

SUMMARY

General approach to and summary of the guideline for the management of atopic dermatitis

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General approach to the treatment of atopic dermatitis

Mild dermatitis

- Appropriate general measures
- Emollients
- Weak to moderately potent topical corticosteroids (TCSs) depending on body site
- Topical calcineurin inhibitors (TCIs) as second line or where corticosteroids are contraindicated

Moderate dermatitis

- Appropriate general measures
- Emollients
- Moderate-potency TCSs for maintenance
- Potent TCSs for flares
- TCIs (tacrolimus or pimecrolimus) as maintenance for selected skin areas
- Sedating antihistamines

Severe dermatitis

- Appropriate general measures
- Emollients
- Potent TCSs
- TCIs (tacrolimus only) on selected skin areas

Acute flares

- Systemic corticosteroids (short courses)
- Moderately potent to potent TCSs in hospital
- Sedating antihistamines
- Thereafter, maintenance as for chronic disease

Chronic disease

- Ultraviolet (UV) light
- Non-steroidal systemic drugs: azathioprine, cyclosporin, methotrexate, mycophenolate

Severe refractory cases, frequent flares, poor response, moderate dermatitis in young patients

- Refer to dermatologist/paediatrician/allergist as appropriate
- Potent TCSs
- Phototherapy (narrow-band UVB)
- Cyclosporin, methotrexate, oral corticosteroids, azathioprine, mycophenolate mofetil, intravenous immunoglobulin, interferon-gamma
- Psychotherapeutic intervention

