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**Atopic dermatitis is the  
dermatologic syndrome that  
frequently heralds the  
Atopic Diathesis**

# Atopic dermatitis

- **The earlier the onset, the more severe the dermatitis.**
- **70% of patients with severe AD developed asthma compared with 30% of patients with mild AD, and approx. 8% in general population.**
- **Therapies that modify the severity of AD in infants and young children might decrease the risk of the eventual development of asthma.**

# **AAD Guidelines**

**JAAD 2004;50:391-400**

## **Topical corticosteroids**

- **Topical CS remain the standard of care.**
- **Recognize complications – striae, atrophy, telengectasia, limit use.**
- **Limited data re: optimal concentrations, duration and frequency of Rx, quantity of application, etc.**
- **Effect and absorption by hydration &/or occlusion.**
- **Tachyphylaxis (not documented)**
- **Long-term intermittent use – helpful & safe.**

# Risk factors of Topical Steroids

- “Steroid phobia”
- Atrophogenicity (essentially to potent CS)
- Acne/rosacea-genicity
- Allergic Contact Dermatitis  
(nonhalogenated >>halogenated CS)
- (?)Tachyphylaxis
- Systemic absorption  
    “Immunosuppression”  
    Hypoadrenalism

# Atopic Dermatitis

## Long-Term Management

Disease severity

Dry skin  
only



Onset of  
Itching/pruritus  
or signs of  
inflammation



Severe  
flare-up

Topical  
steroids

Treatment

Calcineuron Inhibitors

Emollients

# **AAD Guidelines**

## **Topical Calcineuron Inhibitors**

- **CI's are safe and effective in reducing the severity of AD symptoms in children and adults.**
- **CI's have favorable safety profiles for up to one year of continued use.**

**(Expert Opinion on Drug Safety 2(5):457, 2003)**

**AAAAI**

## **Disease Management of AD**

**(Annals Allergy Asthma Immunol 2004;93S2.)**

- **Short-term, multicenter, blinded, vehicle-controlled studies with pimecrolimus cream 1% patients with AD have shown pimecrolimus to be both effective and safe.**
- **Pimecrolimus cream 1% has been approved for short-term and intermittent long-term use in patients with mild-to-moderate AD who are 2 years and older.**

# **Recommendation of the College of Allergy**

- **From our experience with the “negative effect” by the existing steroid-phobia, the addition of a possible “black box” warning to the label of Elidel, will result in less aggressive treatment for some patients with AD, who will then be denied effective intervention to control their atopic march.**