
Harmonised topical treatment procedures for children with atopic dermatitis

FROM THE SPECIALTIES

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Topical treatment adherence is low among patients with atopic dermatitis. New harmonised topical treatment procedures for children may improve the situation.

Children with atopic dermatitis are treated by general practitioners and by dermatology and paediatric departments in hospitals. First-line treatment of atopic dermatitis targets skin barrier dysfunction with emollients and skin inflammation with topical corticosteroids. Antiseptics are used for skin infection, and wet wraps for itching and scratching. In Norway, topical treatment procedures have never been harmonised. There is wide agreement among Norwegian specialists that there is a need for harmonised topical treatment procedures for children with atopic dermatitis.

There are several reasons why treatment adherence is low. The treatment is complex, and the patients may fail to understand why they need to keep taking it. They may have been inadequately trained, they may receive conflicting information, and some may be frightened of/have a phobia against the treatment. It has been demonstrated that a personalised treatment plan, combined with attendance at an 'Eczema school', increases treatment adherence (1). It is important that patients receive consistent information about the treatment, which may increase adherence.

Work to update current medical procedures took place from February 2020 to June 2023. The project consisted of four interdisciplinary working groups that included representatives from all the regional health trusts, with 20 registered nurses and doctors from dermatology and paediatric departments as well as the

from the Regional Unit for Asthma, Allergy and Hypersensitivity. The project received grant funding for work meetings from the Norwegian Asthma and Allergy Association and was enrolled in the Norwegian Electronic Health Library (helsebiblioteket.no) (2) with supervisors assigned. The method used was AGREE (Appraisal, Guidelines, Research and Evaluation). Draft treatment procedures with relevant patient information and an instructive video were distributed for consultation to the heads of the Dermatology Departments at the four university hospitals, the Norwegian Medical Products Agency, relevant patient organisations (3–5), professional bodies and specialist associations.

In June 2023 the procedures, and the associated patient information, on treatment with emollients, topical corticosteroids, antiseptics and wet wraps, were published by the Norwegian Electronic Health Library (helsebiblioteket.no) (2).

Summary of the topical treatment procedures:

- *Emollients*: To be used daily, even when in remission. Apply in ample quantities (250–500 g/week) at least morning and night and after contact with water. Emollients reduce the severity of the eczema and the use of topical corticosteroids, and they prevent flare-ups. Patient preference is important for the choice of emollient. They need to comply with the statutory requirements and should not contain perfume or plant proteins. They should consist of as few substances as possible.
- *Topical corticosteroids*: Doses are given in fingertip units (Figure 1). To be used once per day as reactive and proactive treatment. Reactive treatment of an eczema flare-up requires daily application. In calmer phase, proactive treatment should be applied every second day for an extended period and thereafter twice per week (maintenance treatment/weekend treatment). There are no studies indicating the best sequence of applying topical corticosteroids and emollients. We recommend allowing one to be absorbed before the other is applied.

Amount of cortisone cream

One fingertip unit per area the size of two palms

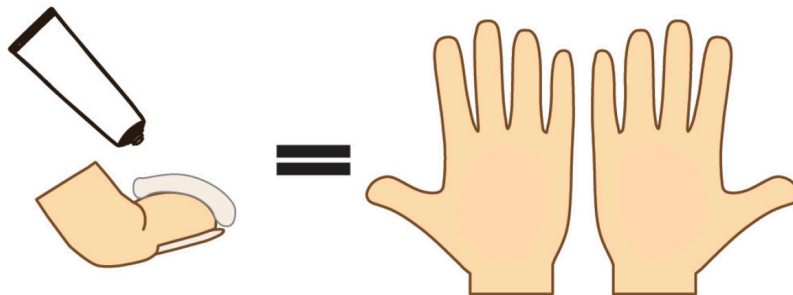


Figure 1 Fingertip unit. Illustration: Ine Eriksen, the Photo and Video Service, Institute of Clinical Medicine, University of Oslo. Adapted for the Journal.

- *Antiseptic treatment*: Infection treatment should be considered if the topical corticosteroid treatment is ineffective. The skin should be cleaned, and a topical antiseptic applied. Topical corticosteroids and emollients are to be used in parallel.
- *Wet wraps*: may be used to alleviate severe itching and scratching.

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