



Help My Child: Dermatologic topics, diagnosis, and treatment of pediatric conditions

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Disclosures

- Speaker's Bureau for Abbvie, Beiersdorf, Eli Lilly, Janssen, Sanofi Genzyme, Sanofi-Aventis/Regeneron®, and Sun Pharma
- Strategic Advisor and Medical Board Member: Arcutis Biotherapeutics, Incyte Labs, Leo Pharma, and Novartis.
- No experimental or investigational use of drugs or devices will be presented.

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Objectives

- At the end of this presentation, the participant will be able to:

1. Recognize symptoms and causes of common pediatric skin issues.
2. Review the tests and exams necessary for immediate treatment, diagnosis, and care.
3. Outline and implement follow-up care.
4. Become familiar with recent updates on the latest research, trials, and interventions.

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Tips



- References
 - Listed throughout and at the end of the presentation
- To facilitate your learning
 - Specific tables/images can be viewed full page at the end of your handout.

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Pediatric Pharmacology Challenges

- Dosing often confused with adults
- Few clinical trials in children
- Off-label use is prevalent
- Hepatic clearance awareness
- Adverse effects panel is much broader
- Patient has difficulty communicating

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The Perils of the Modern Age

- Increasingly common heat-induced patches that develop into permanent hyperpigmentation
- Sources include heated car seats and recliners, heated popcorn bags, laptop computers, cell phones and space heaters.



Image source: Laptop computer induced erythema ab igne: A new presentation of an old disease. Anais Brasileiros de Dermatologia. (https://openi.nlm.nih.gov/detailedresult?img=PMC5325001_abd-91-05-s1-0079-g01&query=erythema%20ab%20igne%20laptop&itn=vg&req=4&npos=9) CC BY 4.0

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Erythema Ab Igne



Other names for this condition include...

- Toasted skin syndrome
- *Ephelis ignealis*
- Heat-induced dermal melanosis
- *Livedo reticularis e calore*

Image source: Miller, K., Hunt, R., Chu, J., Meehan, S., Stein, J. (2011). Erythema ab igne. (https://commons.wikimedia.org/wiki/File:Erythema_ab_igne.jpg) CC BY-SA 3.0

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Treatment of Erythema Ab Igne

- Remove from heat source, and practice awareness.
- Crushed ice behind cloth towel helps reduce swelling.
- Aloe vera with lidocaine 5% OTC as with sunburn

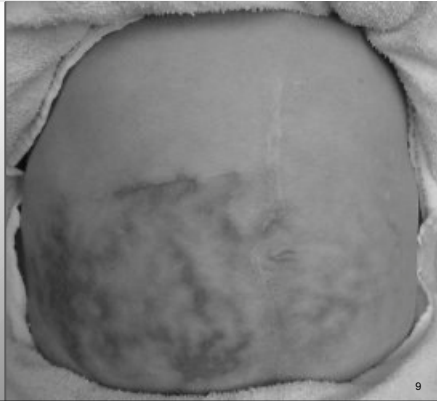


Image source: Heliman, J. (2010). Hot bottle rash. (<https://commons.wikimedia.org/wiki/File:Hotbottle Rash.JPG>) CC BY-SA 3.0

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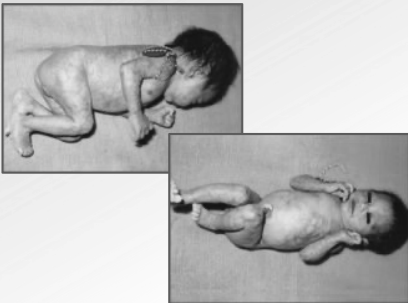
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Prevention and Awareness

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Cutis Marmorata



- Benign process of lacy bluish or red mottling of extremities when chilled
- Reassurance
- Can continue throughout life

Image sources: Chatterjee, R., Dey, S. (2009). Cutis marmorata telangiectatica congenita with skin ulcerations in a newborn. *Indian Journal of Dermatology*. (https://openi.nlm.nih.gov/detailedresult?img=PMC2807718_L1D-54-375-g001&query=cutis%20marmorata&itxg&req=4&npos=19); (https://openi.nlm.nih.gov/detailedresult?img=PMC2807718_L1D-54-375-g003&query=cutis%20marmorata&itxg&req=4&npos=20) CC BY-2.0

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Milia

- Multiple white facial papules
- Superficial keratinous "plugs" in follicles, akin to keratosis pilaris
- Transient
- Best left alone; no treatment

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Miliaria Rubra



- Erythemic sweat ducts grouped on face and trunk
- Base of follicle inflamed
- Heat and humidity-fueled; need cooler air

Image source: Korkut S, Göktaş E, Özlemir A, Kurtuluş S, Demirtaş S, Gül Ö, Başluğ O. (2015). Dermal and Ophthalmic Findings in Pseudohypoadosteronism. J Clin Res Pediatr Endocrinol. 7(2):155-8. (https://openi.nlm.nih.gov/detailedresult?img=PMC4563190_JCRPE-7-155-g1&query=miliaria%20rubra&img&req=4&pos=1) CC BY 2.5

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Nevus Sebaceous of Jadassohn

- Yellow-mustard colored hairless plaque on scalp or face
- Cause thought to be overabundance of androgenic stimulation in womb.
- 10% become basal cell carcinoma after puberty, excision highly recommended prior to age 10 years.

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Nevus Sebaceous of Jadassohn (continued)



Image source: Littlekiddoc (2016). Nevus sebaceous. (https://commons.wikimedia.org/wiki/File:Nevus_sebaceous.jpg) CC BY-SA 4.0

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Pediculosis or Lice

- Clinical manifestations
 - Myriads of oval, gray-white gelatinous egg capsules attached to hair shafts of scalp, neck, and eyelashes.
 - Check underwear seams or pubic hair, if present.
- Diagnosis
 - Clinical and microscopic

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Pediculosis

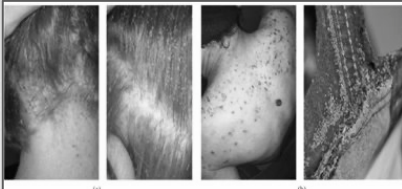


Image source: Sangare, A.K., Doumbo, O.K., Raouil, D. (2016). Management and Treatment of Human Lice. *BioMed Research International*. (https://pubs.iain.iau.gov.au/etal/index.php/PMC497820_BMRI2016-8962685.001&query=pediculosis&it=xg&req=4&npos=8) CC BY 4.0



Image source: CDC. How to Examine for Headlice. (<https://www.cdc.gov/parasites/resources/pdf/HeadLiceFyer.pdf>) In the public domain.

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Pediculosis or Lice (continued)

• Management

- Elimination and prevention

• Treatment

- Mechanical removal of nits
- Permethrin 1% crème rinse, repeat in five days for scalp (Nix®); permethrin (Elimite®) 5% cream for body
- Boil clothes
- Shorter hair style for stubborn cases

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Scabies

• Etiology

- *Sarcoptes scabiei* mite

• Diagnosis

- An aggressive scrape with topical mineral oil of an unscratched papule with No. 15 blade and patient microscopy reveals mites, eggs, fecal pellets

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Scabies Mite



Image source: Kalumet. (2004). *Sarcoptes scabiei*. (https://commons.wikimedia.org/wiki/File:Sarcoptes_scabiei_2.jpg) CC BY-SA 3.0

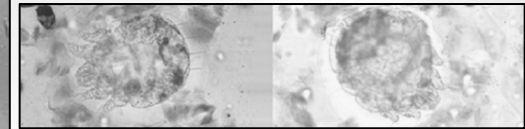


Image source: CDC. (2023). Parasites – Scabies. (<https://www.cdc.gov/parasites/scabies/index.html>) In the public domain.

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Severe Scabies Infestation



- One hallmark of scabies is worsened itching at night.
- In addition, look between finger webbing and along waistline.
- Rarely to face

Image source: Gzzz. (2020). Scabies hand and fingers. (https://commons.wikimedia.org/wiki/File:Scabies_hand_and_fingers_1.jpg) CC BY-SA 4.0

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Scabies Treatment

- Management
 - Topical permethrin (Elimite®), lindane (Kwell®), or oral ivermectin
- Treat all family members.
 - Examine parents
- Wash bedding, do not use same clothes for one-week.
 - May need repeat treatment

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Close-Up of Scabies Infestation



Image source: Fhgd. (2010). Scabies Thorax. (https://commons.wikimedia.org/wiki/File:Scabies_Thorax.JPG) CC BY-SA 3.0



Image source: Mohammad2018. (2018). Scabies nodularis. (https://commons.wikimedia.org/wiki/File:Scabies_nodularis_new_image.jpg) CC BY-SA 4.0

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Impetigo

- Superficial infection of the epidermis with honey-colored crusts and erosions common on nose, lips, or chin.
- Can arise as a primary infection of minor breaks in the skin or secondary infection of pre-existing disease state (i.e., atopic dermatitis)
- Clinical lesions are often preceded by nasal colonization with *S. aureus*.

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Close-Up of Impetigo

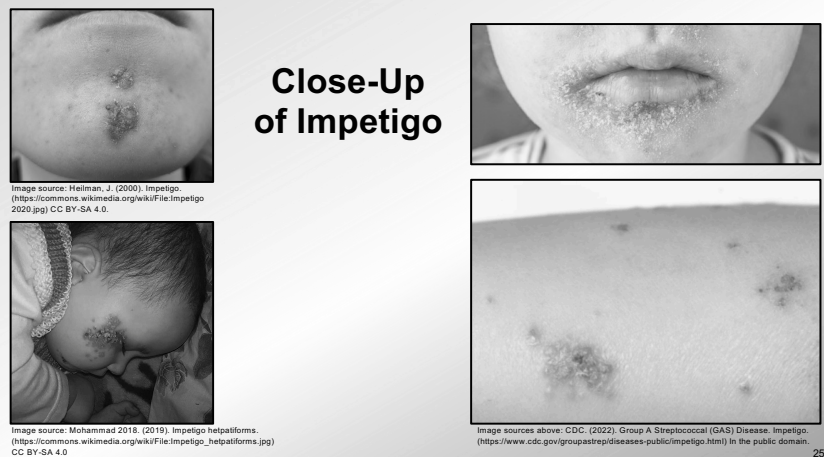


Image source: Heilman, J. (2000). Impetigo. (https://commons.wikimedia.org/wiki/File:Impetigo_2020.jpg) CC BY-SA 4.0.

Image source: Mohammad 2018. (2019). Impetigo hetpatforms. (https://commons.wikimedia.org/wiki/File:Impetigo_hetpatforms.jpg) CC BY-SA 4.0.

Image sources above: CDC. (2022). Group A Streptococcal (GAS) Disease. Impetigo. (<https://www.cdc.gov/groupastrept/diseases-public/impetigo.html>) In the public domain.

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Impetigo Treatment Paradigm

- Diagnosis
 - Generally clinical by history and presentation
- Management
 - Topical mupirocin ointment or retapamulin topical (Altabax®)
 - Oral antibiotics (sulfa, cephalexin, macrolide, dicloxacillin, clindamycin)

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Consider the Nares

Applying an antibacterial topical by cotton applicator to the nares every day for three days per week a consideration in difficult cases




Image source: Groot Da Oger. (2010). Staphylo narine impetigo. (https://commons.wikimedia.org/wiki/File:Staphylo_narine_impetigo.jpg) CC BY-SA 3.0.

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Pityriasis Rosea

- Self-limiting, harmless common rash that has a 6–12-week life-span
- Unknown etiology
 - Possible viral in background
- Herald patch

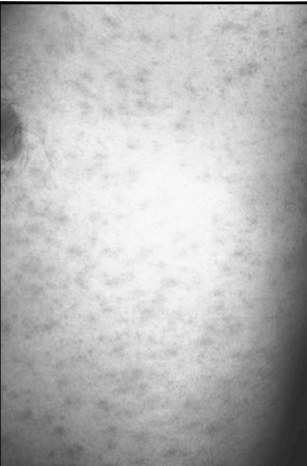


Image source: CDC/Dr. Gavin Hart, CDC/PHIL. (2010). Pityriasis Rosea Skin Rash. (<https://web.archive.org/web/20170101231200/http://hardinmd.lib.uiowa.edu/cdc/5508.html>) In the public domain.

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Pityriasis Rosea (continued)

- Diagnosis is clinical.
- Peaks at 4–6 weeks
- Treatment is supportive with OTC lotions, antihistamines and mild corticosteroid creams.
- UV light helpful

Image source: Evanherk at Dutch (2005). Pit roses.
(https://commons.wikimedia.org/wiki/File:Pit_roses_small.jpg) CC BY-SA 3.0



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Pyogenic Granuloma

- 5–10 mm soft red papules that bleed easily when traumatized
- The result of excessive blood vessel formation in response to minor trauma
- Found on skin or mucosal surfaces
- Treatment
 - Shave with cautery, excision, but always biopsy

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Close-Up Pyogenic Granuloma



Image source: Fallah, A. (2013). Pyogenic Granuloma Elbow.
([https://commons.wikimedia.org/wiki/File:Pyogenic_Granuloma_Elbow_\(1\).jpg](https://commons.wikimedia.org/wiki/File:Pyogenic_Granuloma_Elbow_(1).jpg)) CC BY-SA 3.0.



Image source: Scekir (2019). Botriomycome.
(<https://commons.wikimedia.org/wiki/File:Botriomycome.jpg>) CC BY-SA 4.0

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Pityriasis Alba



Image source: Siegnied, E.C., Hebert, A.A. (2015). Diagnosis of Atopic Dermatitis: Mimics, overlaps and complications. *Journal of Clinical Medicine*.
(https://openi.nlm.nih.gov/detailedresult?img=PMC4470205_jcm-04-00884-g007&query=pityriasis%20alba&img&req=4&npos=9) CC BY 4.0

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Pityriasis Alba Etiology and Treatment

- As the name suggests, it is a scaly off-white patchy condition primarily in Hispanic, Asian and Black children.
- Thought to have an eczematous background, OTC lotions and reassurance are the mainstay treatment.
- Often resolves in teen years

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Erythema Toxicum

- Blotchy erythemic patches on trunk and extremities
- Result of increased eosinophils
- Benign, self-limiting, no therapy required
- Key differential and danger sign
 - Sheeting skin and fever

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Erythema Toxicum (continued)



Image source: Mohammad2018. (2018). Erythema toxicum neonatorum. (https://commons.wikimedia.org/wiki/File:Erythema_toxicum_neonatorum.jpg) CC BY-SA 4.0

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Giant Congenital “Hairy” Nevus


- Well-defined dark hairy patch (“big birthmark”)
- Can involute to melanoma
- Risk potential discussion, cosmetics a challenge



Image source: Sharma, S., Sharma, N.L., Sharma, V. (2013). Giant congenital melanocytic nevus. (https://commons.wikimedia.org/wiki/File:Giant_congenital_melanocytic_nevus.jpg) GNU Free documentation License, v 1.2

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Café-au-lait Spots

- French for “coffee and milk”
- Generally benign





Image source: Sarkozy, A., Diglio, M.C., (2008), Dallapiccola, B. LEOPARD syndrome. *Orphanet J Rare Dis* 3, 1, 13. (https://commons.wikimedia.org/wiki/File:LEOPARD_Synd2.jpg) CC BY 2.0.

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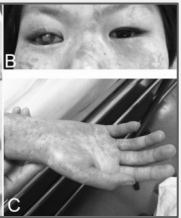
Café-au-lait Spots (continued)

- Six or more >5 mm diameter **before** puberty, **or** >15 mm diameter **after** puberty, consider neurofibromatosis type I
- Is there epilepsy, learning differences, vision disorders?




Top image source: T. Gnaeus Faber (2007), CALSpot. (<https://commons.wikimedia.org/wiki/File:CALSpot.jpg>) CC BY-SA 3.0
Bottom image source: Accrocho at Fr. Wikipedia. (2006), NF-1-Tache cafe-au-lait. (https://commons.wikimedia.org/wiki/File:NF-1-Tache_cafe-au-lait.jpg) CC BY-SA 3.0

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Port-Wine Stain (PWS)

- Unilateral well-defined capillary malformation
- Does not involute
- Pulsed dye laser treats successfully
- Bilateral? Sturge-Weber syndrome?

Top image source: ArturroD. (2014). A new born child with m-cm syndrome. (https://commons.wikimedia.org/wiki/File:A_new_born_child_with_m-cm_syndrome.png) CC BY-SA 3.0
Bottom image: Zhu, M., Li, X., Zhou, M., Wan, H., Wu, Y., Hong, D. (2013). Sturge-Weber syndrome coexisting with episodes of rhabdomyolysis. *BMC Neurology*. (https://open.nlm.nih.gov/detailedresult?img=PMC3835185_1471-2377-13-169-1&query=port-wine%20stain&img&req=4&npos=10) CC BY 2.0

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Hemangioma

- Vascular malformation
- Very distressing to parents
- Often red, rubbery
- 50% resolve by age 5 y, 70% by age 7 y, 90% by age 9 y




Image source: Zeimusu. (2006). Capillary haemangioma. (https://commons.wikimedia.org/wiki/File:Capillary_haemangioma.jpg) In the public domain.

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Hemangioma Treatment

- Reassurance and continued observation an option for some parents
- Glucocorticosteroids
 - Oral, topical, and intralesional a familiar discussion
- Pulsed-dye laser surgery every 2–4 weeks until healed
- Surgical excision in dramatic cases

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Propranolol for Hemangioma Tx

- Beta-blocker oral and topical off-label
- Decreases, shrinks, destroys growth molecules within days
- First-line therapy today
- Generally safe and well-tolerated

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Seborrheic Dermatitis

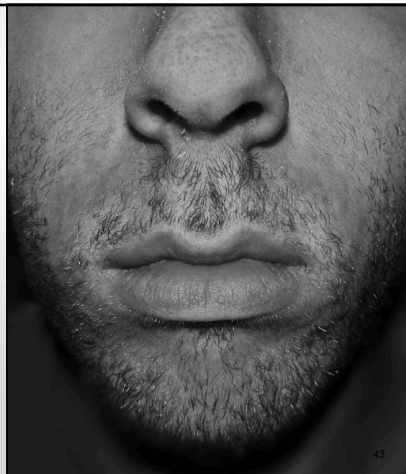


Image source: Roymishali. (2013). Seborrheic dermatitis. (https://commons.wikimedia.org/wiki/File:Seborrheic_dermatitis_highres.jpg) CC BY-SA 3.0

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Seborrheic Dermatitis in Teens



Image source: Mijane on Fr. Wikipedia. (2004). Seborrheic dermatitis. (https://commons.wikimedia.org/wiki/File:Seborrheic_dermatitis.jpg) CC BY-SA 3.0

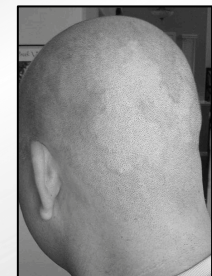


Image source: Rusty.L.miller. (2009). Seborrheic dermatitis. (https://commons.wikimedia.org/wiki/File:Seborrheic_dermatitis_example2.jpg) CC BY 3.0

Image source: Mohammad2018. (2018). Seborrheic dermatitis. (https://commons.wikimedia.org/wiki/File:Seborrheic_dermatitis_new_photo_for_helping_in_diagnosis.jpg) CC BY-SA 4.0

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Seborrheic Dermatitis (continued)

- Yellow, greasy, flaking plaques on scalp or flexural areas
 - Very common as “cradle cap”
- Overgrowth of *M. furfur*
 - Often responds easily to selenium sulfide or ketoconazole shampoos

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Tinea Versicolor

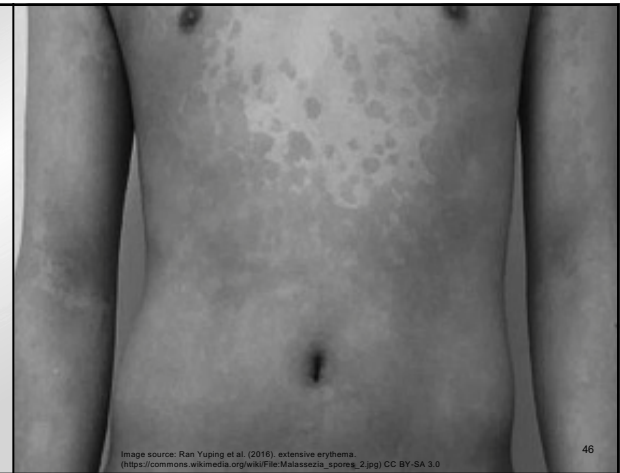


Image source: Ran Yuping et al. (2016), extensive erythema. (https://commons.wikimedia.org/wiki/File:Malassezia_sporangia_2.jpg) CC BY-SA 3.0

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Tinea Versicolor Facts and Treatment

- Common yeast *M. furfur*
- Treatment is geared toward topical dandruff shampoos as body washes.
- Patient stresses about color loss.
- Observed either by light patches of scale or flat areas of hypopigmentation
- In rare cases can require oral ketoconazole 200 mg 1 PO BID once.

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Alopecia Areata



Image source: CDC/Susan Lindsley. (1977). (https://pihhi.cdc.gov/Details.aspx?pid=19232) In the public domain.



Image source: Kumar, S., Pamul, D. (2009), Alopecia Areata Before and After Homeopathy Treatment. (https://commons.wikimedia.org/wiki/File:Keerthiga.JPG) CC BY-SA 3.0



Image source: Abbassyma at English Wikipedia. (2006), Alopecia areata. (https://commons.wikimedia.org/wiki/File:Alopecia_areata.JPG) CC BY-SA 3.0

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Alopecia Areata (continued)

- Autoimmune hair loss, generally benign and asymptomatic but for stress
 - Often one patch on scalp
 - Prior to universalis and totalis
- Remission and recurrences common
- Treatment
 - Topical, intralesional and systemic discussion

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Molluscum Contagiosum

- Benign viral condition that generally affects children up to age 12 years
- Multiple treatment modalities
 - Key point is to avoid its spread
 - Contact, soap, towels
- Often confused with intradermal nevus or keratosis pilaris

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Molluscum Contagiosum

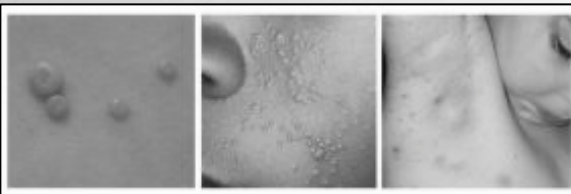


Image source: CDC. (2015). Molluscum Contagiosum. (<https://www.cdc.gov/poxvirus/molluscum-contagiosum/>) In the public domain.

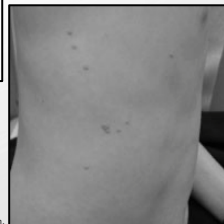


Image source: CDC. (2015). Molluscum Contagiosum (https://www.cdc.gov/poxvirus/molluscum-contagiosum/clinical_information.html) In the public domain.

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Treatment for Molluscum Contagiosum

- Liquid nitrogen
- Lidocaine injection and cautery
- Cantharidin 0.75% or 1%
- Tretinoin cream under occlusion
- Curettage
- Podofilox 0.5% gel 3 days on, 4 days off
- Observe

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Verruca Vulgaris



Image source: Peter, K.D., Wieh, German. (2008). Verruca vulgaris. <https://commons.wikimedia.org/wiki/File:Verruca.jpg> CC BY 3.0 DE Germany



Image source: MaLiK-best. (2008). Flat Wart. https://commons.wikimedia.org/wiki/File:Brodawka_g%C5%82aska.JPG In the public domain. 53

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Treatment of Verruca Vulgaris

- Consider similar treatments as for *molluscum contagiosum*
 - Additional therapy consideration is *Candida albicans* intralesional injection (CAI).
 - CAI is novel, simple, inexpensive.
 - Often destroys untreated warts in vicinity
 - Adverse effects peeling and itching

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Acanthosis Nigricans (AN)

- AN is not a disease in itself, but a symptom of underlying causes.
 - More common in females
 - Worsened by weight gain and increased glucose
- Classified as a pigmentation disorder and causes great distress
 - Favors neck, axilla, and groin

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Acanthosis Nigricans (AN) (continued)



Image source: Mehta Rai, V., Balachandran, C. (2010). Familial acanthosis nigricans. https://commons.wikimedia.org/wiki/File:Familial_acanthosis_nigricans.jpg CC BY-SA 3.0

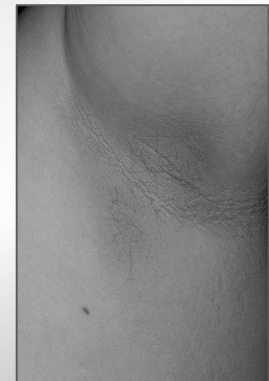


Image source: Madhero88. (2010). Acanthosis-nigricans. <https://commons.wikimedia.org/wiki/File:Acanthosis-nigricans4.jpg> | CC BY-SA 3.0

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Types of AN and Treatment

- In nearly all cases, a familial trait combined with high BMI and diabetes
 - Other causes are endocrine, drug-related (OCP), and malignancy.
- Treatment
 - Generally geared toward weight loss and diet
 - Little help from urea, tretinoin, or hydroquinone

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Hidradenitis Suppurativa (HS)

- Chronic scarring, painful cysts, foul odor
- Currently FDA-approved = Adalimumab (Humira®)
 - Dosed once per week alleviates moderate to severe HS

Image source: Used with permission from Czerkasj, V.

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Hidradenitis Suppurativa (continued)



Image source: Used with permission from Czerkasj, V.

- Onset in puberty
- Predominately affects women
- Defect of apocrine glands
- Favors axilla, groin and under breasts

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Another Treatment Option for HS



Image source: BR172783. (2016). Lesions from hidradenitis suppurativa. (https://commons.wikimedia.org/wiki/File:Lesions_from_hidradenitis_suppurativa.jpg) CC BY-SA 4.0.

- Amoxicillin/clavulanate (Augmentin®) 875 mg 1 PO BID × 1-month, with 10 mg prednisone 1 PO q day × 1-month and daily sulfacetamide wash proves extremely effective

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The Challenge of Prepubescent Acne

- Typically, on nose and forehead
- Younger population without indication on product labeling
- Topical products best
- Non-compliance high



Image sources: SYFTV1 (2015). Acne. (<https://commons.wikimedia.org/wiki/File:N%C3%B912Acne.jpg>) CC BY-SA 4.0 and Eilywa. (2005). Acne. (<https://commons.wikimedia.org/wiki/File:Acne-jugend.jpg>) In the public domain.

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Early Acne Pearl

Consider the advice of a pediatric endocrinologist if hirsutism, body odor, genital maturation present as the androgen excess may be the result of a deeper process.

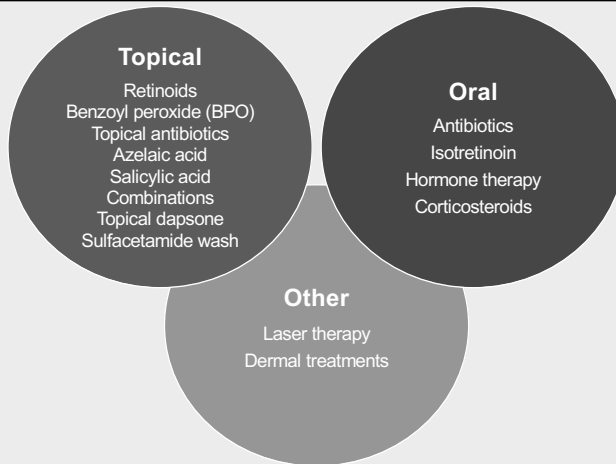


Image source: Kiewel, S./University of Florida (NIH). (2018). (<https://www.flickr.com/photos/64860478@N05/28606391788>) In the public domain.

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Treatment Options Paradigm



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The Skinny on Acne and Diet

- Foods that increase insulin levels magnify male hormone effect.
 - Dairy products boost insulin and are high in hormones made by pregnant cows that produce milk.
 - Avoid dairy and sugar to lessen oil stimulus production.

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“It’s only eczema.”



Image source: CDC/Leedom, J.M. (2016). Eczema vaccinatum. (<https://www.cdc.gov/smallpox/clinicians/vaccine-adverse-reaction-images.html>) in the public domain.

Image source: NIAID. (2012). Eczema. ([https://commons.wikimedia.org/wiki/File:Eczema_\(14144191363\).jpg](https://commons.wikimedia.org/wiki/File:Eczema_(14144191363).jpg)) CC BY 2.0.

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A Brief Introduction to Atopic Dermatitis (AD)

- The most common chronic skin disorder seen in infants and children.
- Prevalence of this condition has risen dramatically during the last three decades.
 - Affected 7% of children circa 1960

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Infant’s Face with Atopic Dermatitis

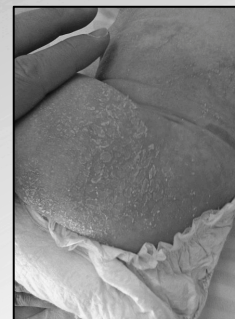


Image source: Jano, P. (2006). Atopic dermatitis. (https://commons.wikimedia.org/wiki/File:Atopic_dermatitis.png) CC BY-SA 3.0.

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A Brief Introduction to Atopic Dermatitis



Currently, **15–20%** of children in the U.S. are expected to experience atopic dermatitis.

Image sources: Gzdz. (2010). Atopic Dermatitis. (https://commons.wikimedia.org/wiki/File:Atopic_dermatitis_2.jpg) and (https://commons.wikimedia.org/wiki/File:Atopic_dermatitis_child_3.jpg) CC BY-SA 4.0.

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1933 Wise and Sulzberger

- Introduced the concept of *atopy*, “out of place” or “strange”
- They observed a connection with asthma, hay fever, and food allergies.

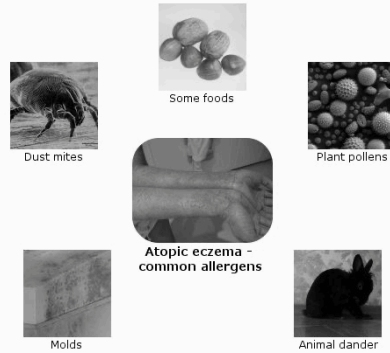


Image source: Dylon. (2014). Atopic eczema - common allergens. (https://commons.wikimedia.org/wiki/File:Atopic_eczema_-_common_allergens.jpg) CC BY-SA 3.0

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Atopic Dermatitis Current Facts

- 80–90% of cases have the first onset at less than age 5 years.
 - About half of patients remain symptomatic as adults
- Asthma and allergic rhinitis is observed in about 80% of cases from child through adulthood.

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A Thoughtful Definition of Atopic Dermatitis

A genetically predisposed condition manifesting as exaggerated responses (vasodilation, pruritus, bronchoconstriction, IgE production) to environmental stimuli (irritants, allergens, drugs) predominately in the integument.

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Atopic Dermatitis in Children, Popliteal Fossa

Image source: NIAID. (2012). Eczema. (https://commons.wikimedia.org/wiki/File:Eczema_(14100950936).jpg) CC BY 2.0

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Atopic Dermatitis in Children – Face



Image source: Untiedt, B. (2003). https://commons.wikimedia.org/wiki/File:Michschorf_bei_baby.jpg CC BY-SA 3.0.



Image sources: Gazz. (2010). CC BY-SA 4.0 (https://commons.wikimedia.org/wiki/File:Atopic_dermatitis_child_1.jpg) CC BY-SA 4.0

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Atopic Dermatitis in Children



Image source: Severe Eczema in a 10-year-old. (<https://www.flickr.com/photos/75491103@N00/6009880353/>) CC BY-ND 2.0



Image source: Salava, A., Lauerman, A. (2014). Role of the skin microbiome in atopic dermatitis. (https://open.nlm.nih.gov/detailedresult?img=PMC4405870_13601_2014_1066_Fig2_HTML&query=atopic%20dermatitis&#xg&req=4&npos=34) Public domain and CC BY 4.0.

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Eczema – Atopic Dermatitis



Image source: Bernd Untiedt at German Wikipedia. (2003). Neurodermitis. (<https://commons.wikimedia.org/wiki/File:Neurodermitis1.jpg>) CC BY-SA 3.0.

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- Greek – Ekzema, from “ekzein,” to break out, boil over
- Chronic, pruritic eruption that can appear anywhere on the skin

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Theories in Atopic Dermatitis

- Defect of genetics or immunity?
- Dysfunction of barrier?
- Mechanical breakdown by external triggers and exposure?
- Secondary to asthma and foods?
- Outside in or inside out?
- Staph colonization?

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Diagnosis of Atopic Dermatitis (AD) – Major Features

- Intense pruritus
- Primarily the facial and bilateral involvement of extensors
- Chronic, relapsing
- Personal and family history
- Heavy scale, micro blisters, irregular borders

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Popliteal Fossa, Atopic Dermatitis

Image source:
(<https://www.flickr.com/photos/73491103@N00/2684476606/>)
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Topical Corticosteroids

- Important tool to gain control of AD
- 30 g covers entire skin of adult once
- Seven potency classes based on vasoconstrictor assay.
 - The lower the number, the longer the use allowed.
- Creams and ointments preferred as gels have drying glycol base.

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Generalized Striae



Image source: Handcuffed. (2011). Stretch marks on an 18-year-old male's hip. (https://commons.wikimedia.org/wiki/File:Stretch_marks_2.jpg) In the public domain.

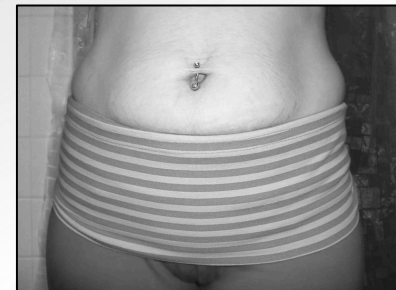


Image source: ParentingPatch. (2013). Stretch Marks. ([https://commons.wikimedia.org/wiki/File:Female_Torso_with_Tiger_Stripes_\(Stretch_Marks\)_from_Pregnancy.JPG](https://commons.wikimedia.org/wiki/File:Female_Torso_with_Tiger_Stripes_(Stretch_Marks)_from_Pregnancy.JPG)) CC BY-SA 3.0.

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Generalized Striae (continued)

Image source: PanaromicTiger, (2009), Striae, (<https://commons.wikimedia.org/wiki/File:Striae.jpg>) CC BY-SA 3.0.

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Topical Corticosteroids (continued)

- Low potency corticosteroid example
 - Hydrocortisone 1%
 - Desonide 0.05% creams
- Mid potency
 - Triamcinolone 0.1%
- Super potent
 - Clobetasol 0.05%
 - Betamethasone 0.1%

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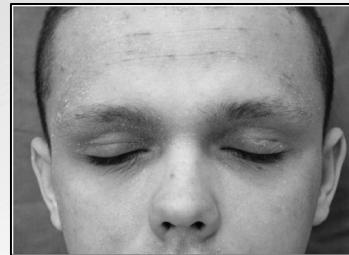
Topical Calcineurin Inhibitors (TCIs)

- Noncorticosteroidal milestone
 - Tacrolimus ointment 0.03%
 - Pimecrolimus cream 1%
- Strong safety profile for current length and difficult skin areas
- Boxed warning for lack of long-term (4+ years) safety data

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• Before Treatment



• 7 days after treatment with 1% pimecrolimus cream

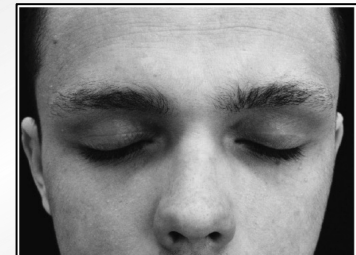


Image sources: Jovanovic, M., Golusin, Z. (2016). Nonsteroidal topical immunomodulators in allergy and dermatology. *BioMed Research Int.* (https://openi.nlm.nih.gov/detailedresult?img=PMC4837243_BMR2016-5185303.001&query=pimecrolimus&img&req=4&npos=42) and (https://openi.nlm.nih.gov/detailedresult?img=PMC4837243_BMR2016-5185303.002&query=pimecrolimus&img&req=4&npos=21) CC BY 4.0.

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Atopic Dermatitis

- Prevention is foundational.
- Early on, distribution is generalized.
- Pruritus first hallmark
- Increased risk of secondary impetigo, generalized herpes and varicella in severe cases

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Role of Hydration

- Fundamental concept is trigger control and proper skin care.
 - “Soak and seal” emphasizes proper cleansers, moisturizers, barrier use.
 - It is not about avoiding water, which dries upon evaporation, but immediate moisturizing.

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The Bleach Bath Controversy

- On the “pro” side, ¼ cup to forty gallons (59.1 mL–151.4 L) seem to seriously lessen MRSA infections and result in clearer skin.
- On the “con” side, limited studies, can cause serious irritation to some, and odor is repulsive.

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The Bleach Bath Controversy (continued)

- The American Academy of Dermatology, multiple experts in eczema recommend
- Exact mechanism is unknown.
- Not uncommon



Image source: NIAID. (2012). Eczema Wet Wrap Treatment. ([https://commons.wikimedia.org/wiki/File:Eczema_Wet_Wrap_Treatment_\(14124437694\).jpg](https://commons.wikimedia.org/wiki/File:Eczema_Wet_Wrap_Treatment_(14124437694).jpg)) CC BY 2.0

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Biologic Treatment

- Dupilumab (Dupixent®) is the only FDA approved biologic treatment for children ages 6 to 11 years, and adolescents ages 12 to 17 years.
 - Targets IL-4 and IL-13 cytokines
 - Monthly subcutaneous injection based on age and weight paradigm.
 - No labs or monitoring required

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Biologic Therapy for Atopic Dermatitis

- Adverse effects include injection site reaction, ocular itching, and rhinitis.
- There is no black box warning and results are generally impressive, particularly with markedly lessened itching, inflammation and flares.
- Also approved for asthma and allergic urticaria

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End of Presentation
Thank you for your time and attention.

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Topical Corticosteroids Potency Chart

- National Psoriasis Foundation® Potency Chart, available at https://www.psoriasis.org/sublearn03_mild_potency

These are continuously updated to reflect generic and brand names.

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