respectively, after 3 months. Treatment switching was uncommon and there were no serious adverse events. Daily pain score text messages were initiated in 110 participants. Daily responses reduced over time with greatest concordance during the first 14 days.; **Limitations:** It was not possible to characterise conventional surgery due to a low number of participants.; **Conclusion:** The Treatment of Hidradenitis Suppurativa Evaluation Study established deroofing and laser treatment for hidradenitis suppurativa in the United Kingdom and developed a network of 10 sites for subsequent hidradenitis suppurativa randomised controlled trials.; **Future Work:** The consensus workshop prioritised laser treatment and deroofing as interventions for future randomised controlled trials, in some cases combined with drug treatment.; Trial

Registration: This trial is registered as ISRCTN69985145.; Funding: This award was funded by the National Institute for Health and Care Research (NIHR) Health Technology Assessment programme (NIHR award ref: 12/35/64) and is published in full in Health Technology Assessment ; Vol. 27, No. 30. See the NIHR Funding and Awards website for further award information.

Access or request full text: https://libkey.io/10.3310/HWNM2189

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=38149635&custid=ns023446

22. Diet in Dermatology: Review of Diet's Influence on the Conditions of Rosacea, Hidradenitis Suppurativa, Herpes Labialis, and Vitiligo

Item Type: Journal Article

Authors: Jamgochian, Marielle;Alamgir, Mahin and Rao, Babar

Publication Date: 2023

Journal: American Journal of Lifestyle Medicine 17(1), pp. 152-160

Access or request full text: https://libkey.io/10.1177/15598276211026592

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=rzh&AN=161195409&custid=ns023446

23. Effect of Vitamin D Supplementation on Psoriasis Severity in Patients With Lower-Range Serum 25-Hydroxyvitamin D Levels: A Randomized Clinical Trial

Item Type: Journal Article

Authors: Jenssen, Marita;Furberg, Anne-Sofie;Jorde, Rolf;Wilsgaard, Tom and Danielsen, Kjersti

Publication Date: 2023

Journal: JAMA Dermatology 159(5), pp. 518-525

Abstract: Importance: Topical vitamin D analogues are routine treatment for psoriasis, but the effect of oral supplementation has not been established.; **Objective:** To examine the effect of vitamin D supplementation on psoriasis severity throughout the winter.; **Design, Setting, and Participants:** This randomized, double-blind placebo-controlled clinical trial with 2 parallel groups was performed through 2 winter seasons (2017 to 2018 and 2018 to 2019). Randomization was computer generated. All participants, health care clinicians, and outcome assessors were masked to group assignment. Each participant was followed for 4 months. The presented analyses were conducted in May 2022. The trial was conducted at the clinical research unit of the University Hospital of North Norway (Tromsø; Norway). Adults from the general population in Tromsø with active plaque psoriasis and 25-hydroxyvitamin D (25OH]D) levels of less than 24 ng/mL (to convert to nmol/L, multiply by 2.496) were included.; Intervention: Vitamin D (cholecalciferol, 100 000 IU, loading dose, followed by 20 000 IU/week) or placebo for 4 months.; **Main Outcomes and Measures:** Psoriasis Area Severity Index (PASI) (primary outcome), Physician Global Assessment, self-administered PASI, and Dermatology Life Quality Index scores (secondary outcomes).; Results: A total of 122 participants (46 women 37.7%]; mean SD] age, 53.6 10.0] years; mean SD] PASI score, 3.1 2.0]; mean SD] serum 25(OH)D, 14.9 3.9] ng/mL) were included. Of these, 60 (49.2%) were randomized to the vitamin D group and 62 (50.8%) to the placebo group. A total of 120

participants (59 vitamin D 49.2%]/61 placebo 51.8%]) completed the study. By completion, mean (SD) 25(OH)D levels were 29.7 (5.2) ng/mL (vitamin D) and 12.0 (3.8) ng/mL (placebo). There was no significant difference in change in PASI score between the groups (adjusted difference, 0.11; 95% CI, -0.23 to 0.45). There was no significant difference in change in Physician Global Assessment score (adjusted odds ratio, 0.66; 95% CI, 0.27-1.63), self-administered PASI (adjusted difference, -0.60; 95% CI, -1.76 to 0.55) or Dermatology Life Quality Index (adjusted difference, -0.86; 95% CI, -1.9 to 0.19) between the groups. No adverse effects of the intervention were registered.; **Conclusion and Relevance:** The results of this randomized clinical trial showed that vitamin D supplementation did not affect psoriasis severity. Low baseline severity scores may explain the lack of measurable effect. Levels of 25(OH)D in the intervention group increased to a less-than-expected degree based on previous experimental data from the same source population, and this may have affected the results.; Trial Registration: ClinicalTrials.gov Identifier: NCT03334136.

Access or request full text: https://libkey.io/10.1001/jamadermatol.2023.0357

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=36988936&custid=ns023446

24. [Translated article] Family Planning Concerns Among Women With Psoriasis: A Descriptive, Cross-Sectional, Multicenter Study

Item Type: Journal Article

Authors: Jiménez Gómez, N.;González-Cantero, Á;Ruiz-Villaverde, R.;Llamas-Velasco, M.;de la Cueva Dobao, P.;Rivera Díaz, R.;Martínez Lorenzo, E.;Alonso Pacheco, M. L.;Baniandrés Rodríguez, O.;Mollet Sánchez, J.;Pitarch Bort, G.;Izu Belloso, R. M. and Jaén Olasolo, P.

Publication Date: 2023

Journal: Actas Dermo-Sifiliograficas
Abstract: Background and Objective: A significant proportion of women of childbearing age have psoriasis. The aim of this study was to examine family planning concerns in this population.; **Material and Methods:** Observational, descriptive, cross-sectional, multicenter study conducted between March 2020 and October 2021. We collected sociodemographic data and analyzed responses to a family planning questionnaire administered to women aged 18 to 45 years with plaque psoriasis who were candidates for systemic treatment.; **Results:** We studied 153 patients (mean SD] age, 35.4 8.0] years; mean disease duration, 16.7 years) being treated at 11 Spanish hospitals. Overall, 38.4% of women were considered to have moderate to severe psoriasis by their physicians; perceived severity ratings were significantly higher among women. Psoriasis affected the women's desire to become pregnant or led to their delaying pregnancy in 1 in 3 respondents. They were concerned that their condition might worsen if they had to discontinue or switch treatment or that the treatment might harm the baby. Approximately half of the women had not received family planning counseling from their physicians, and this was more likely to be the case among never-pregnant women. Women on biologic therapy (58.7%) had better psoriasis control and a better quality of life than women on other treatments. Their sexual health was also less affected.; **Conclusions:** Women with psoriasis have numerous family planning concerns, which in some cases can lead them to delay pregnancy or affect their desire to become pregnant. Dermatologists need to receive better training regarding family planning in women with psoriasis so that they can provide their patients with more and better information.

Access or request full text: https://libkey.io/10.1016/j.ad.2023.10.030

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37923069&custid=ns023446

25. Adolescent acne vulgaris: current and emerging treatments

Item Type: Journal Article

Authors: Layton, Alison M. and Ravenscroft, Jane

Publication Date: 2023

Journal: The Lancet.Child & Adolescent Health 7(2), pp. 136-144

Abstract: Acne vulgaris is one of the commonest inflammatory skin diseases seen worldwide, affecting all ethnicities and races, with a peak prevalence between age 15 years and 20 years. The burden of this condition, and the resulting clinical and psychological sequelae, is substantial. The visual appearance of acne and its sequelae, including scarring and pigment changes, frequently results in psychological and social morbidity because of concerns about appearance. As understanding of the pathophysiology has evolved, approaches to achieving the optimal outcomes with effective treatment regimens continue to emerge. In the past few years, several novel therapeutics have been developed, including new agents aimed at reducing antimicrobial resistance and products with specific actions targeting retinoid receptors and androgen receptors. This Review considers the management approaches of an adolescent with acne vulgaris and reviews treatment options from the evidence base and international expert opinion. Approaches to selecting current treatments and novel and emerging treatment regimens are discussed.; Competing Interests: Declaration of interests AML declares grant funding awarded to her organisation to deliver National Institute for Health and Care Research portfolio studies, including a Health Technology Assessment grant, a British Skin Foundation grant, and Medical Research Council grant. AML received royalties from Wiley for writing a chapter of Acne Fast Facts Series; honoraria for acting as a consultant or attending advisory boards from Galderma Pharma, LEO Pharma, La Roche-Posay, Novartis, and Origimm Biotechnology; and honoraria for unrestricted presentations in educational events and in national and international meetings from Beiersdorf, Galderma Pharma, LEO Pharma, La Roche-Posay, L'Oréal, and Viatris. AML is a member of the British Association of Dermatologists Retinoid Working Group. JR received a small grant award from the UK Dermatology Clinical Trials Network in 2022. JR is an executive committee member of the British Society for Paediatric and Adolescent Dermatology and a member of the British Association of Dermatologists Retinoid Working Group. The authors have no direct competing interests in the writing of this Review and no funding has supported this work. (Copyright © 2023 Elsevier Ltd. All rights reserved.)

Access or request full text: https://libkey.io/10.1016/S2352-4642(22)00314-5

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=36525984&custid=ns023446

26. Prescription Patterns of Topical Medications in Patients with Atopic Dermatitis: An Investigative Review Using Big Data from the National Health Insurance Corporation

Item Type: Journal Article

Authors: Lee, Jungsoo;Kim, Taeyeong;Cheon, Sang-Jin;Kim, Jinmi;Kim, Hoon-Soo;Kim, Byung-Soo;Kim, Moon-Bum and Ko, Hyun-Chang

Publication Date: 2023

Journal: Annals of Dermatology 35(2), pp. 124-131

Abstract: Background: Topical medications play a crucial role in the treatment of atopic dermatitis (AD). Topical corticosteroids (TCSs) remain the main treatment of choice and topical antibiotics have also been used. However, with the new topical calcineurin inhibitors (TCIs), the prescription patterns of topical agents have changed over time.; **Objective:** To characterize the prescription patterns of topical medications in Korean patients with AD.; **Methods:** We investigated topical medications prescribed to Korean patients with AD using the National Health Insurance Sharing System (NHISS) database over a 14-year period (2002~2015). Additionally, the potency of prescribed TCSs was compared with AD and psoriasis patients.; **Results:** The annual prescription of TCSs showed a slightly decreasing trend without significant change. In particular, in terms of steroid class, prescription of moderate-to-low potency TCSs were increased and the use of high potency TCSs were decreased. TCSs were the most commonly prescribed topical medications for AD. Tertiary hospitals had a higher prescription rate for TCIs than secondary or primary hospitals (16.2%, 3.1%, and 1.9%, respectively). Additionally, dermatologists prescribed TCIs more frequently than pediatricians and internists (4.3%, 1.2%, and 0.6%, respectively). Among TCSs, Class 5 was prescribed the most (40.6%) followed by Class 7, 6, 4, 3, 1, and 2. When we compared the potency of TCSs prescribed for AD with psoriasis patients, moderate-to-low-potency TCSs were more commonly prescribed in AD.; **Conclusion:** Prescription patterns of topical medications had changed from 2002 to 2015 and differed according to the type of institution and specialty of the physician.; Competing Interests: The authors have nothing to disclose. (Copyright © The Korean Dermatological Association and The Korean Society for Investigative Dermatology.)

Access or request full text: https://libkey.io/10.5021/ad.22.114

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37041706&custid=ns023446

27. The Harmonising Outcome Measures for Eczema (HOME) implementation roadmap

Item Type: Journal Article

Authors: Leshem, Yael A.;Simpson, Eric L.;Apfelbacher, Christian;Spuls, Phyllis I.;Thomas, Kim S.;Schmitt, Jochen;Howells, Laura;Gerbens, Louise A. A.;Jacobson, Michael E.;Katoh, Norito and Williams, Hywel C.

Publication Date: 2023

Journal: The British Journal of Dermatology 189(6), pp. 710-718

Abstract: Background: Core outcome sets (COS) are consensus-driven sets of minimum outcomes that should be measured and reported in all clinical trials. COS aim to reduce heterogeneity in outcome measurement and reporting, and selective outcome reporting. Implementing COS into clinical trials is challenging. Guidance to improve COS uptake in dermatology is lacking.; **Objectives:** To develop a structured practical guide to COS implementation.; **Methods:** Members of the Harmonising Outcome Measurement for Eczema (HOME) executive committee developed an expert opinion-based roadmap founded on a combination of a review of the COS implementation literature, the Core Outcome Measures in Effectiveness Trials (COMET) initiative resources, input from HOME members and experience in COS development and clinical trials.; **Results:** The data review and input from HOME members was synthesized into themes, which guided roadmap development: (a) barriers and facilitators to COS uptake based on stakeholder awareness/engagement and COS features; and (b) key implementation science principles (assessment-driven, data-centred, priority-based and context-sensitive). The HOME implementation roadmap follows three stages. Firstly, the COS uptake scope and goals need to be defined. Secondly, during COS development, preparation for future implementation is supported by establishing the COS as a credible evidence-informed consensus by applying robust COS development methodology, engaging multiple stakeholders, fostering sustained and global engagement, emphasizing COS ease of use and universal applicability, and providing recommendations on COS use. Thirdly, incorporating completed COS into primary (trials) and secondary (reviews) research is an iterative process starting with mapping COS uptake and stakeholders' attitudes, followed by designing and carrying out targeted

implementation projects. Main themes for implementation projects identified at HOME are stakeholder awareness/engagement; universal applicability for different populations; and improving ease-of-use by reducing administrative and study burden. Formal implementation frameworks can be used to identify implementation barriers/facilitators and to design implementation strategies. The effect of these strategies on uptake should be evaluated and implementation plans adjusted accordingly.; **Conclusions:** COS can improve the quality and applicability of research and, so, clinical practice but can only succeed if used and reported consistently. The HOME implementation roadmap is an extension of the original HOME roadmap for COS development and provides a pragmatic framework to develop COS implementation strategies.; Competing Interests: **Access or request full text:** https://libkey.io/10.1093/bjd/ljad278

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37548315&custid=ns023446

28. A real-world retrospective observational study exploring NHS resource use in England for the management of moderate-to-severe atopic dermatitis in secondary care for children and adolescents

Item Type: Journal Article

Authors: McPherson, Tess;Cork, Michael J.;Goodhead, Charlotte;Michaelis, Louise J.;Flohr, Carsten;Petrovic, Milos;Hennessy, Liz;Rajkovic, Ivana and Hudson, Richard

Publication Date: 2023

Journal: Pediatric Dermatology 40(1), pp. 50-63

Abstract: Purpose: To describe secondary care health care resource utilization (HCRU) for children and adolescents with atopic dermatitis (AD).; **Patients and Methods:** This UK chart review of patients with moderate-to-severe AD was conducted in four National Health Service hospitals. Cohorts were defined by age (children 6-11 years, adolescents 12-17) at first consultation. Eligible patients were selected consecutively, starting with the most recently consulting patient. At least 12 months' data were abstracted from medical records. Data were collected on HCRU, demographics/clinical characteristics, treatment, and patient-reported outcomes.; **Results**: Data were abstracted for 55 patients. Most patients (80%) had severe AD at first referral, a mean (SD) of 3.2 (10.7) patient-reported flare episodes/patient/year-of-observation, and 18.5 (16.7) tests/scans/procedures/patient/year. Mean (SD) observation duration was 3.6 (1.8) years. Patients had tried mean (SD) 7.9 (5.3) treatments/patient/year of observation. Topical corticosteroids (TCS; 24.5% of prescriptions) were most frequently prescribed. Mean (SD) use of emollients/moisturizers, TCS, systemic corticosteroids, and systemic immunosuppressants was 30.9 (21.3), 21.1 (23.4), 1.7 (8.3), and 7.8 (8.2) months. There was a mean (SD) of 5.3 (2.9) consultations/patient/year-of-observation; 116 (10.7%) for flare. Most hospitalizations (87.5%) were for children; the 8/55 (15%) hospitalized patients (mean 2.0 hospitalizations/patient during observation period) spent 6.2 (SD: 5.1) nights in hospital/hospitalization. Earliest mean (SD) Children's Dermatology Life Quality Index score was 15.3 (7.2); latest was 12.9 (7.5).; **Conclusion:** Children and adolescents with moderate-to-severe AD had a high HCRU burden and small changes in quality of life, indicating that current treatments may provide suboptimal AD control in most cases. (© 2022 Wiley Periodicals LLC.)

Access or request full text: https://libkey.io/10.1111/pde.15134

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=36127813&custid=ns023446

29. Bimekizumab in patients with active psoriatic arthritis and previous inadequate response or

intolerance to tumour necrosis factor-α inhibitors: a randomised, double-blind, placebo-controlled, phase 3 trial (BE COMPLETE)

Item Type: Journal Article

Authors: Merola, Joseph F.;Landewé, Robert;McInnes, Iain B.;Mease, Philip J.;Ritchlin, Christopher T.;Tanaka, Yoshiya;Asahina, Akihiko;Behrens, Frank;Gladman, Dafna D.;Gossec, Laure;Gottlieb, Alice B.;Thaçi, Diamant;Warren, Richard B.;Ink, Barbara;Assudani, Deepak;Bajracharya, Rajan;Shende, Vishvesh;Coarse, Jason and Coates, Laura C.

Publication Date: 2023

Journal: Lancet (London, England) 401(10370), pp. 38-48

Abstract: Background: Bimekizumab is a monoclonal IgG1 antibody that selectively inhibits interleukin (IL)-17F and IL-17A. This study compared the efficacy and safety of bimekizumab with placebo over 16 weeks in patients with active psoriatic arthritis and previous inadequate response or intolerance to tumour necrosis factor-α (TNFα) inhibitors.; **Methods:** BE COMPLETE was a phase 3, multicentre, randomised, double-blind, placebo-controlled trial conducted across 92 sites (including hospitals, clinics, and research centres) in 11 countries (Australia, Canada, Czech Republic, Germany, Hungary, Italy, Japan, Poland, Russia, the UK, and the USA). Eligible patients were aged 18 years or older with adult-onset psoriatic arthritis (meeting the Classification Criteria for Psoriatic Arthritis for at least 6 months before screening) with a history of inadequate response or intolerance to treatment with one or two TNFα inhibitors for either psoriatic arthritis or psoriasis. We stratified patients with active psoriatic arthritis by region and previous TNFα inhibitor use. Patients were randomly assigned (2:1) to receive subcutaneous bimekizumab 160 mg every 4 weeks or placebo by an interactive-voice and web-response system on the basis of a predetermined randomisation schedule. The primary endpoint was the proportion of patients with 50% or greater improvement in American College of Rheumatology criteria (ACR50) at week 16 (non-responder imputation). Efficacy analyses were done in the randomised population. The safety analysis set comprised patients who received one or more doses of study treatment. This trial was registered at ClinicalTrials.gov, NCT03896581, and is completed.; **Findings:** Between March 28, 2019, and Feb 14, 2022, 556 patients were screened and 400 patients were randomly assigned to bimekizumab 160 mg every 4 weeks (n=267) or placebo (n=133). The primary and all hierarchical secondary endpoints were met at week 16. 116 (43%) of 267 patients receiving bimekizumab reached ACR50, compared with nine (7%) of 133 patients receiving placebo (adjusted odds ratio OR] 11·1 95% CI 5·4-23·0], p<0·0001). 121 (69%) of 176 patients with psoriasis affecting at least 3% body surface area at baseline who received bimekizumab reached 90% or greater improvement in the Psoriasis Area and Severity Index (PASI90), compared with six (7%) of 88 patients who received placebo (adjusted OR 30·2 12·4-73·9], p<0·0001). Treatment-emergent adverse events up to week 16 were reported in 108 (40%) of 267 patients receiving bimekizumab and 44 (33%) of 132 patients receiving placebo. There were no new safety signals and no deaths.; Interpretation: Bimekizumab treatment led to superior improvements in joint and skin efficacy outcomes at week 16 compared with placebo in patients with psoriatic arthritis and inadequate response or intolerance to TNFα inhibitors. The safety profile of bimekizumab was consistent with previous phase 3 studies in patients with plaque psoriasis, and studies of IL-17A inhibitors.; Funding: UCB Pharma.;
Access or request full text: https://libkey.io/10.1016/S0140-6736(22)02303-0

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=36495881&custid=ns023446

30. Off-label medications in the treatment of hospitalized children with atopic dermatitis

Item Type: Journal Article

Authors: Niedźwiedź, Michał;Skibińska, Małgorzata;Narbutt, Joanna and Lesiak, Aleksandra

Publication Date: 2023

Journal: Postepy Dermatologii i Alergologii 40(1), pp. 72-77

Abstract: Introduction: Off-label prescribing is defined as using medications outside conditions of the marketing authorisation including their licensed indications, dosage, age and route. Atopic dermatitis (AD) is the most common chronic skin condition in children which can be related to a high level of off-label prescribing.; **Aim:** To investigate the frequency of off-label prescribing and the medications involved in relation to indications and age in paediatric patients hospitalized for atopic dermatitis in a paediatric dermatology ward in 2019.; **Material and Methods:** One hundred and seventy-five consecutive discharge letters of patients were analysed regarding gender, age and medications used during hospital stay and prescribed on discharge. Each medication was checked against the licensed age and indications.; Results: Altogether 564 medications were prescribed, including 289 topical and 275 systemic ones with 278 prescribed off-label (49.1%). Out of 289 topical medications, 113 (39.1%) were prescribed off-label regarding indications and 34 (11.76%) regarding the age of the patients. In the systemic medications group, 96 (34.53%) were prescribed off-label as AD was not a registered indication and 35 (12.73%) as the age of the patients was outside the marketing authorization. The most frequent medications prescribed off-label were antihistamines, antibiotics and corticosteroids.; **Conclusions:** Prescribing off-label in paediatric population is a common practice. Both topical and systemic medications are frequently used in AD patients off-label, therefore doctors should be familiar with the pitfalls of prescribing beyond the licensed indications and age.; Competing Interests: The authors declare no conflict of interest. (Copyright: © 2023 Termedia Sp. z o. o.)

Access or request full text: https://libkey.io/10.5114/ada.2022.119967

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=36909909&custid=ns023446

31. Impact of COVID-19 pandemic on acute dermatology referrals in a secondary and tertiary care Central London hospital. A retrospective comparison review of pre-COVID-19 era and COVID-19 pandemic

Item Type: Journal Article

Authors: Panagou, Evangelia;Panou, Evdoxia;Crawley, Jennifer;Veraitch, Ophelia;Edmonds, Emma V.;Bunker, Chris B. and Martyn-Simmons, Claire

Publication Date: 2023

Journal: Journal of the European Academy of Dermatology and Venereology : JEADV 37(6), pp. 1236-1240

Abstract: Background: Although Dermatology is largely considered an outpatient specialty, there is an increasing need for Dermatology input in the acute and inpatient setting. During the COVID-19 pandemic, Dermatology services had to be reorganized to facilitate staff redeployment and minimize the risk of exposure to COVID-19 for patients and staff. This led to an unprecedented increase in teleconsultations aided by clinical images.; **Objectives:** The main aim of our retrospective study was to analyse the acute Dermatology referrals received in the pre-COVID-19 era and during COVID-19 pandemic.; **Methods**: We retrospectively analysed acute Dermatology referrals using the acute referral log.; **Results**: We retrospectively analysed 500 and 110 acute Dermatology referrals received in the pre-COVID-19 period and during COVID-19 pandemic, respectively. In the pre-COVID-19 era, consultations were most commonly requested by Oncology/Haemato-Oncology, Emergency Departments and General Practice, while during the COVID-19 pandemic General Practice was the most common source of referrals. A wide variety of dermatological conditions were encountered with the most common been eczematous dermatoses.; **Conclusions:** Although Dermatology is largely an outpatient-based

specialty, this study shows the demand for urgent Dermatology input the care of sick patients with severe skin diseases and in the management of skin problems in patients admitted or receiving treatment for other diseases. Re-organization of Dermatology services during the COVID-19 pandemic resulted in a marked increase in teleconsultations (28% versus 84.5%) and highlighted the importance of complete skin-directed physical examination by the referring clinician as well as procurement of good quality clinical images. (© 2023 European Academy of Dermatology and Venereology.)

Access or request full text: https://libkey.io/10.1111/jdv.18997

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=36840373&custid=ns023446

32. Drug survival and safety of biosimilars and originator adalimumab in the treatment of psoriasis: a multinational cohort study

Item Type: Journal Article

Authors: Phan, Duc Binh;Jourdain, Hugo;González-Quesada, Alicia;Zureik, Mahmoud;Rivera-Díaz, Raquel;Sahuquillo-Torralba, Antonio;Descalzo-Gallego, Miguel;Lunt, Mark;Garcia-Doval, Ignacio;Sbidian, Emilie;Warren, R. B. and Yiu, Zenas Z. N.

Publication Date: 2023

Journal: BMJ Open 13(7), pp. e075197

Abstract: Introduction: Psoriasis is a chronic inflammatory skin disease. Adalimumab is an effective but previously expensive biological treatment for psoriasis. The introduction of biosimilars following the patent expiry of the originator adalimumab Humira has reduced the unit cost of treatment. However, the long-term effectiveness and safety of adalimumab biosimilars for treating psoriasis in real-world settings are uncertain and may be a barrier to widespread usage.; **Methods and Analysis:** This study aims to compare the drug survival and safety of adalimumab biosimilars to adalimumab originator for the treatment of psoriasis. We will use both routinely collected healthcare databases and dedicated pharmacovigilance registries from the PsoNet initiative, including data from the UK, France and Spain. We will conduct a cohort study using a prevalent new user design. We will match patients on previous adalimumab exposure time to create two equal-sized cohorts of biosimilar and originator users. The coprimary outcomes are drug survival, defined by the time from cohort entry to discontinuation of the drug of interest; and risk of serious adverse events, defined by adverse events leading to hospitalisation or death. Cox proportional hazards models will be fitted to calculate HRs as the effect estimate for the outcomes.; **Ethics and Dissemination:** The participating registries agree with the Declaration of Helsinki and received approval from local ethics committees. The results of the study will be published in scientific journals and presented at international dermatology conferences by the end of 2023.; Competing Interests: Competing interests: RBW reported receiving research grants from AbbVie, Almirall, Amgen, Celgene, Janssen, Lilly, Leo, Novartis, Pfizer & UCB; and consulting fees from AbbVie, Almirall, Amgen, Arena, Astellas, Avillion, Biogen, Boehringer Ingelheim, Bristol Myers Squibb, Celgene, DiCE, GSK, Janssen, Lilly, Leo, Novartis, Pfizer, Sanofi, Sun Pharma, UCB & UNION. AG-Q acted as consultant and/or speaker for and/or participated in clinical trials for Abbvie, Pfizer, Novartis, Sanofi, Boeringher, Bristol-Meyer, Leo Pharma y Jansen. RR-D acted as consultant and/or speaker for and/or participated in clinical trials as IP for Abbvie, Almirall, Celgene, Janssen, Leo Pharma, Lilly, Novartis, MSD and Pfizer-Wyeth. AS-T has served as a consultant and/or paid speaker for and/or participated in clinical trials sponsored by companies that manufacture drugs used for the treatment of psoriasis, including AbbVie, Celgene, Janssen-Cilag, LEO Pharma, Lilly, Novartis and Pfizer. IG-D received travel grants for congresses from Abbvie, MSD and Pfizer. (© Author(s) (or their employer(s)) 2023. Re-use permitted under CC BY-NC. No commercial re-use. See rights and permissions. Published by BMJ.)

Access or request full text: https://libkey.io/10.1136/bmjopen-2023-075197

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37451726&custid=ns023446

33. Assessment of tattoos in dermatology

Item Type: Journal Article

Authors: Putek, Justyna;Szczęch, Justyna;Pacan, Przemysław and Reich, Adam

Publication Date: 2023

Journal: Forum Dermatologicum 9(3), pp. 112-116

Access or request full text: https://libkey.io/10.5603/FD.a2023.0016

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=rzh&AN=172532889&custid=ns023446

34. Impact of Digital Media on the Patient Journey and Patient-Physician Relationship Among Dermatologists and Adult Patients With Skin Diseases: Qualitative Interview Study

Item Type: Journal Article

Authors: Schick, Teresa Sofie;Höllerl, Lea;Biedermann, Tilo;Zink, Alexander and Ziehfreund, Stefanie

Publication Date: 2023

Journal: Journal of Medical Internet Research 25, pp. e44129

Abstract: Background: Digital media are easily accessible without time restrictions and are widely used for health- or disease-related purposes. However, their influence on the patient journey and the patient-physician relationship has not yet been sufficiently investigated.; **Objective:** This qualitative interview study was designed to explore dermatologists' and patients' experiences with digital media for medical purposes in the context of patient journeys and patient-physician relationships.; **Methods:** Twenty-eight semistructured video conference-based interviews were conducted and audiorecorded by experienced interviewers between November 2021 and June 2022 in Germany. Eligible patients were those who were aged ≥18 years, were affected by at least one physician-confirmed skin disease, and were fluent in the German language. The eligibility criterion for dermatologists was that they were currently practicing dermatology in an outpatient setting or in a hospital. Randomly selected dermatologists from the listing of the German National Association of Statutory Health Insurance Physicians and dermatologists from personal academic and professional networks were invited for participation via postal mail and asked to identify potential patient volunteers from their patient bases. All recorded data were pseudonymized, fully transcribed verbatim, and subsequently analyzed according to Mayring's qualitative content analysis by 2 researchers, allowing for both a qualitative interview text analysis and a quantitative assessment of category assignments.; **Results:** In total, 28 participants were interviewed: 16 adult patients and 12 dermatologists. Eight main categories emerged as key areas of interest: (1) the search for diagnosis and symptom triggers, (2) preconsultation digital media use, (3) in-depth information and exchange with other patients, (4) self-treatment, (5) patient-physician interaction, (6) roles of dermatologists and patients, (7) patient eHealth literacy, and (8) opportunities and risks. Categories 1 and 2 were only coded for patients; the other categories were coded for both patients and dermatologists. Patients reported searches for diagnosis or treatment options were most frequently (8/16) caused by a mismatch of symptoms and diagnosis or dissatisfaction with current therapies. Concerns regarding a potentially severe diagnosis prompted searches

for initial or in-depth information before or after dermatological consultations. However, the large volume of information of varying quality often confused patients, leading dermatologists to assume the role of evaluating information from preinformed patients. Dermatologists generally encouraged the use of digital media, considered teledermatology advantageous, and viewed big data and artificial intelligence as being potentially beneficial, particularly when searching for rare diagnoses. A single, easily accessible, and free-of-charge platform with high quality information in lay language was recommended by the dermatologists and desired by patients.; **Conclusions:** Digital media are widely accepted by both patients and dermatologists and can positively influence both the dermatological patient journey and patient-physician relationship. Digital media may therefore have great potential to improve specialized health care if patients and dermatologists embrace their new roles. (©Teresa Sofie Schick, Lea Höllerl, Tilo Biedermann, Alexander Zink, Stefanie Ziehfreund. Originally published in the Journal of Medical Internet Research (https://www.jmir.org), 22.09.2023.)

Access or request full text: https://libkey.io/10.2196/44129

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37738078&custid=ns023446

35. Genetic Variants Associated With Hidradenitis Suppurativa

Item Type: Journal Article

Authors: Sun, Quan;Broadaway, K. A.;Edmiston, Sharon N.;Fajgenbaum, Kristen;Miller-Fleming, Tyne;Westerkam, Linnea Lackstrom;Melendez-Gonzalez, Maria;Bui, Helen;Blum, Franklin R.;Levitt, Brandt;Lin, Lan;Hao, Honglin;Harris, Kathleen Mullan;Liu, Zhi;Thomas, Nancy E.;Cox, Nancy J.;Li, Yun;Mohlke, Karen L. and Sayed, Christopher J.

Publication Date: 2023

Journal: JAMA Dermatology 159(9), pp. 930-938

Abstract: Importance: Hidradenitis suppurativa (HS) is a common and severely morbid chronic inflammatory skin disease that is reported to be highly heritable. However, the genetic understanding of HS is insufficient, and limited genome-wide association studies (GWASs) have been performed for HS, which have not identified significant risk loci.; **Objective:** To identify genetic variants associated with HS and to shed light on the underlying genes and genetic mechanisms.; **Design, Setting, and Participants:** This genetic association study recruited 753 patients with HS in the HS Program for Research and Care Excellence (HS ProCARE) at the University of North Carolina Department of Dermatology from August 2018 to July 2021. A GWAS was performed for 720 patients (after quality control) with controls from the Add Health study and then meta-analyzed with 2 large biobanks, UK Biobank (247 cases) and FinnGen (673 cases). Variants at 3 loci were tested for replication in the BioVU biobank (290 cases). Data analysis was performed from September 2021 to December 2022.; **Main Outcomes and Measures:** Main outcome measures are loci identified, with association of $P < 1 \times 10\text{-}8$ considered significant.; Results: A total of 753 patients were recruited, with 720 included in the analysis. Mean (SD) age at symptom onset was 20.3 (10.57) years and at enrollment was 35.3 (13.52) years; 360 (50.0%) patients were Black, and 575 (79.7%) were female. In a meta-analysis of the 4 studies, 2 HS-associated loci were identified and replicated, with lead variants rs10512572 ($P = 2.3 \times 10\text{-}11$) and rs17090189 ($P = 2.1 \times 10\text{-}8$) near the SOX9 and KLF5 genes, respectively. Variants at these loci are located in enhancer regulatory elements detected in skin tissue.; Conclusions and Relevance: In this genetic association study, common variants associated with HS located near the SOX9 and KLF5 genes were associated with risk of HS. These or other nearby genes may be associated with genetic risk of disease and the development of clinical features, such as cysts, comedones, and inflammatory tunnels, that are unique to HS. New insights into disease pathogenesis related to these genes may help predict disease progression and novel treatment approaches in the future.

Access or request full text: https://libkey.io/10.1001/jamadermatol.2023.2217

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37494057&custid=ns023446

36. Onychoscopy of Nail Lesions in Dermatological Disorders: A Cross-Sectional Observational Study

Item Type: Journal Article

Authors: Sutaria, Aashna;Pol, Devayani;Dalave, Kalyan;Deora, Mahendra S.;Sharma, Yugal K. and Shah, Chintal H.

Publication Date: 2023

Journal: Indian Journal of Dermatology 68(1), pp. 45-52

Abstract: Background: Nail disorders account for about 10% of all dermatological conditions. Onychoscopy is useful not only for their diagnosis but also for assessing severity/progression and monitoring the response to therapy.; **Aims and Objectives:** Describing dermoscopic features of nail disorders in patients reporting to the dermatology OPD of our tertiary care hospital and recording the sociodemographic profiles thereof.; Materials and Methods: This cross-sectional observational study was carried out on 176 patients with effect from August 2019 to August 2021.; **Results:** Males (99; 56.25%) outnumbered females (77; 43.75%); males: female: 1.28: 1; their mean age was 35.8 years. Fingernails were affected more oftener (84.09%) than toenails (38.64%). Onychomycosis, the commonest (58;32.95%) condition, revealed findings of aurora borealis pattern (75.86%), subungual hyperkeratosis (72.41%), and onycholysis with jagged edges and spikes (68.97%). The next frequent (32;18.18%) condition was nail psoriasis which revealed pits (81.25%); onycholysis (62.5%) and dilated globose nail fold vessels on capillaroscopy (25%).; Limitations: The small sample size proved inadequate for the evaluation of statistical significance in the less common conditions and the correlation of disease severity of many. Ideally, confirmatory diagnostic tests should have been done in every patient, as indicated. The magnification of our dermoscopy was 10X; 20- and 40X permit better capillaroscopy.; **Conclusions:** Onychocopy can minimize the need for biopsy by highlighting subtle changes and helps narrow down the differentials. It is potentially a diagnostic test of choice in younger children. Our study helped to grade the severity of connective tissue disorders and establish the benignity of melanonychia. Photographic documentation facilitates record-keeping.; Competing Interests: None.

Access or request full text: https://libkey.io/10.4103/ijd.ijd_215_22

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37151277&custid=ns023446

37. Assessing and documenting dark skin tones in stoma care

Item Type: Journal Article

Authors: Vernon, Emma and White, Pamela

Publication Date: 2023

Journal: British Journal of Nursing 32(22), pp. S22-S26

Abstract: The stoma care nurse (SCN) assesses peristomal skin during each patient intervention. Living in a

diverse multicultural society, the SCN needs to consider dark skin tones and how these are documented. This article looks at how the literature on peristomal skin assessment and available tools discuss skin colour, and compare this with the tissue viability literature. Stoma care and peristomal skin literature features very little about skin colour. Registered nurses are often unaware of the differences when assessing light skin tones versus dark skin tones. The article discusses how to assess for, identify and document problems around peristomal skin with patients who have dark skin tones. The differences in skin breakdown between light skin tones and dark skin tones are highlighted. There needs to be further research and development of tools to assist clinicians in identification and documentation relating to skin tone, thus providing consistency in assessment.

Access or request full text: https://libkey.io/10.12968/bjon.2023.32.22.S22

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=rzh&AN=174082021&custid=ns023446

38. Neuropsychiatric disorders in adults with atopic dermatitis: A population-based cohort study

Item Type: Journal Article

Authors: Wan, Joy;Wang, Sonia;Shin, Daniel B.;Syed, Maha N.;Abuabara, Katrina;Lemeshow, Adina R. and Gelfand, Joel M.

Publication Date: 2023

Journal: Journal of the European Academy of Dermatology and Venereology : JEADV
Abstract: Background: Atopic dermatitis (AD) may be associated with an increased burden of neuropsychiatric outcomes such as anxiety and depression, but longitudinal data on the impact of AD severity is lacking, and a comprehensive assessment of neuropsychiatric disease in adults with AD is needed.; **Objectives:** Determine risk of incident neuropsychiatric disease among adults with AD by severity.; **Methods:** A cohort study using electronic health records data from UK general practices from 1994 to 2015. Adults (≥18 years) with AD were matched on age, practice and index date to patients without AD. AD severity was categorized using treatments and dermatology referrals. Outcomes were incident anxiety, depression, bipolar disorder, schizophrenia, attention-deficit/hyperactivity disorder (ADHD), autism, obsessive-compulsive disorder (OCD), suicidality and completed suicide.; **Results:** Comparing 625,083 adults with AD to 2,678,888 adults without AD, AD was associated with higher risk of anxiety HR 1.14 (1.13-1.15)], depression 1.14 (1.13-1.15)] and OCD 1.48 (1.38-1.58)] across all severities. Mild or moderate AD was also associated with higher risk of autism, ADHD, bipolar disorder and suicidality.; **Conclusions:** Atopic dermatitis is associated with a higher risk of multiple neuropsychiatric conditions, but these risks differ by specific condition and AD severity. Clinicians should inquire about mental health in patients with AD. (© 2023 European Academy of Dermatology and Venereology.)

Access or request full text: https://libkey.io/10.1111/jdv.19518

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37731131&custid=ns023446

39. Safety and efficacy of amlitelimab, a fully human nondepleting, noncytotoxic anti-OX40 ligand monoclonal antibody, in atopic dermatitis: results of a phase IIa randomized placebo-controlled trial

Item Type: Journal Article

Authors: Weidinger, Stephan;Bieber, Thomas;Cork, Michael J.;Reich, Adam;Wilson, Rosamund;Quaratino, Sonia;Stebegg, Marisa;Brennan, Nuala;Gilbert, Sally;O'Malley, John,T. and Porter-Brown, Ben

Publication Date: 2023

Journal: The British Journal of Dermatology 189(5), pp. 531-539

Abstract: Background: Atopic dermatitis (AD) is an inflammatory skin disease with significant unmet need. Blockade of the OX40-OX40 ligand (OX40L) costimulation pathway by targeting OX40L on antigen-presenting cells (APCs) with a fully human noncytotoxic, nondepleting anti-OX40L monoclonal antibody (amlitelimab; SAR445229; KY1005) is a novel way to modulate persistent inflammation.; **Objectives:** To assess the safety and efficacy of amlitelimab over 16 weeks in adults with AD in a phase IIa double-blind placebo-controlled study.; **Methods:** The study was conducted at 19 hospitals in Germany, Poland, Spain and the UK. Eligible patients with moderate-to-severe AD were randomized (1 : 1 : 1) to low-dose intravenous (IV) amlitelimab (200 mg), high-dose IV amlitelimab (500 mg) or placebo, followed by three maintenance doses (50% of loading dose) at 4, 8 and 12 weeks, with safety follow-up to week 36. The co-primary endpoints were the incidence of treatment-emergent adverse events (all patients who received ≥ 1 dose of the study drug) and mean percentage change in Eczema Area and Severity Index (EASI) to week 16 (full analysis set).; **Results:** Between 13 December 2018 and 12 May 2020, 89 patients were randomly assigned to low- (n = 29) or high-dose amlitelimab (n = 30) or placebo (n = 29), of whom 88 proceeded to treatment 37 women (42%), 51 (58%) men; mean (SD) age 33.6 (11.9) years]. Amlitelimab was generally well tolerated with an unremarkable safety profile; no hypersensitivity events were reported. For the primary endpoint, the least square mean percentage change in EASI from baseline to week 16 was -80.12% 95% confidence interval (CI) -95.55 to -64.68; P = 0.009 vs. placebo] and -69.97% (95% CI -85.04 to -54.60; P = 0.07 vs. placebo) for the low- (n = 27) and high-dose (n = 27) amlitelimab groups, respectively, vs. -49.37% (95% CI -66.02 to -32.72) for placebo (n = 24). Numerically greater reductions in EASI were observed for amlitelimab vs. placebo from weeks 2 to 16.; **Conclusions:** Novel targeting of OX40L-expressing APCs with amlitelimab was well tolerated and resulted in clinically meaningful improvements in AD.; **Access or request full text:** https://libkey.io/10.1093/bjd/ljad240

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37463508&custid=ns023446

40. Efficacy of intravenous immunoglobulins (IVIg) in improving skin symptoms in patients with dermatomyositis: a post-hoc analysis of the ProDERM study

Item Type: Journal Article

Authors: Werth, Victoria P.;Aggarwal, Rohit;Charles-Schoeman, Christina;Schessl, Joachim;Levine, Todd;Kopasz, Norbert;Worm, Margitta and Bata-Csörgő, Zsuzsanna

Publication Date: 2023

Journal: EClinicalMedicine 64, pp. 102234

Abstract: Background: Dermatomyositis (DM) is a rare autoimmune disease characterized by skin involvement, with or without proximal muscle weakness. Recently, following the ProDERM study, intravenous immunoglobulin (IVIg) was approved for treatment of DM. Until ProDERM evidence from large, placebo-controlled studies supporting its use for dermatological symptoms, was lacking. Here we present efficacy data from ProDERM of IVIg versus placebo for treatment of the cutaneous aspect of DM.; **Methods:** ProDERM was a double-blind, randomized, multicenter, Phase 3 study. In the First Period (Weeks 0-16), adults with active DM received 2.0 g/kg IVIg (Octagam 10%; Octapharma AG) or placebo every 4 weeks. In the open-label Extension Period (Weeks 16-40), all patients received IVIg for 6 additional cycles. Cutaneous disease was assessed using measures including modified cutaneous DM disease area and severity index activity (CDASI-A) and damage

(CDASI-D) scores, and myositis disease activity assessment tool (MDAAT) including visual analogue scale (VAS). This trial is registered with ClinicalTrials.gov, NCT02728752.; **Findings:** The study took place from February 2017 to November 2019. 95 patients received IVIg (N = 47) or placebo (N = 48) in the First Period. Together, 664 IVIg infusion cycles were administered (median dose, 2.0 g/kg). At Week 16, mean CDASI-A change from baseline was -9.36 (95% CI: -12.52, -6.19) in the IVIg group versus -1.16 (-3.32, 0.99) in placebo group ($p < 0.0001$). At the end of the Extension Period, mean changes from baseline were -10.44 (95% CI: -13.94, -6.94) and -10.03 (-13.12, -6.94), respectively. Similar changes were seen for CDASI-D and VAS of MDAAT. These observations were seen regardless of baseline disease severity.; Interpretation: ProDERM is the first large prospective, randomized trial to demonstrate the efficacy of IVIg to improve the cutaneous manifestations of DM. IVIg treatment significantly improved dermatological symptoms in patients with DM, regardless of disease severity before treatment, suggesting that IVIg is effective for even the most severe cutaneous DM.; Funding: This study was sponsored by Octapharma Pharmazeutika Produktionsges m.b.H.;

Access or request full text: https://libkey.io/10.1016/j.eclinm.2023.102234

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37799613&custid=ns023446

41. Syphilis in Dermatology: Recognition and Management

Item Type: Journal Article

Authors: Whiting, Cleo;Schwartzman, Gabrielle and Khachemoune, Amor

Publication Date: 2023

Journal: American Journal of Clinical Dermatology 24(2), pp. 287-297

Abstract: The incidence of syphilis has been increasing in the USA since 2000. Notably, the coronavirus disease 2019 pandemic negatively impacted the public health efforts to contain the spread of sexually transmitted diseases including syphilis and congenital syphilis. Clinical manifestations of syphilis are predominantly mucocutaneous lesions, thus dermatologists are primed to recognize the myriad presentations of this disease. Primary syphilis is classically characterized by a painless transient chancre most often located in the genital area. Secondary syphilis typically manifests clinically as systemic symptoms in addition to a mucocutaneous eruption of which a variety of forms exist. Although less common in the era of effective penicillin treatment, late clinical manifestations of syphilis are described as well. In addition to recognition of syphilis on physical examination, several diagnostic tools may be used to confirm infection. Treponema pallidum spirochetes may be detected directly using histopathologic staining, darkfield microscopy, direct fluorescent antibody, and polymerase chain reaction assays. A table detailing the histopathologic features of syphilis is included in this article. Serologic testing, non-treponemal and treponemal tests, is the preferred method for screening and diagnosing syphilis infections. Two serologic testing algorithms exist to aid clinicians in diagnosing positive syphilis infection. Determining the correct stage of syphilis infection combines results of serologic tests, patient history, and physical examination findings. Using the current Centers for Disease Control and Prevention case definitions and treatment guidelines, a management algorithm is proposed here. Penicillin remains the pharmacological treatment of choice although specific clinical situations allow for alternative therapies. Syphilis is a reportable disease in every state and should be reported by stage according to individual state requirements. Screening recommendations are largely based upon risks encountered through sexual exposures. Likewise, sexual partner management includes evaluating and treating persons exposed to someone diagnosed with an infective stage of syphilis. Close clinical follow-up and repeat testing are recommended to ensure appropriate response to treatment. This guide will discuss the current epidemiology of syphilis and focus on practice aspects of diagnosis and management, including public health reporting.

Access or request full text: https://libkey.io/10.1007/s40257-022-00755-3

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=rzh&AN=162076984&custid=ns023446

42. Psychosocial stress affects the change of mental distress under dermatological treatment-A prospective cohort study in patients with psoriasis

Item Type: Journal Article

Authors: Wintermann, Gloria-Beatrice;Bierling, Antonie Louise;Peters, Eva M. J.;Abraham, Susanne;Beissert, Stefan and Weidner, Kerstin

Publication Date: 2023

Journal: Stress and Health : Journal of the International Society for the Investigation of Stress
Abstract: Psoriasis is a chronic-inflammatory, immune-mediated disease leading to a state of increased systemic inflammation. Mental comorbidities often occur in the patients and may additionally affect the therapy outcome. Currently, it is unknown whether the disease severity, psychosocial stress or health-related quality of life determines the manifestation of anxiety/depression, or vice versa, in psoriasis. The interplay between these variables during the dermatological treatment of psoriasis remains to be elucidated in order to initiate appropriate psychological interventions and to identify patients at risk for comorbid anxiety/depression. In a prospective cohort study, the impact of disease severity, health-related quality of life and psychosocial stress on anxiety/depression were examined during the dermatological treatment in patients with moderate to severe psoriasis (patients with psoriasis = PSO). Patients were examined before (T1) and about 3 months after (T2) the beginning of a new treatment episode, in most cases by means of systemic therapy. Data were analysed, exploratory, using Bivariate Latent Change Score Models and mediator analyses. Assessments included patient-reported outcomes (Hospital Anxiety and Depression Scale/HADS, Perceived Stress Scale/PSS, Childhood Trauma Questionnaire/CTQ, Dermatology Life Quality Index-DLQI, Body Surface Area-BSA), at both T1 and T2. 83 PSO patients (37.3% women, median age 53.7, IQR 37.8-62.5, median BSA 18.0, IQR 9.0-40.0) with complete data of HADS and DLQI were included. In the total group, a higher anxiety/depression at T1 was associated with a lower improvement in psoriasis severity in the course of the dermatological treatment (γ BSA = 0.50, $p < 0.001$). In subgroups of PSO with low/high CTQ scores, anxiety/depression at T1 had no impact on the change in psoriasis severity. Only by tendency, in CTQ subgroups, a higher psoriasis severity at T1 was linked with a higher improvement in anxiety/depression at T2 (low/high CTQ, γ HADS = -0.16/-0.15, $p = 0.08$). An improvement in the health-related quality of life was positively associated with an improvement in anxiety/depression (Pearson's $r = 0.49$, $p = 0.02$). Here, the reduction of acute psychosocial stress seems to be a decisive factor, mediating this association (β = 0.20, t 2,60] = 1.87; $p = 0.07$, 95% CI -0.01, 0.41). The results allude, that the initial severity of anxiety/depression may presumably have an impact on the treatment outcome in the total group. In contrast, analysing subgroups of patients with high/low childhood trauma, the impact of the initial disease severity on the course of anxiety/depression after a switch to a new dermatological treatment could not be conclusively ruled out. The latter results from the latent change score modelling should be treated cautiously because of the small sample size. A common aetiopathological mechanism for psoriasis and anxiety/depression might be assumed with impact of dermatological treatment on both. The change in perceived stress seems to play an important role in the manifestation of anxiety/depression, substantiating the need for adequate stress management in patients with increased psychosocial stress during their dermatological treatment. (© 2023 The Authors. Stress and Health published by John Wiley & Sons Ltd.)

Access or request full text: https://libkey.io/10.1002/smi.3263

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37243509&custid=ns023446

43. Skin, hair, and nail supplements advertised on Instagram

Item Type: Journal Article

Authors: Zamil, Dina H.;Ameri, May;Fu, Shangyi;Abughosh, Ferris M. and Katta, Rajani

Publication Date: 2023

Journal: Baylor University Medical Center Proceedings 36(1), pp. 38-40

Abstract: Teens and young adults increasingly utilize social media for health information. Dermatologic supplements, advertised on social media, may be pharmacologically active and risk adverse effects. Instagram was searched, and 100 posts from March 2021 were evaluated for ingredients, health claims, account verification status, and endorsements. Only 4% of posts were made by verified accounts, and 1% of posts contained a visible Supplement Facts label. The Food and Drug Administration does not regulate dietary supplements. Ingredients such as vitamin A found in posts can pose teratogenic risk. Other potentially dangerous ingredients included saw palmetto and biotin. To accurately counsel patients who may retrieve health information from Instagram, it is important for practitioners to be familiar with social media claims.

Access or request full text: https://libkey.io/10.1080/08998280.2022.2124767

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=rzh&AN=160848459&custid=ns023446

44. Clinical efficacy of psychiatric nursing-based vancomycin in the treatment of Staphylococcus aureus infectious skin diseases

Item Type: Journal Article

Authors: Zhang, Lina;Li, Zhifeng;Wang, Xin;Lyu, Chao;Shen, Juan and Li, Haitao

Publication Date: 2023

Journal: Pakistan Journal of Pharmaceutical Sciences 36(2), pp. 681-685

Abstract: To study the clinical effect of psychiatric nursing-based vancomycin in patients with staphylococcus aureus infectious skin disease. A retrospective analysis was performed on 100 patients with staphylococcus aureus infectious skin disease admitted to our hospital from March 2019 to July 2020. Al patients received psychiatric nursing and were divided into control group (mupiroxine) and experimental group (vancomycin) according to the treatment mode, with 50 patients in each group. The effective rate of treatment, adverse reactions, disappearance time of dermatological clinical symptoms and recurrence after one course of treatment were compared between the two groups. The effective rate of the experimental group was significantly higher than that of the control group (P<0.05).The incidence of adverse reactions and the disappearance time of clinical symptoms in the experimental group were significantly lower than those in the control group (P<0.05). After one course of treatment, the number of patients with recurrence in the experimental group was significantly lower than that in the control group (P<0.05). Vancomycin might be a boon for patients with staphylococcus aureus infectious skin diseases, with good effectiveness and safety profiles.

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37548209&custid=ns023446

45. A single-center, randomized, controlled study on the efficacy of niacinamide-containing body emollients combined with cleansing gel in the treatment of mild atopic dermatitis

Item Type: Journal Article

Authors: Zhu, Jun-Rong;Wang, Jie and Wang, Shang-Shang

Publication Date: 2023

Journal: Skin Research and Technology : Official Journal of International Society for Bioengineering and the Skin (ISBS) and] International Society for Digital Imaging of Skin (ISDIS) and] International Society for Skin Imaging (ISSI) 29(9), pp. e13475

Abstract: Objective: To observe the effect of niacinamide-containing body emollients combined with a cleansing gel on the clinical symptoms of mild atopic dermatitis (AD) in adults.; **Methods:** From July 2022 to January 2023, adults with mild AD were enrolled at Huashan Hospital Affiliated to Fudan University using single-center, randomized and placebo-controlled methods. They were divided into three groups: the control group, treatment group 1 (T1) receiving niacinamide-containing body emollients alone, and treatment group 2 (T2) receiving emollients plus niacinamide-containing cleansing gel. All patients were orally administered 10 mg of ebastine tablets daily. AD severity (SCORAD score), peak pruritus numeric rating scale (PP-NRS), patient-oriented measure of eczema (POEM), dermatological quality of life index (DLQI) score, transepidermal water loss (TEWL), and stratum corneum water content (SCWC) were measured by the same dermatologist at days 0, 7, 14, and 28.; **Results:** A total of 122 patients were enrolled, including 38 in the control group, 42 in the T1 group and 42 in the T2 group. There were no obvious adverse reactions at the end of the study and the clinical scores and stratum corneum barrier of all the groups improved significantly relative to baseline. The SCORAD, PP-NRS, DLQI, TEWL and SCWC scores in T1 group (12.43 ± 3, 3.3 ± 0.9, 7.1 ± 2.33, 17.1 ± 9.12, 67.2 ± 21.46, seperately) and T2 group (11.17 ± 3.26, 3 ± 1.3, 6.5 ± 2.11, 16.3 ± 9.12, 69.4 ± 24.52, seperately) were significantly improved than the control group(15.1 ± 3.64, 4.3 ± 1.7, 9.5 ± 2.46, 21.2 ± 9.47, 52.7 ± 22.43, seperately) at the endpoint of the study, while compared the POEM scores, only T2 group showed the difference with control group (5.2 ± 1.4 vs. 6 ± 1.6). The epidermal barrier parameters of TEWL and SCWC in the T2 group (17.57 ± 5.24, 66.46 ± 21.38, seperately) were significantly better than that of the T1 (19.96 ± 4.45, 56.45 ± 20.48, seperately) and control group(21.89 ± 7.03, 51.56 ± 16.58, seperately) on the 14th day of follow-up.; **Conclusion:** The use of niacinamide-containing body emollients can significantly improve the clinical symptoms, quality of life, and skin barrier function in patients with mild AD. The addition of niacinamide-containing cleansing gel can also affect the clinical efficacy at certain time points. (© 2023 The Authors. Skin Research and Technology published by John Wiley & Sons Ltd.)

Access or request full text: https://libkey.io/10.1111/srt.13475