

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/dermconsult/exploring-common-barriers-in-pediatric-atopic-dermatitis-management/36442/>

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Exploring Common Barriers in Pediatric Atopic Dermatitis Management

Announcer:

You're listening to *DermConsult* on ReachMD. On this episode, we'll hear from Dr. Nicole Harter, who will be discussing family concerns and barriers to pediatric atopic dermatitis treatment. Dr. Harter is an Associate Professor in the Department of Dermatology and the Pediatric Dermatology Fellowship Program Director at University of Nebraska Medical Center in Omaha.

Here she is now.

Dr. Harter:

I would say some of the biggest concerns are safety of use of topical steroids on a young pediatric patient: how we do this safely when it's a chronic disease, meaning there's going to be exacerbations and remissions, and we'll need to use a component of a topical steroid for prolonged periods of time. So how do we do that safely, and is there a safe way to do it?

I think other concerns are, is there something specific driving this process? What are they allergic to as far as what's getting onto their skin? Are they allergic to the family cat or dog? What food are they allergic to? What is the root cause? And the hard part with AD is there's not one root cause. We know there is a genetic susceptibility factor related to how the skin barrier is made, and it's a defective skin barrier that doesn't hold water and moisture well, and so it dehydrates and creates red, scaly, itchy patches on the body, which is atopic dermatitis, but there's not one underlying cause. It's multifactorial: there are genetic, environmental, and host susceptibility factors. There's a lot of things that go into play. So one other challenge or concern is trying to work with families, where it's not something they're doing, and there's not one thing we can change to make it better. It is highly multifactorial.

Other concerns, especially when we're talking about medicines inside the body—whether medicine by mouth or subcutaneous injection—is, is this safe to use in a really young infant, child, or teenager overall? How long have we been doing it? Do we have data to show that this will not cause long-term harm or effect? And then sometimes, when we're talking about oral small molecule inhibitors, these require blood monitoring or lab monitoring, so we have to do needle pokes for really young children, and that can be a huge deterrent because the child is afraid to have their blood drawn once a month for a few months, and that can be really challenging. We're also immunosuppressing a patient population that is still getting vaccinations at a frequent interval, and that's something we have to discuss: can you get your vaccinations or not while you're on these therapies? And they're in school, so they do get sick. They get exposed to common viruses, coughs, colds, and illnesses, and if they're on an immunosuppressive therapy, they have a greater chance of getting these conditions and maybe getting more sick from them. So those are some of the biggest concerns.

Barriers we primarily have are going to be insurance coverage, especially for our newest nonsteroidal topical agents and some of our more advanced therapeutics, including our subcutaneous biologic injections and our oral small molecule inhibitors. We even run into barriers with families just not getting enough standard topical steroid per month from their pharmacy based on insurance coverage—not enough topical steroid per month to treat their child's skin disease—so a lot of it just runs into not getting them the therapies they need or enough of the therapies they need to get them improvement in their overall disease state.

Announcer:

That was Dr. Nicole Harter talking about common concerns from families about pediatric atopic dermatitis treatment. To access this and other episodes in our series, visit *DermConsult* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!