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ATOPIC ECZEMA/DERMATITIS

TREATMENT OF MODERATE TO SEVERE ATOPIC DERMATITIS WITH DUPILUMAB IN REAL CLINICAL PRACTICE. SHORT AND MID TERM RESULTS FROM 5 REFERENCE DERMATOLOGY UNITS IN SOUTH SPAIN.

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BACKGROUND: Atopic dermatitis (AD) is a multifactorial disease resulting from the interaction of genetic predisposition, environmental triggers, changes in the integrity of the skin barrier and immune dysregulation. Although the dysfunction of the cutaneous barrier and the immune alteration are the main disorders in these patients, the causality of this relationship is not known accurately.

Targeting Th2 cytokines II-4 and II-13 with Dupilumab has shown to be effective to control the signs and symptoms of AD in previous clinical trials.

OBSERVATION: We present a series of 27 patients from 5 Andalusian hospitals included in the Spanish compassionate use of Dupilumab for adult patients with moderate to severe AD. Data collected included age, time of evolution of the disease, personal history (comorbidities), and previous systemic/biological treatments. Disease severity was measured by SCORAD and Pruritus VAS scores at baseline visit, and at follow up weeks 4, 12, 24 and 52. Quality of life was assessed with DLQI.

Baseline SCORAD of this series was 58,7, while pruritus VAS was 8.18. In the follow-up visits, SCORAD diminished to 15,56 at week 24 (73,49%), and pruritus VAS reduced to 2,87 at the same cut-off (64,9%). Safety profile was favorable, reporting 3 cases of mild conjunctivitis, managed positively without suspension of Dupilumab.

KEY MESSAGES: In our series, Dupilumab improved significantly the signs and symptoms of AD, measured by SCORAD and pruritus EVA, as well as QoL. In our series the treatment was well-tolerated, causing no severe adverse events.





