

Atopic Dermatitis in America

Study Overview



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This survey was a research project of the Asthma and Allergy Foundation of America in partnership with the National Eczema Association and with support from Sanofi Genzyme and Regeneron.

ABOUT ATOPIC DERMATITIS

Around 16.5 MILLION ADULTS have atopic dermatitis (AD), with 6.6 million reporting moderate-to-severe symptoms.

In the past, AD has mostly been considered a childhood disease. But, more recent research (including this study) confirms that many adults are living with AD.

There is no cure for AD, and many people have troubling controlling it. While there are many medical and non-medical treatments used to manage AD, they are not all effective. The treatments can be inconvenient and may cause toxic side effects. As a result, many with AD fail to seek and comply with medical treatment.

OBJECTIVES

The Asthma and Allergy Foundation of America (AAFA) works to better understand the families and communities affected by asthma and allergic diseases. To ensure the programs we develop are effective and appropriate, we regularly ask for input from people who are impacted by these conditions.

Beginning in 2016, AAFA led a three-part national study about adults with AD in the U.S. in partnership with the National Eczema Association (NEA) and with support from Sanofi Genzyme and Regeneron.

- The general public (“Public Survey”)
- Adults with AD (“Patient Survey”)
- Health care professionals who care for patients with AD (“Physician Survey”)

The purpose of the study, titled ***Atopic Dermatitis in America***, was to:

- Establish the prevalence of AD in the U.S. adult population
- Determine the distribution of AD disease severity in adults
- Understand the burden of disease for adults with AD

This document presents an overview of the study design and methodology. It will be updated with findings upon publication of data in peer-reviewed journals.

WHAT IS ATOPIC DERMATITIS?

AD is a chronic, inflammatory skin disease which results in widespread rashes and patches of itchy skin. Itchy skin patches may include small, raised bumps. These may leak fluid and crust over when scratched. Scratching may cause thickened, cracked, dry, scaly, raw, sensitive or swollen skin.

The “atopic” (allergic) nature of AD makes it different from other types of skin disorders in terms of causes, diagnosis, prevention, management and treatment. AD is uniquely and strongly associated with an individual or family history of asthma, hay fever, food allergy and/or other allergic diseases.

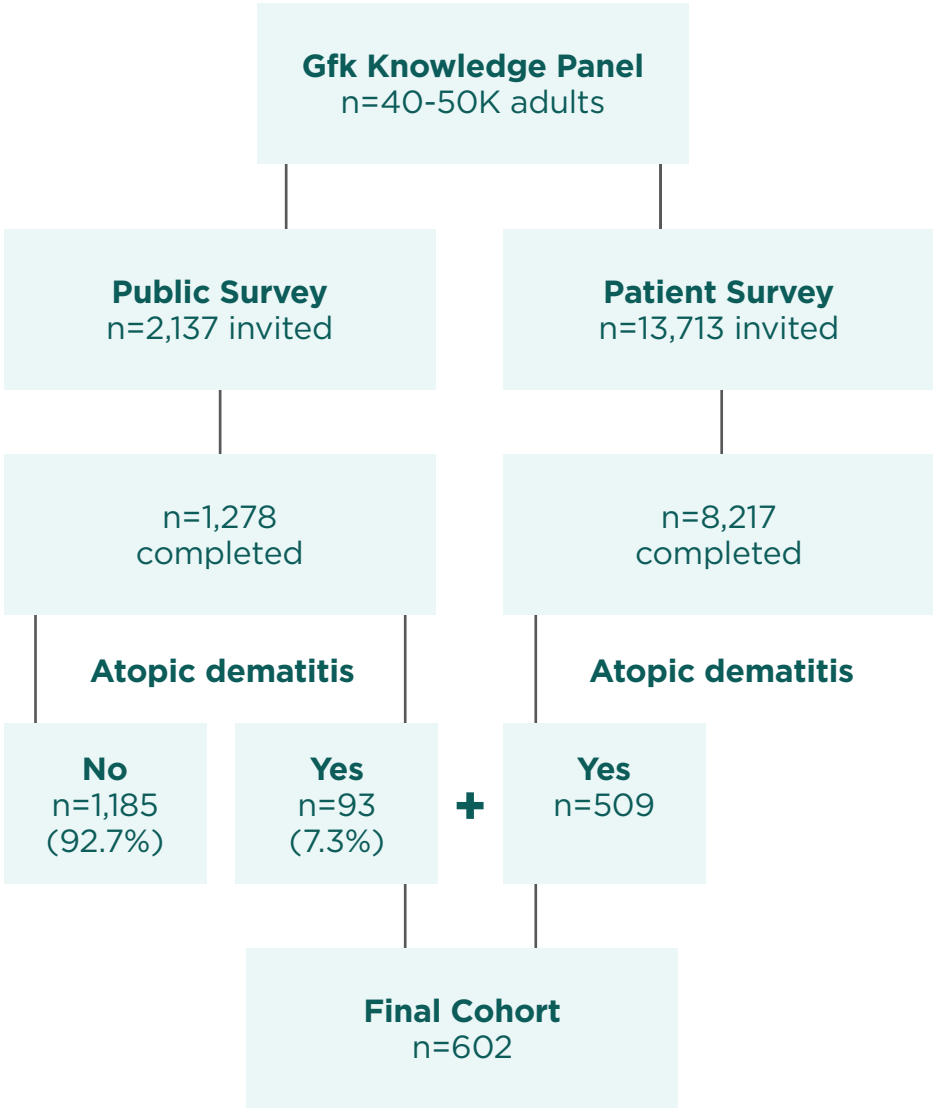


STUDY DESIGN

The *Atopic Dermatitis in America* study gathered data from the GfK Knowledge Panel. This panel is a large probability-based web panel in the U.S. containing 40,000 to 50,000 adult members at any time. It is created from a national address-based sample of households in the U.S. who are recruited to join and receive small incentives for taking part in web surveys. This panel also provides internet access, as well as computer hardware, to households without existing internet access. The GfK panel has been used in other large, population-based epidemiological studies.

An initial cross-sectional sample of 2,137 adults from the GfK panel was invited to participate. Of those, a total of **1,278 adults completed the survey**. This sample is the **PUBLIC SURVEY** and was used to establish the prevalence of AD. They were not told the focus of the survey in the invitation to avoid biases based on interest or disinterest in the subject. Although this sample provided a precise estimate of the prevalence of AD in the adult population, it did not have enough AD patients to see the differences between levels of disease severity.

For that reason, we surveyed an over-sample of 13,713 adults to get **602 adult patients with AD**. This sample is the **PATIENT SURVEY** and used to compare the quality of life among people with mild AD to that of people with moderate-to-severe AD.





DEFINITIONS

AD Disease Criteria. To reach the most accurate population estimate of AD prevalence, the UK Working Party (UKWP) criteria was selected as the screening tool for patient eligibility. To be considered as “an adult with AD,” respondents had to:

Have an itchy skin condition during the past 12 months AND at least three of the following:

1. History of skin crease involvement
2. A personal history of asthma and/or hay fever
3. A history of general dry skin during the past year
4. Onset of the skin condition under the age of 2

The UKWP criteria is a widely accepted method for AD definition that eliminates the biases associated with prevalence estimates based on a clinical diagnosis.

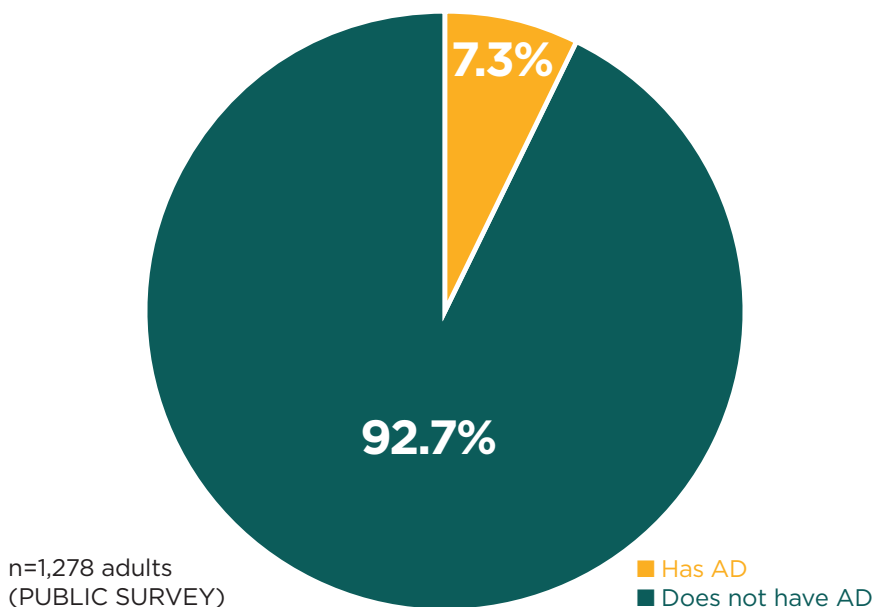
AD Disease Severity Definition. AD severity was classified based on these three measures:

- Patient Oriented Eczema Measure (POEM), a validated, self-administered tool, primarily used in clinical trials, to assess patient-reported symptoms in AD. POEM measures the frequency in the past week of seven symptoms related to AD.
- Patient-Oriented SCORing Atopic Dermatitis (PO-SCORAD), a self-assessment score allowing a patient to comprehensively evaluate their AD, using subjective and objective criteria.
- A global self-assessment of AD severity was obtained with the single question, “Would you describe your atopic dermatitis or eczema as mild, moderate or severe?”

SNEAK PEEK AT FINDINGS FROM THE RESEARCH

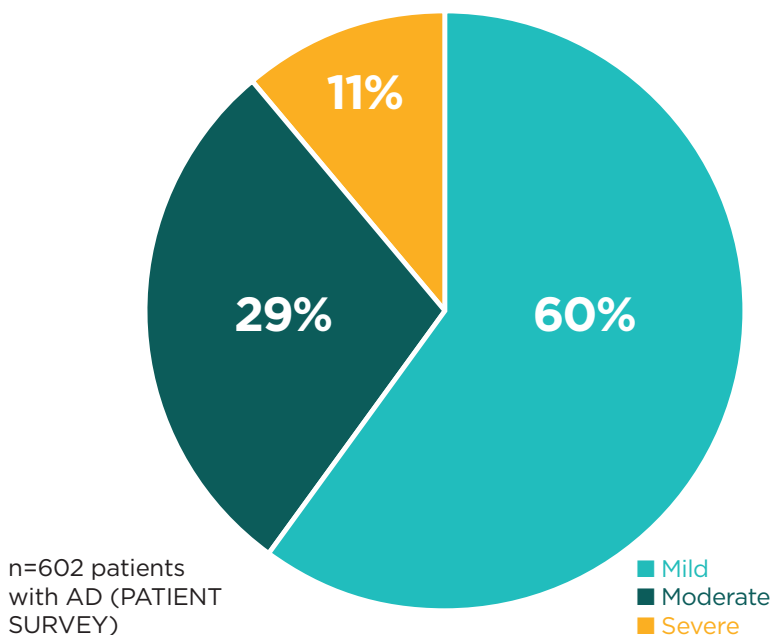
Overall, the prevalence of **AD among adults in the U.S. is 7.3%**. This is based on using the strictest UKWP criteria and age of onset under 2 years old.

PREVALENCE OF AD (ONSET UNDER 2 YEARS OLD)



Of the 602 patients with AD, 60% had mild disease and **40% had moderate or severe disease.**

SEVERITY OF AD



ACKNOWLEDGMENTS

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