

Improving Pediatric Atopic Dermatitis Care with Adapted Therapeutic Patient Education

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Learning objectives:

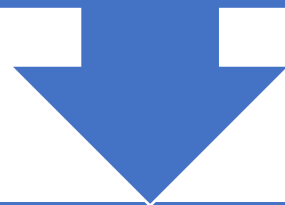
- To recognize the value of tailored TPE interventions in improving patient outcomes as compared to traditional TPE programs.
- To explore practical strategies for implementing competences in pediatric AD management.

Background

- Atopic dermatitis (AD) affects 15-20% of children worldwide, impacting patients' and families' quality of life.
- Therapeutic patient education (TPE) programs empower patients with knowledge and skills to manage chronic conditions like eczema.
- TPE in AD has been proven to improved treatment adherence and overall outcomes. However, gaps remain in addressing the needs of various age and cultural groups within existing programs.

Methods (1)

- 100 patients with moderate to severe AD were recruited in HSI tertiary care clinic.
- Demographic, epidemiological factors and AD treatments were identified.
- Unmet needs were assessed using a pre-training questionnaire and a 30 minutes period of exchange after the training.



Development of TPE programs tailored by ages:

Parents with children < 6yo

Parents and children
aged 6–12yo

Adolescents ± parents
≥ 12yo

Methods (2)

- **Pre- and post-training questionnaires to assess:**
 - Patient-Reported Outcomes (PROs)
 - Patient-Oriented Eczema Measure (POEM)
 - Children's Dermatology Life Quality Index (CDLQI)
 - Self-confidence about eczema and its treatments

Methods (3)

Therapeutic Education programs

1. Formal educative adapted presentations on AD

1. For parents and children <6yo
2. For parents and children 6-12yo
3. For parents and teenagers ≥ 12 yo

2. Video designed for children aged 6 to 12yo to explain AD and accompany the child (3 minutes)

3. Period of exchange (30 min) with participants, Q&A

Programme d'éducation
thérapeutique pour les enfants
atteints d'eczéma modérée à
sévère ainsi que leurs familles

Enfants de moins de 6 ans



Results (1)

Demographics and Epidemiology

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graph LR; A[100 participants were recruited:] --> B[68 participants completed the pre-questionnaire  
28 participants completed the post-questionnaire];
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100
participants
were
recruited:

- <6 years old, (34%)
- 6-12 years old, (36%)
- >12 years old, (30%)

68 participants completed the pre-questionnaire

28 participants completed the post-questionnaire

- 56% male, 44% women
- Median age of parents: 41 (35, 45)
- Caucasian (59%), Asian (19%), Mixed (7%), AA (7%)
- Family history of AD (76%) vs none (24%)
- AD diagnosed >2 years ago (74%)

Results (2)

Pre-training questionnaire- Treatments



Active treatments (alone or combined)

Topical corticosteroids (25%)
Biologics (20%)
Wet wrapping (15%)
Systemic antihistamines (9%)
Systemic corticosteroids (5%)
JAK inhibitors, UV phototherapy, topical calcineurin inhibitors, topical antihistamine, azathioprine, methotrexate, cyclosporine (<5% each)



Adjuvant therapies (alone or in association)

Hydration care routine (63%)
None (33%)
Probiotics and vitamins (7%)
Special diets (6%)
Alternative medicine (e.g., chinese, naturopathy) (4%)

Results (3)

PROs of AD by age groups

Patient-Oriented Eczema Measure (POEM, 28)

- **Pre-training (n=68): 9.8**
 - <11 yo (n=47): 8.4
 - ≥ 12 yo (n=21): 12.2
- **Post-training (n=40): 6.8**
 - <11 yo (n=27): 5.8
 - ≥ 12 yo (n=13): 8.8*

Children's Dermatology Life Quality Index (CDLQI, 30)

- **Pre-training (n=68): 7.3**
 - <11 yo (n=47): 6.9
 - ≥ 12 yo (N=21): 8.1
- **Post-training (n=40): 6.5**
 - <11 yo (n=27): 6.4
 - ≥ 12 yo (n=13): 6.7

*Clinical significant change: ≥ 3 points difference

Results (4)

PROs of AD by Skin of color

Patient-Oriented Eczema Measure (POEM, 28)

- **Pre-training (n=68): 9.8**
 - Skin of color (n=28): 9.3
 - Caucasian (n=40): 10.2
- **Post-training (n=40): 6.8**
 - Skin of color (n=11): 4.9*
 - Caucasian (n=22): 8.4

Children's Dermatology Life Quality Index (CDLQI, 30)

- **Pre-training (n=68): 7.3**
 - Skin of color (n=28): 6.9
 - Caucasian (N=40): 7.6
- **Post-training (n=40): 6.5**
 - Skin of color (n=11): 5.8
 - Caucasian (n=22): 7.0

*Clinical significant change: ≥ 3 points difference

Results (5)

Impact on parents' confidence in managing AD



Limitations

Small number of respondents for post-training questionnaires

Certain PROs, particularly POEM scores, showed clinically significant improvement in older children (≥ 12 yo) and skin of color, which requires further exploration.

Takeaway Messages

1

Despite access to medical care, many patients and their parents continue to face practical and educational barriers.

2

We developed a tailored culturally competent TPE program to empower families and children with practical tools.

3

While preliminary, our results highlight the potential impact of our TPE program in AD improvement.

Further studies with larger sample sizes are needed to validate these findings.