

A new ERA for global Dermatology 10 - 15 JUNE 2019 MILAN, ITALY

ATOPIC ECZEMA/DERMATITIS

## EFFICACY AND SAFETY OF 0.1% TACROLIMUS OINTMENT VERSUS 0.05% CLOBETASONE BUTYRATE OINTMENT IN CHILDHOOD ATOPIC DERMATITIS.

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Introduction: Atopic Dermatitis (AD) is a chronic relapsing skin condition with significant morbidity and often requires long-term use of topical corticosteroids but, patients' adherence to corticosteroids may be limited by perceived risks and systemic adverse effects. Therefore, steroid sparing topical agent is needed and we aim to compare the efficacy and safety of 0.1% tacrolimus ointment and 0.05% clobetasone butyrate ointment in patients with childhood AD.

Materials and methods: This monocentric prospective open-label comparative study was carried out in the Department of Dermatology and Venereology, Chittagong Medical College Hospital. Two hundred patients of 2-10 years of age with mild to moderate AD involving ≤50% of the total body surface area (BSA) were randomly assigned. The treatment duration was 4 weeks and was followed-up for 12 weeks. The eczema area and severity index (EASI) and the physician's global evaluation of clinical response were assessed and evaluated.

Results: Effective sample size was 176 as because 24 patients were dropped out during follow up. EASI score was significantly changed from baseline in follow up weeks and there was a significant difference in reduction of EASI of patients in Tacrolimus groups at the end of 2nd week, 4th week, 6th week than the other group (p<0.05). At the end of 4 weeks treatment, a median improvement of  $\geq$ 75% in EASI was observed in 86% and 57% of patients in Tacrolimus and ClobetasoneGroup, respectively. At the end of 12 week follow-up period these improvements persist. Both the regimens were well tolerated.

Conclusion: The overall therapeutic effectiveness was in favor of topical Tacrolimus ointment (0.1%) over topical Clobetasone butyrate ointment (0.05%) for the treatment of AD in children.

Key words: Atopic dermatitis; ointment; tacrolimus; clobetasone butyrate.





