

GUIDE TO ADVANCE SYSTEMIC THERAPY IN ATOPIC DERMATITIS (AD)

General conditions for systemic treatment

Age: ≥6 months

Diagnosis: Clinical diagnosis of AD; other conditions considered to explain lack of response (allergic contact dermatitis, scabies, mycosis fungoides, immunodeficiency, etc.)

Eligibility criteria for systemic treatment

A | Clinical Severity

At least one or more of the following criteria is fulfilled: Yes No

vIGA-AD™ or IGA = 3 or 4

Body Surface Area ≥10%

Treatment-refractory AD in sensitive/visible areas (e.g. head/neck, hands, feet, genitalia)

Despite appropriate maintenance topical therapy, **persistent AD or multiple AD flares over a 3-month time period** (episodes requiring an escalation of treatment, or seeking additional medical advice)^a

B | Subjective Burden

At least one or more of the following criteria is fulfilled: Yes No

Patient Global Assessment of AD = Moderate or severe

Itch ≥6

Sleep ≥6

Bother = Moderate, very, or extreme

Patient indicates that **AD has a major impact** on their **quality of life**

Patient indicates that **there is an inadequate response** to appropriate prescription **topical** therapy

C | Lack of Treatment Response

All other therapeutic approaches are insufficient because **at least one or more of the following** criteria is fulfilled: Yes No

Inadequate response to appropriate prescription **topical** therapy for moderate-to-severe AD

No provider expectation of success with prescription **topical** therapy **alone**

Prescription **topical** therapy, as needed for control, **is not safe or feasible**

Summary (A+B+C)

Systemic treatment is indicated because one or more criterion from **each** of the sections A, B, and C is fulfilled^b Yes No

TREATMENT TO BE INITIATED WITH: _____

vIGA-AD=Validated Investigator Global Assessment for AD. IGA=Investigator Global Assessment.

^aLangan SM, Thomas KS, Williams HC. What is meant by a "flare" in atopic dermatitis? A systematic review and proposal. *Arch Dermatol*. 2006 Sep;142(9):1190-6.

^bThere may be patients who meet only criterion C that are medically appropriate for systemic therapy. For example, criteria A and B were met at baseline, but topical therapy is not safe or feasible.

^cSilverberg J, et al. A checklist to aid in identifying patients with atopic dermatitis who are candidates for systemic therapy. Presented at: *Winter Clinical Dermatology Conference*, January 2024.

^dAugustin M, Werfel T, von Kiedrowski R. Checkliste: Indikationsstellung zur Systemtherapie der Neurodermitis bei Erwachsenen. [2018]. Available from: https://register.awmf.org/assets/guidelines/013_D_Dermatologische_Ges/013-027CL1_S2k_Neurodermitis_Aktualisierung-Systemtherapie_2022-01.pdf

^eWerfel T, et al. Update "Systemic treatment of atopic dermatitis" of the S2k-guideline on atopic dermatitis. *J Dtsch Dermatol Ges*. 2021 Jan;19(1):151-168.

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Systemic therapy is indicated for patients with moderate-to-severe atopic dermatitis (AD) who do not achieve adequate disease control with topical therapy or have frequent or severe flare-ups.^{1,2} The decision to initiate systemic therapy in patients with AD is complex, with no consensus on criteria for initiation.² To aid clinicians in this decision-making, the "When to Start Systemic Therapy Checklist," comprising three sections, was developed. Systemic therapy is indicated when ≥ 1 criterion in each section is fulfilled.³

¹Siegels D, et al. Systemic treatments in the management of atopic dermatitis: A systematic review and meta-analysis. *Allergy*. 2021 Apr;76(4):1053-1076.

²Simpson EL, et al. When does atopic dermatitis warrant systemic therapy? Recommendations from an expert panel of the International Eczema Council. *J Am Acad Dermatol*. 2017 Oct;77(4):623-633.

³Silverberg J, et al. A checklist to aid in identifying patients with atopic dermatitis who are candidates for systemic therapy. Presented at: *Winter Clinical Dermatology Conference*, January 2024.