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ATOPIC ECZEMA/DERMATITIS

ATOPIC DERMATITIS: WHICH DIAGNOSTIC CRITERIA TO USE? (PROSPECTIVE AND COMPARATIVE CASE-CONTROL STUDY)

Maha Lahouel ⁽¹⁾ - M Ben Hammouda ⁽²⁾ - H Bel Hadjali ⁽²⁾ - I Lahouel ⁽³⁾ - Y Soua ⁽²⁾ - M Korbi ⁽²⁾ - M Youssef ⁽²⁾ - J Zili ⁽²⁾

Fattouma Bourguiba Hospital, Dermatologie, Monastir, Tunisia (1) - Fattouma Bourguiba Hospital, Dermatology, Monastir, Tunisia (2) - Fattouma Bourguiba Hospital, Dermatology, Monsatir, Tunisia (3)

Introduction: Atopic Dermatitis is a difficult disease to define. It has a varied range of presentations and no definitive diagnostic test. International use of many different AD diagnostic criteria presents challenges.

Aim and objective: The purpose of our study is to evaluate five diagnostic criteria in the diagnosis of AD in Tunisia: Hanifin and Rajka's criteria, the UK working party's criteria, Taieb and Boralevi criteria, ISAAC, and the new REACH criteria (Reliable Estimation of Atopic Dermatitis in Childhood) recently developed in 2016.

Methods: This population-based study examined 101 patients with AD and 101 controls. The study period was from January 2017 to January 2018. The diagnosis of AD was clinically established by two dermatologists.

Results: The mean age of the patients (AD) was 9 years and 9 months. The average age of onset of AD was 6 years and 9 months. A late onset (> 5 years) was noted in 38.6% of cases. Inverted topography was noted in 41.67% of infants and in 53.25% of adults and children. Hanifin and Rajka's criteria [sensitivity 90.1%, specificity 90.1%, positive predictive value(PPV) 90.1% and negative predictive value (NPV) 90.1%] had a statistical advantage over the UK working party's diagnostic criteria (sensitivity 53.47%, specificity 96.04%, PPV 93.1% and NPV 67.36%),with a P-value < 0.005. The sensitivity and specificity of the other criteria were respectively: 62.50% and 92.3% for Taieb and Boralevi criteria, 41.58% and 92.08% for the ISAAC, 49.50% and 91.09% for REACH criteria.

Conclusion: We report, for the first time, a study focusing on the evaluation of five diagnostic criteria in the diagnosis of AD. The epidemiological particularities of AD in Tunisia may explain the low sensitivity of the majority of these criteria and should encourage us to develop Tunisian diagnostic criteria adapted to the diagnosis of AD in our country.





