

Skin lipids in the development of atopic dermatitis and food allergy

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Declarations of interests

A. J. Lowe has

- received an investigator-initiated grant for unrelated research from
 - GlaxoSmithKline (GSK)
 - Sanofi Regeneron
- received an investigational product (EpiCeram) free of charge from Primus Pharmaceuticals

C-L Chang declares no conflicts of interest



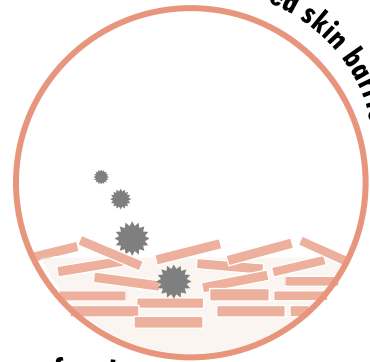
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I. Background

atopic dermatitis



Impaired skin barrier



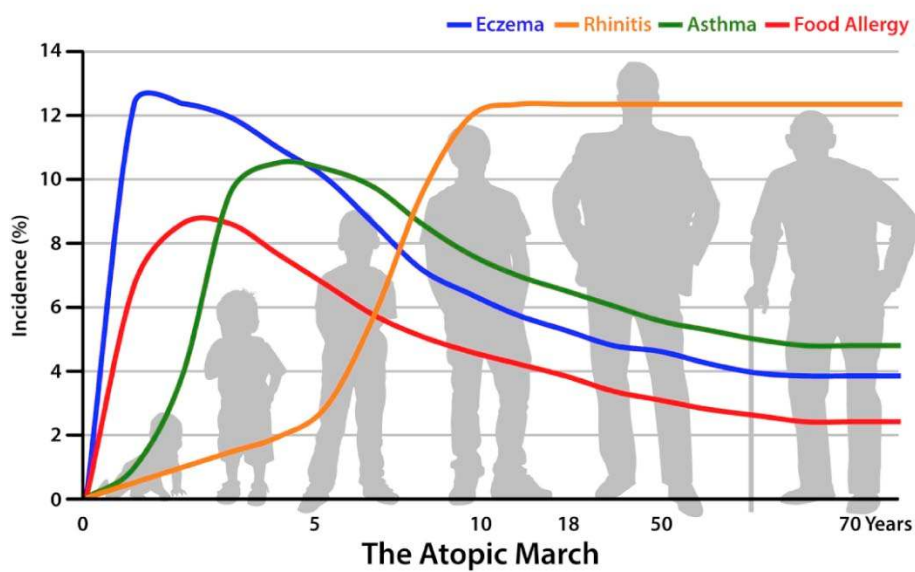
food allergy



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The Atopic March



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Understanding whether changes in **skin lipids profile** (a key component of the skin barrier) **PRECEDES** the development of **atopic dermatitis (AD)** / **food allergy (FA)** may be crucial, as this helps to identify predictive biomarkers that could inform



1.
Early life
screening
programs



2.
Targeted
skincare
interventions

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AD (6 wks.)

Structure

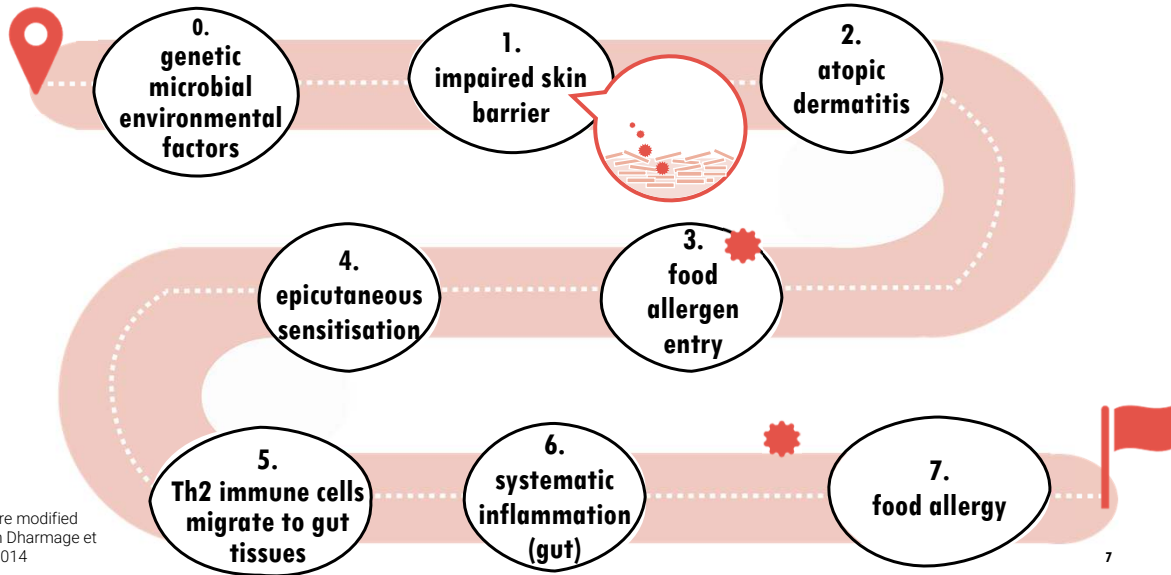
- Background to skin lipids and role in the skin barrier & allergic disease
- Published work - associations between skin lipids @ 6 weeks & AD
- Ongoing work
 - associations between skin lipids @ 3 weeks & AD
 - associations between skin lipids @ 3 weeks & AD & FA
 - Establishment of skin lipid profiles & AD



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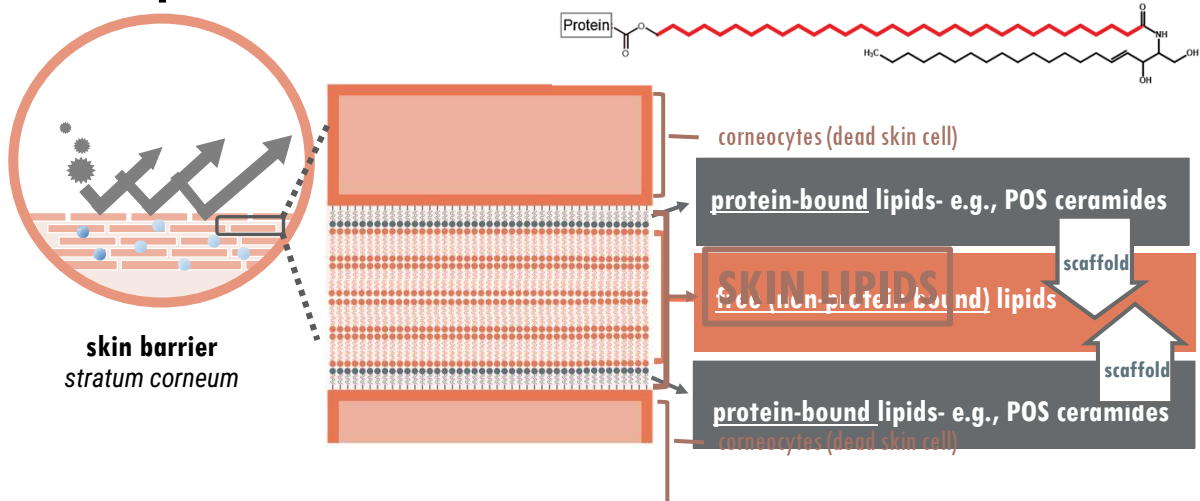
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From impaired skin barrier to atopic dermatitis and food allergy



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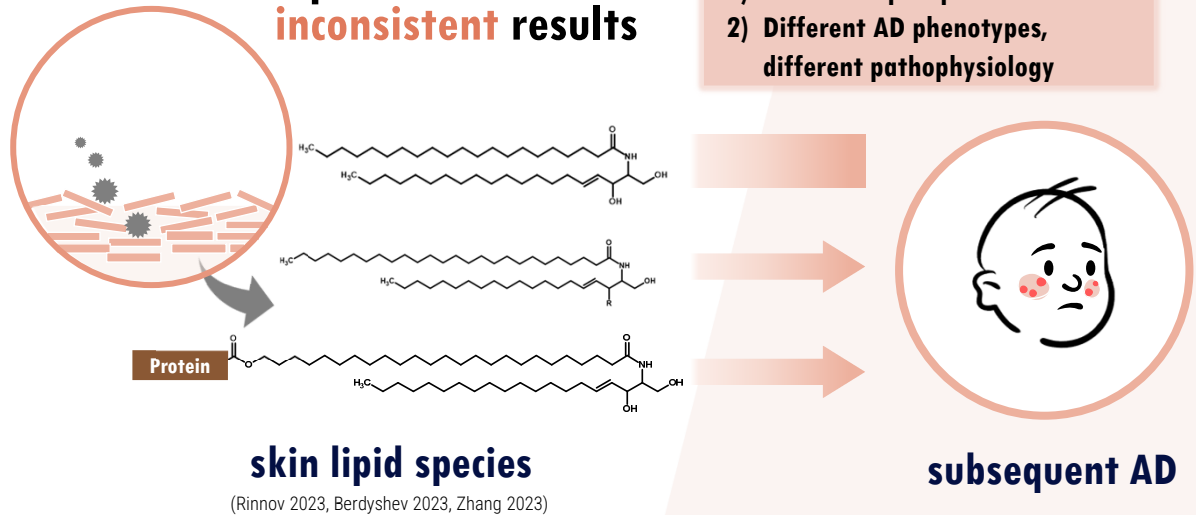
Skin lipids



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3 prospective cohort studies on skin lipids & AD **inconsistent** results



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Aim

“To examine the relationship between skin lipids and subsequent risk of AD and AD phenotypes”

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II. Methods

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Study population- a subset cohort in the PEBBLES study



133 infants

(Lowe 2019)

Melbourne Australia

Family history of allergic diseases

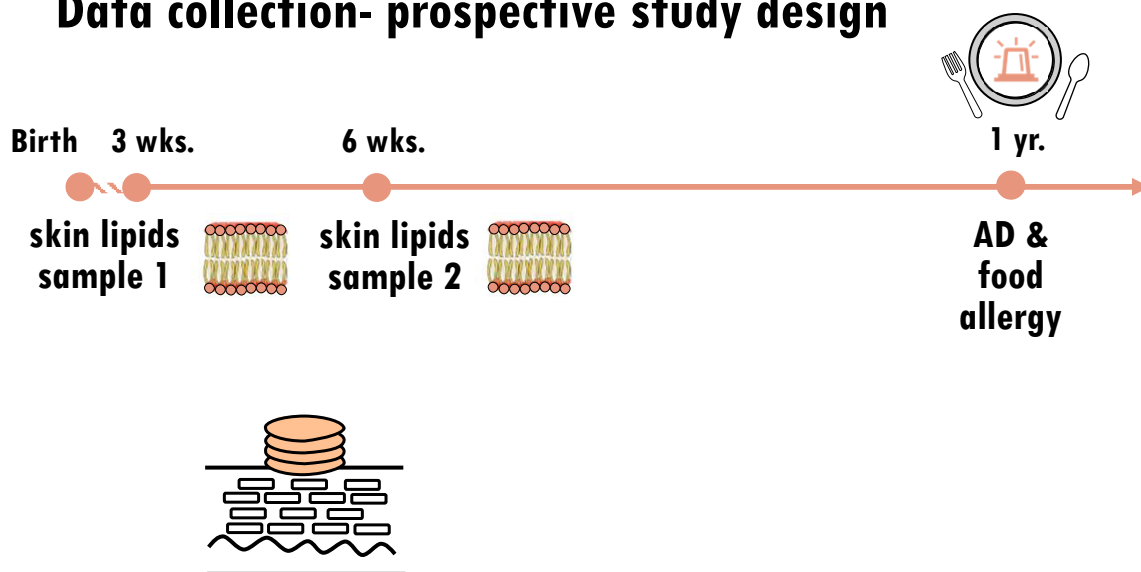
Different ethnicity background

(28% Asian 72% Non-Asian)

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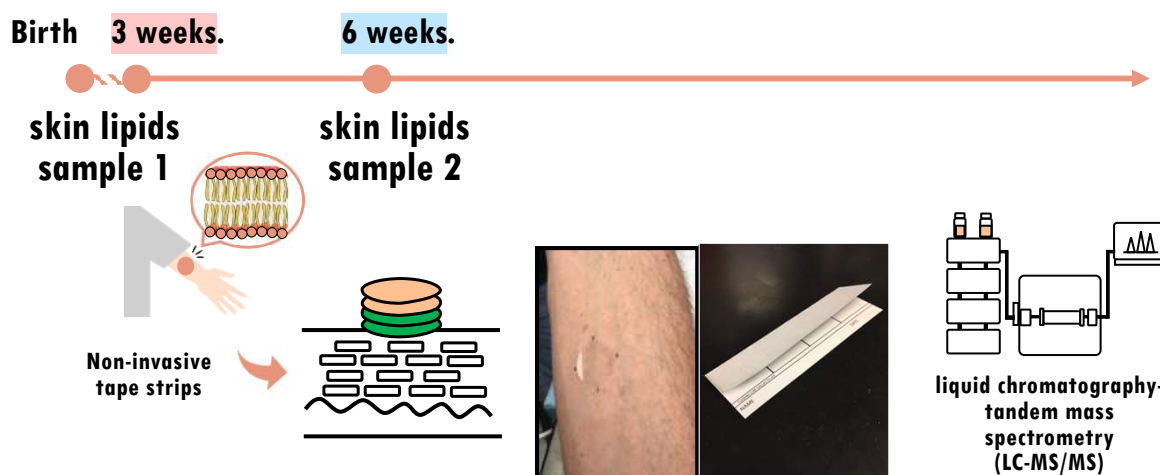
Data collection- prospective study design



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Lipid measurements



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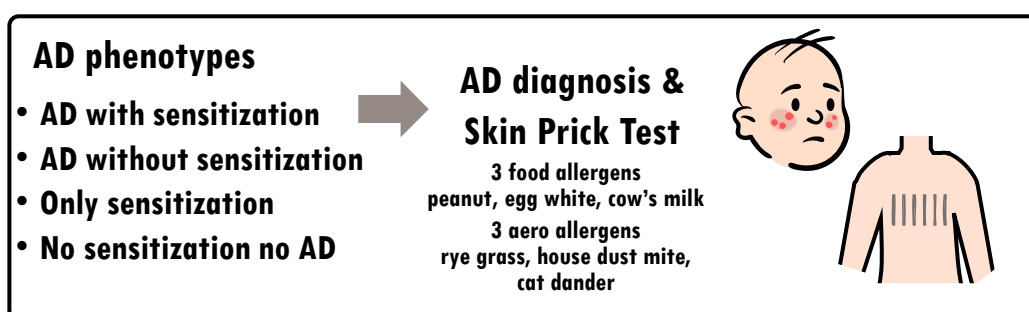
Outcome definitions



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AD phenotypes by 1 year of age



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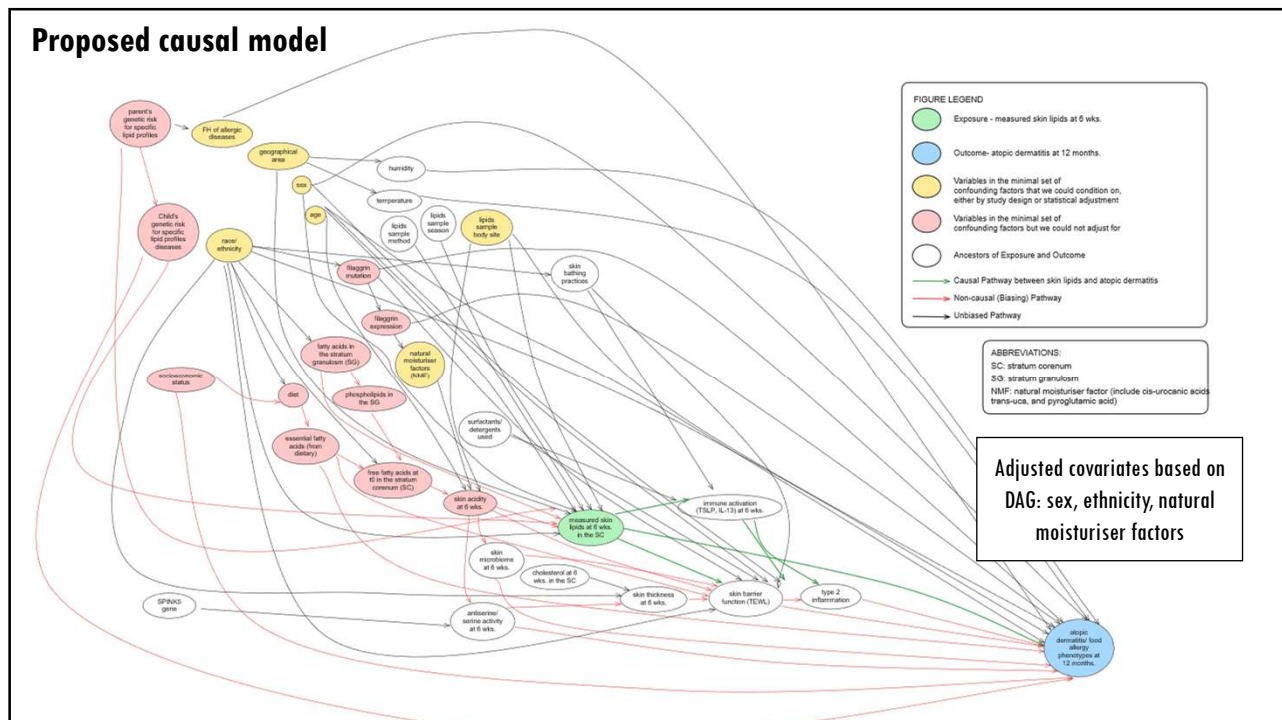
Statistical analysis

- All lipid species were first standardized into Z score → associations represent per 1 standard deviation increase
- Associations- multivariable logistic regression (adjusted for sex, ethnicity, natural moisturizer factors)
- R statistical package (version 4.3.1)

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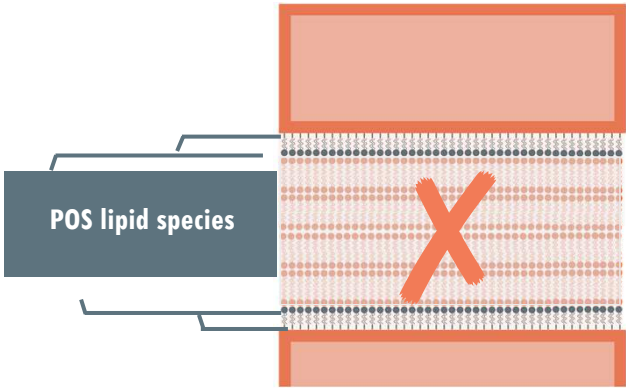
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Proposed causal model



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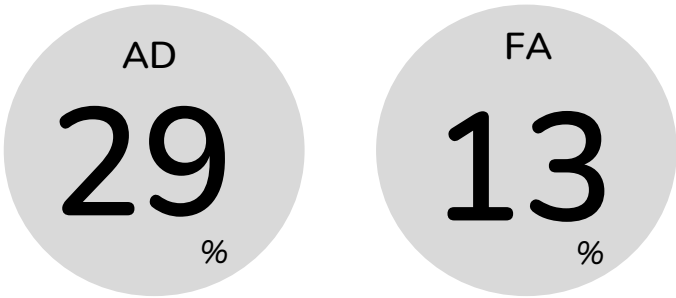
III. Key results



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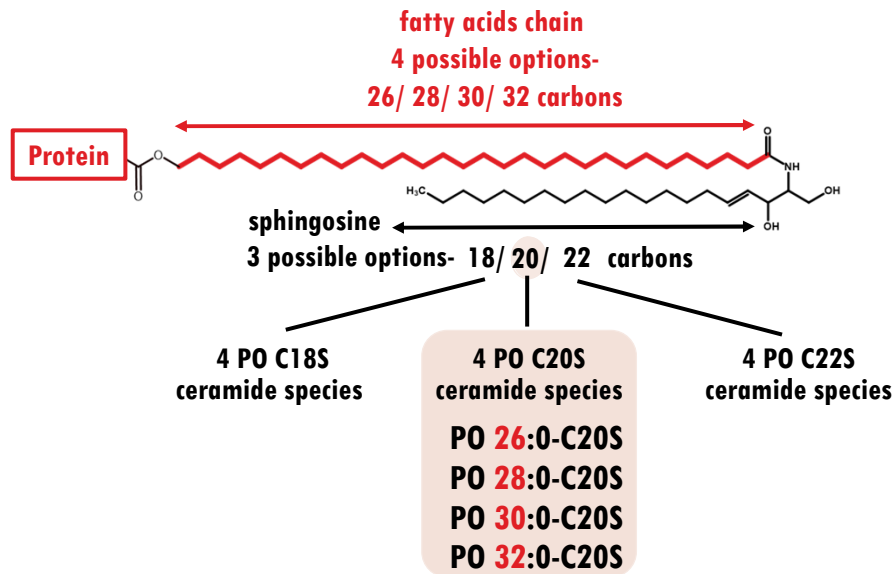
Prevalence of outcomes



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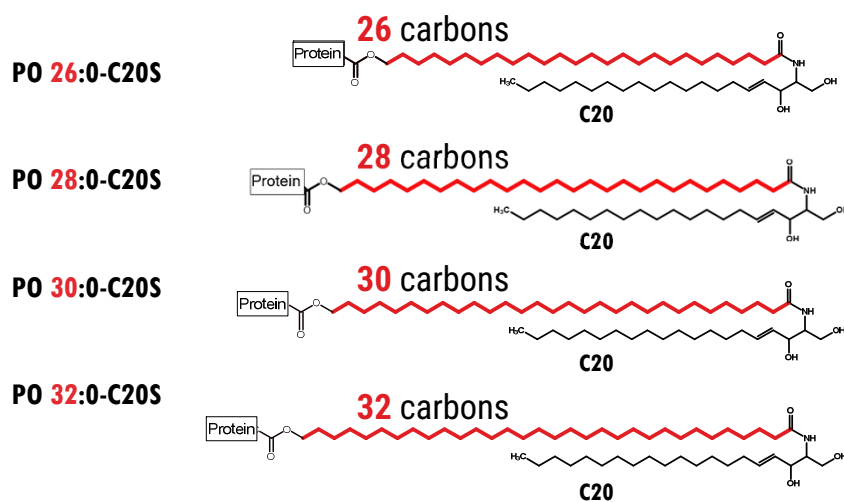
12 POS ceramide species



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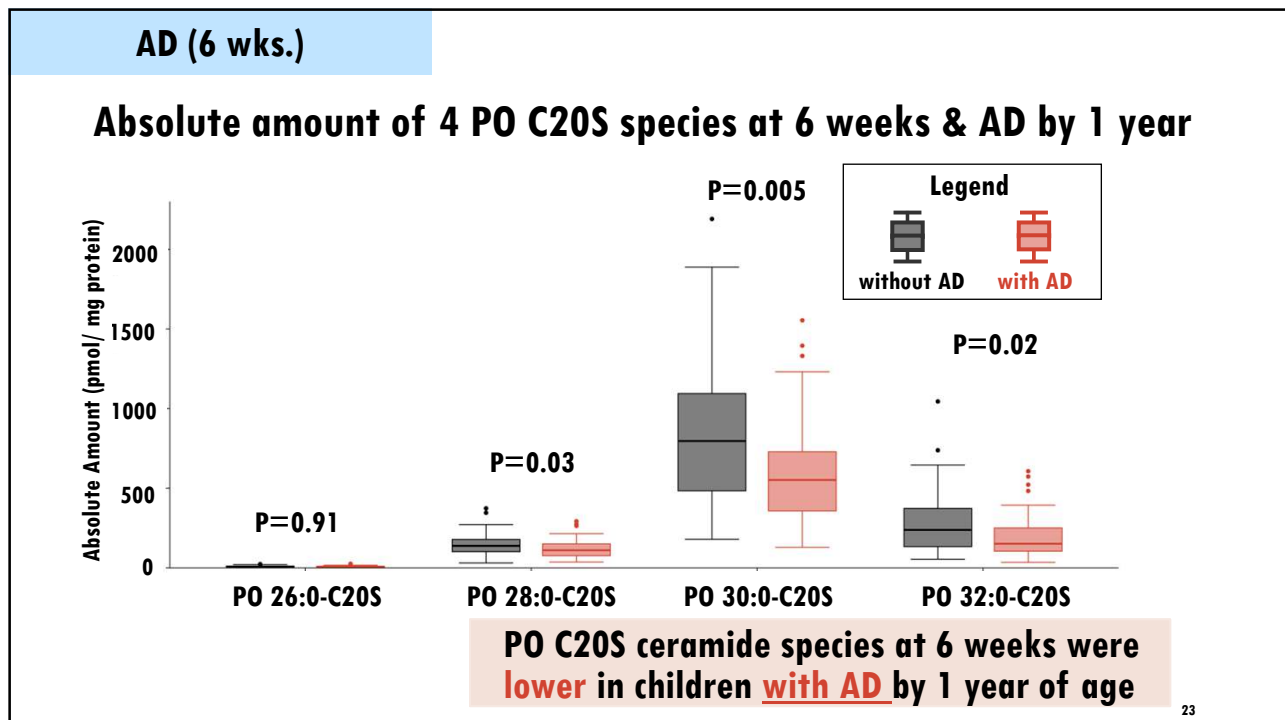
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4 PO C20S ceramide species at 6 weeks

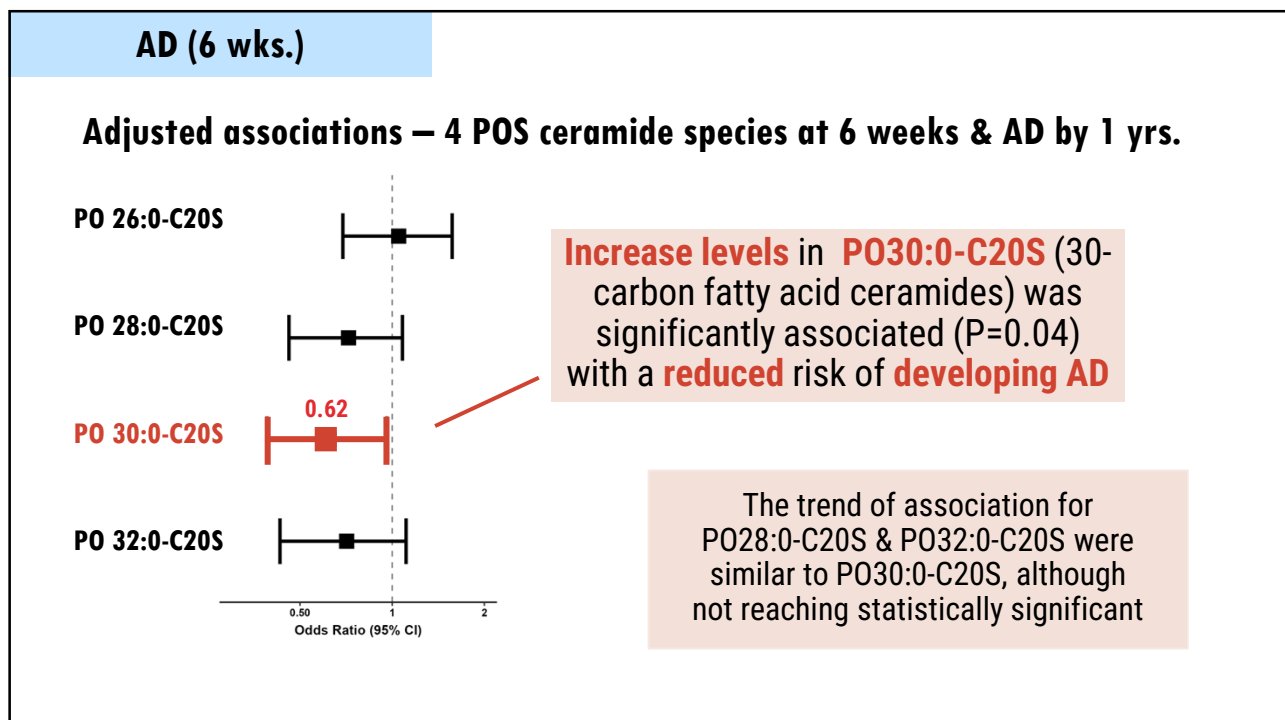


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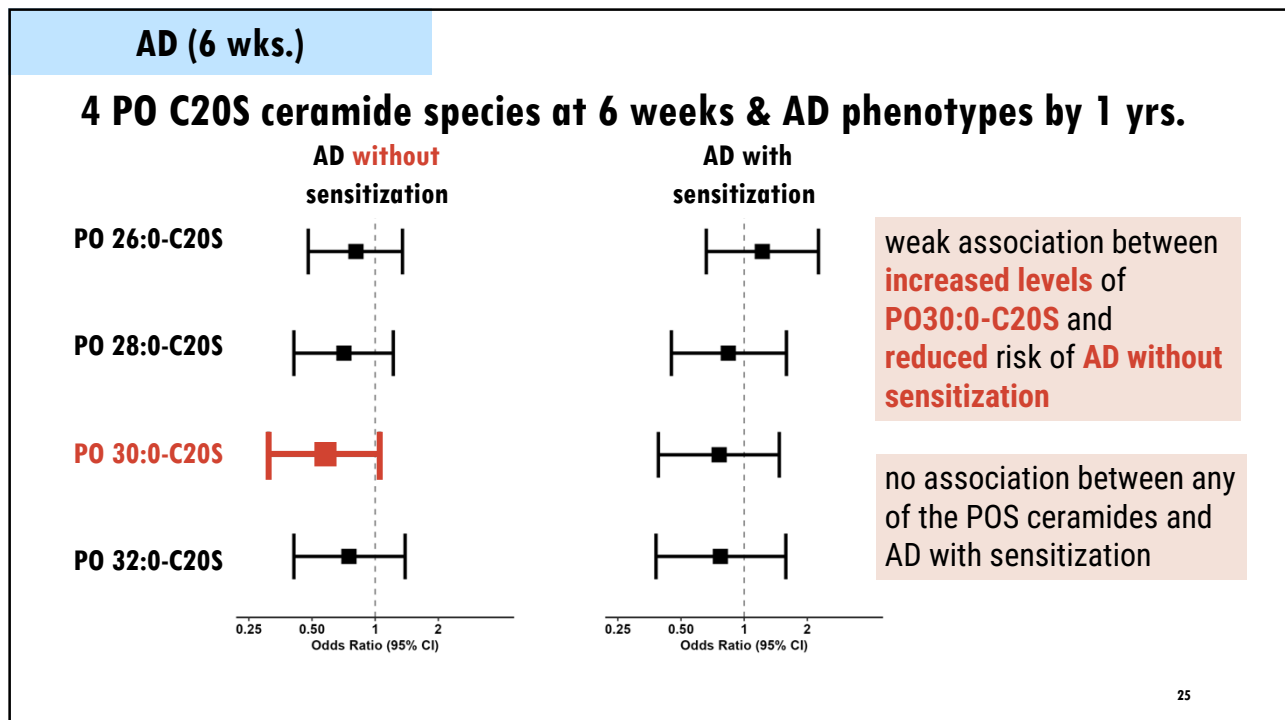
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IV. Key takeaways

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KEY TAKEAWAYS ★

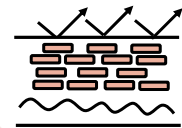
Increased levels of most POS ceramide species were associated with a reduced risk of developing AD in an ethnically diverse (Asian & Non-Asian) cohort in Australia



These findings were consistent with a previous study conducted in an Asian cohort in South Korea



This suggests that POS ceramides are important for forming an effective skin barrier regardless of the ethnic background and the geographic region the child lives in



Results may inform strategies to increase POS to reduce incidence of AD



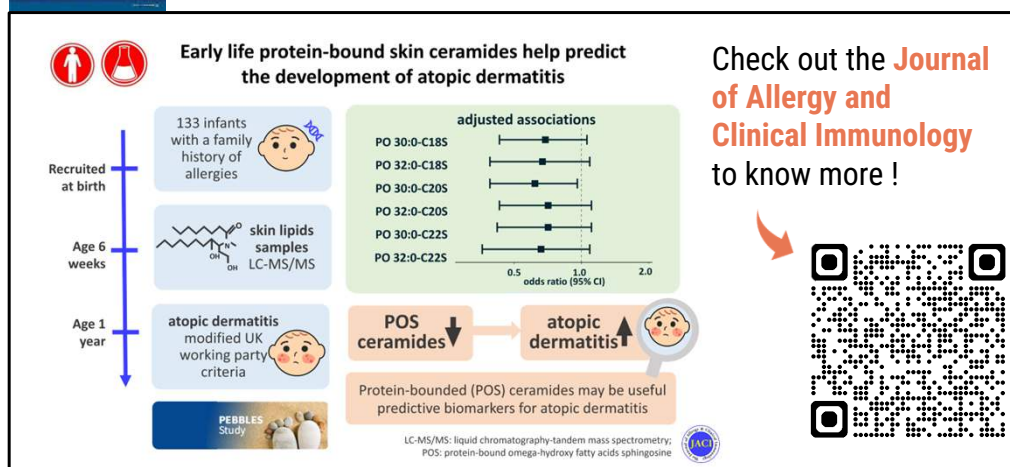
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Chang et al. 2025. 155(3):856-864.

6 weeks lipid samples



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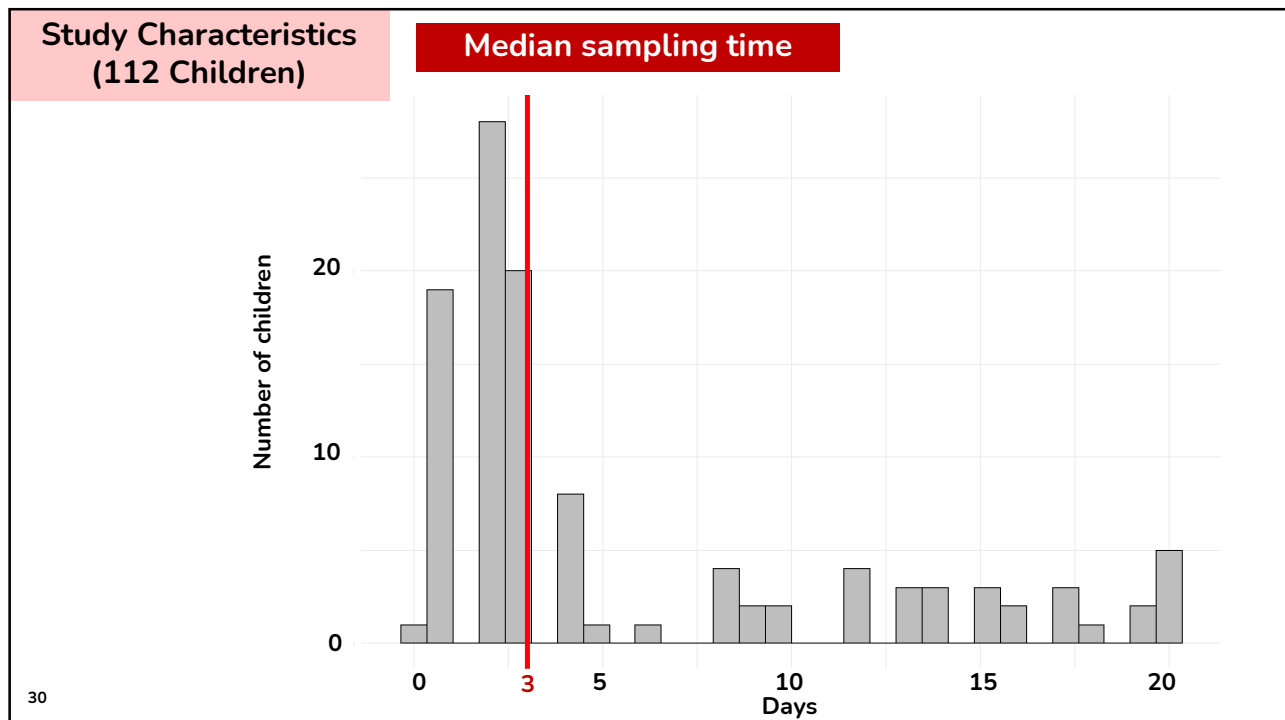
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But ...

- Do samples collected close to birth predict outcomes?
- Do skin lipids predict the development of food allergy?
- Is it reasonable to look at each skin lipid species in isolation?

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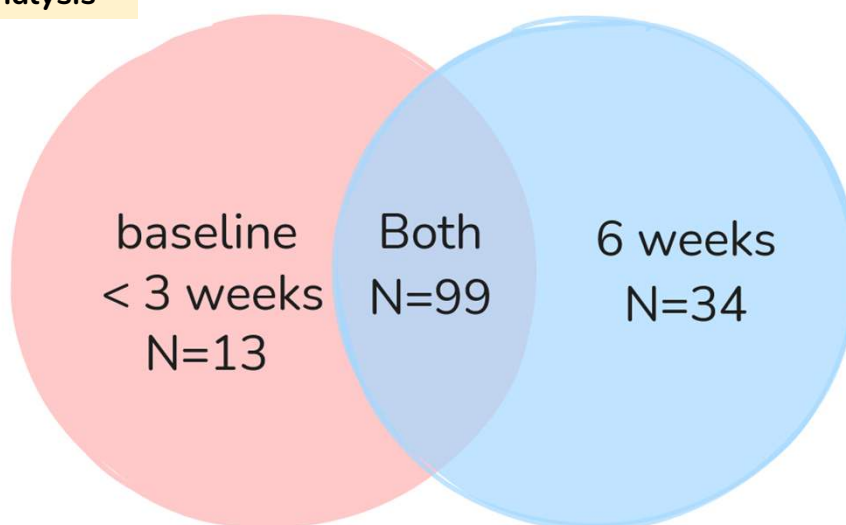
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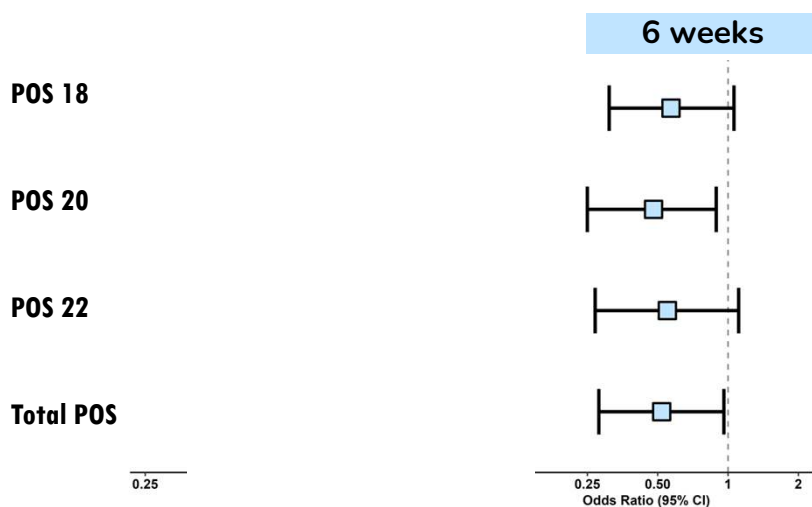
Children included in the analysis



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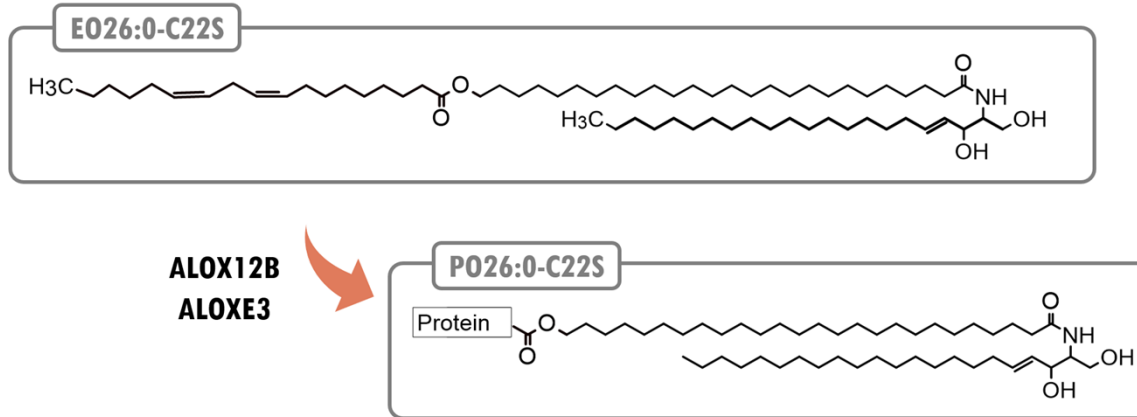
POS at baseline & 6 weeks & Atopic Dermatitis by 1 yrs



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From EOS to POS ceramides

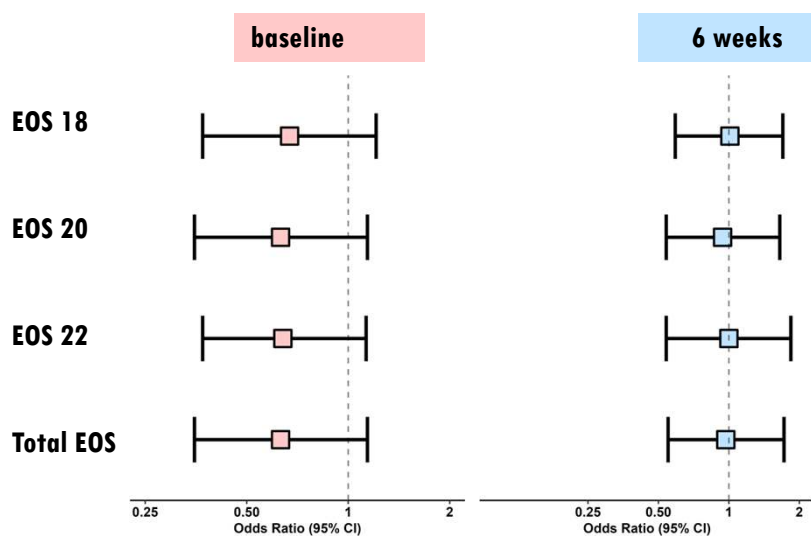


EOS - Esterified omega-hydroxy fatty acids sphingosine

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EOS & Atopic Dermatitis by 1 yrs.



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Association between skin lipids and FA

Only one study has
examined AD & FA
phenotypes

(Berdyshev 2024)



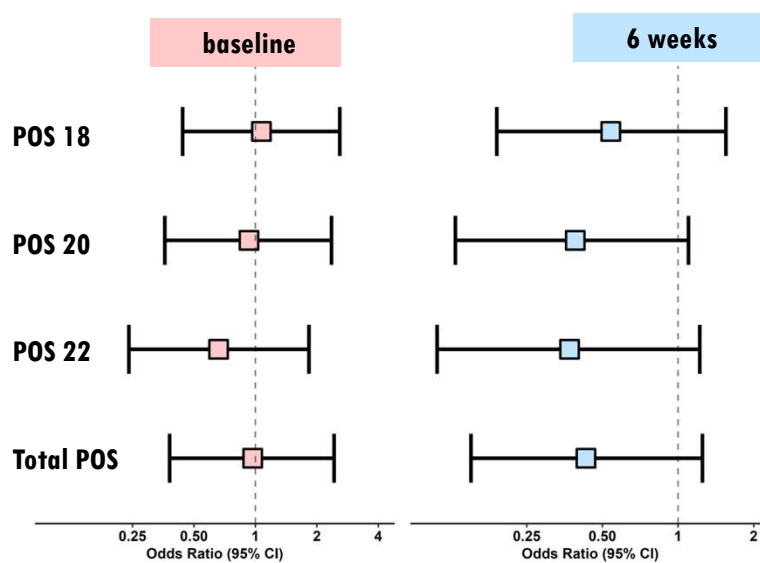
**Food
Allergy**

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CC1

POS & Food Allergy by 1 yrs.



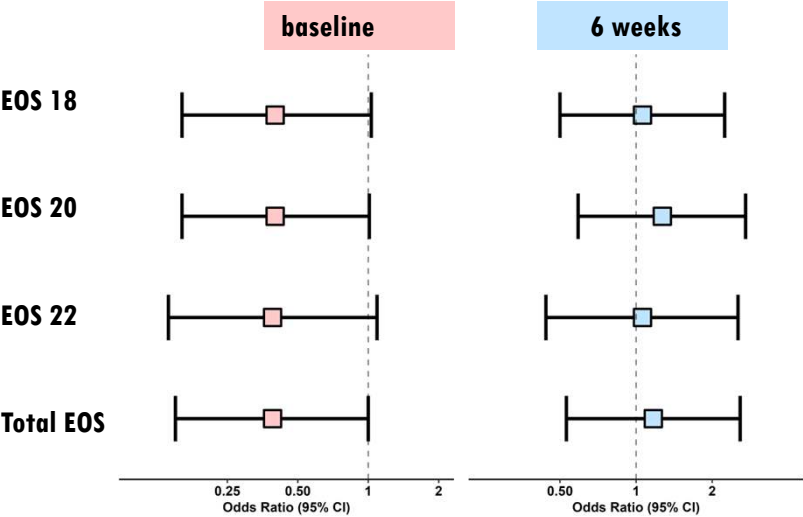
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CC1 Total POS 6 weeeeks problem

Chia-Lun Chang, 2025-10-13T02:34:52.306

EOS & Food Allergy by 1 yrs.



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IV. Conclusion

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Summary – POS & EOS and AD & food allergy

Associations between EOS and POS and AD and FA appear vary according to when the skin sample was collected

POS

@baseline - no clear associations

@6 weeks - higher levels appear protective of FA and AD

EOS

@baseline – higher levels associated with reduced risk of FA, and possibly AD

@6 weeks- no clear associations

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KEY TAKEAWAYS**Novel age dependant association with EOS**

- **Early life environment impairing the transformation of EOS to POS?**
- **May indicate a brief window of opportunity to intervene to promote conversion from EOS to POS**
- **Currently unclear what factors drive this conversion**



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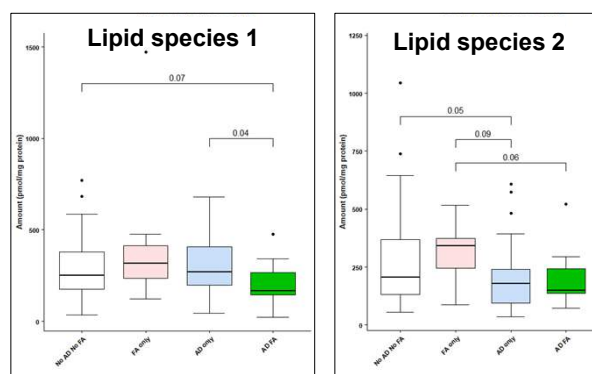
V. Future directions



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We could analyse each lipid species individually



... 176 lipid species, 176 analyses

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But...

- **Examine each lipid species separately**
→ **assumes each skin lipid species works individually in the skin barrier**
- **In reality, different skin lipid species**
 - **Are associated with the same skin barrier**
 - **may work together (synergistic interactions) to influence the skin barrier function, and the development of atopic dermatitis & food allergy**
 - **may share similar biological pathways, enzymes, precursors**

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Identification of “skin lipid profiles”

Applied statistical methods to identify possible skin lipid profiles (profiles that include a combination of different species)

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Statistical analysis

R statistical package (4.3.1)

176 skin lipid species (standarised levels – mean = 0; SD = 1)

133 individuals

	cer_n14_0_s18	cer_n16_0_s18	cer_n17_0_s18	cer_n18_0_s18	cer_n20_0_s18	cer_n22_0_s18	cer_n22_0_s18
1	-0.57976776	-0.480731591	-0.756618290	-0.56895257	-0.45446012	-0.626873409	-0.49
2	0.43966151	-0.432003672	-0.391300609	-0.65811838	-0.56047594	-0.877095050	-0.7
3	1.38310329	-0.044486202	0.657916022	0.77165167	0.04827530	0.934184963	-0.3
4	0.26782892	-0.635569904	-0.324143964	-0.59616219	-0.74874449	-0.718793130	-1.1
5	-0.69866675	-0.740612891	-0.649447298	-0.48096349	-0.71213230	-0.856927096	-0.8
6	-1.27204788	-0.581453321	-0.910594766	-0.03398906	-0.63112247	-0.379056050	-0.8
7	-0.26902212	-0.739142232	-0.703107583	-0.60248187	-0.30124368	-0.417774944	-0.3
8	-0.11764569	0.021553743	0.391401796	-0.15885716	-0.14910922	0.237286251	-0.1
9	-0.59015376	-0.582178138	-0.235611330	-0.58878353	-0.23693632	-0.252238422	-0.9

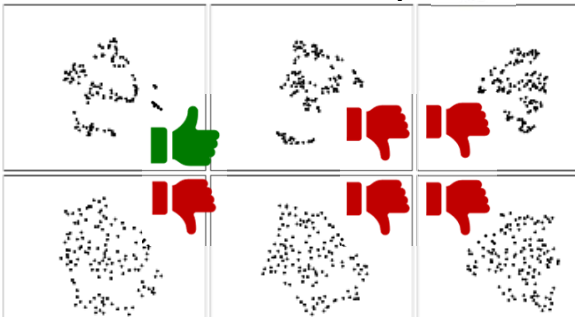
high dimensionality data

UMAP

2D dimension (2D) plot

Influence by the parameters given

Tried different parameters,
Browsed different plots 🧐



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III. Key results

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UMAP Plot – 6-week lipids



Profiles

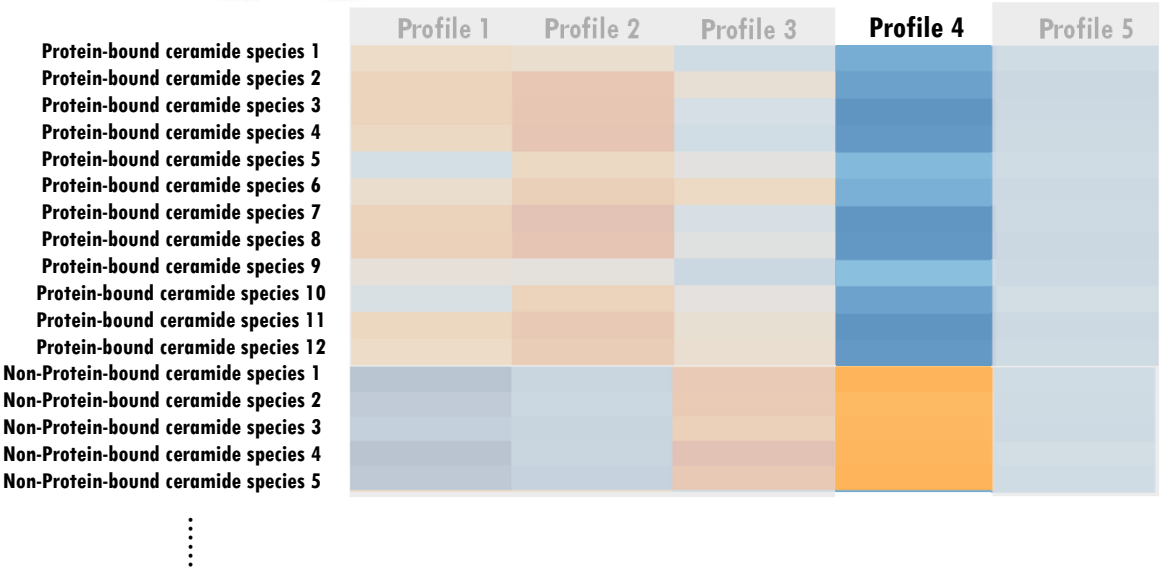
- 1 (n=11)
- 2 (n=26)
- 3 (n=31)
- 4 (n=25)
- 5 (n=40)

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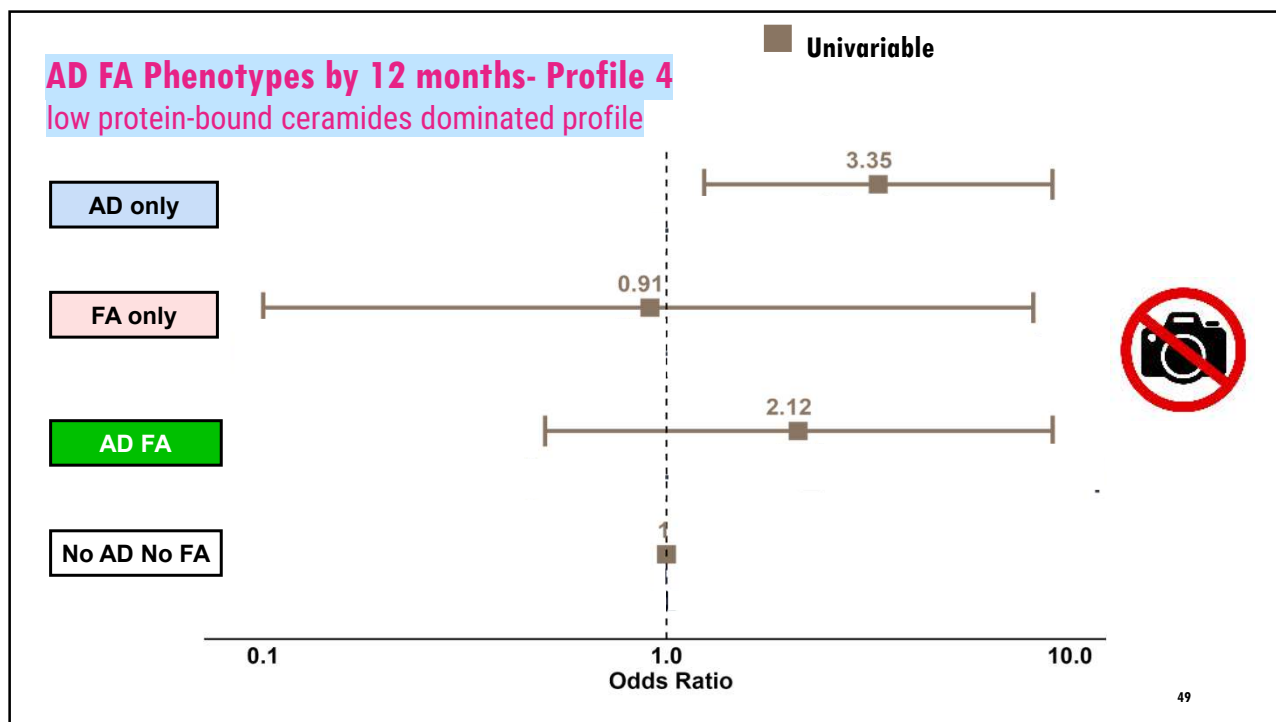
Heatmap

Lower levels Median Z-Amount Higher levels

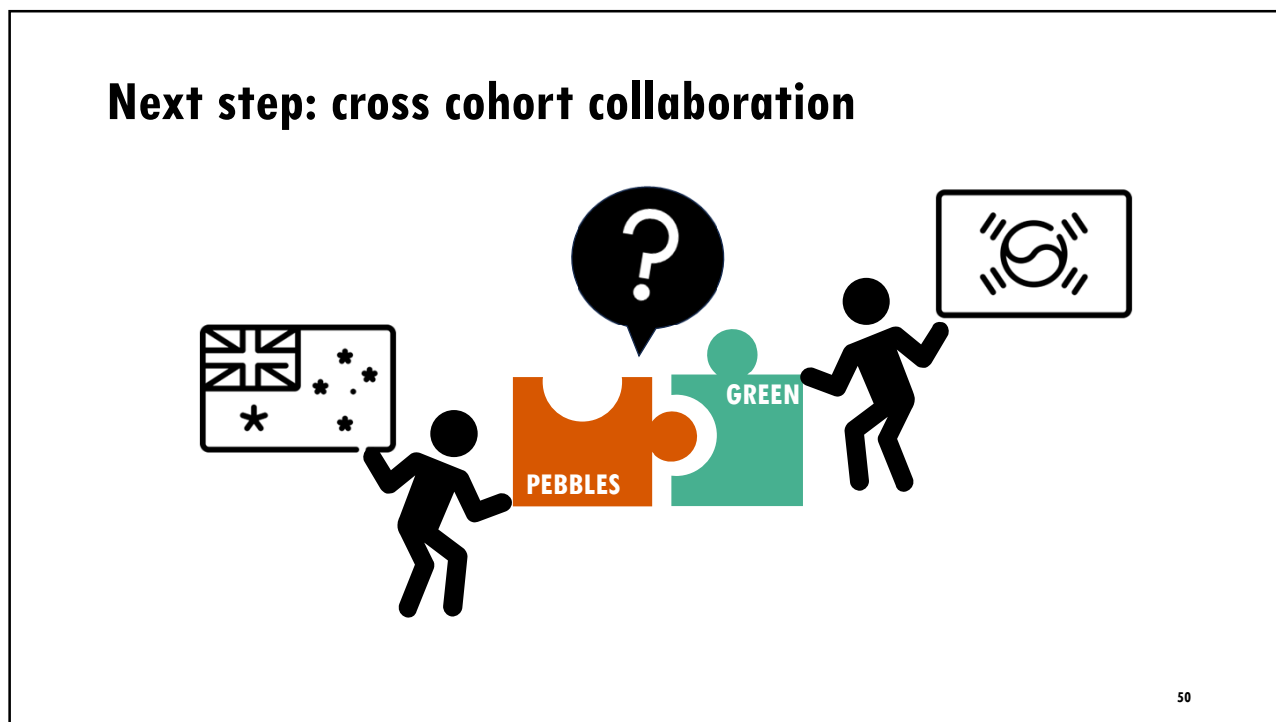


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Acknowledgements



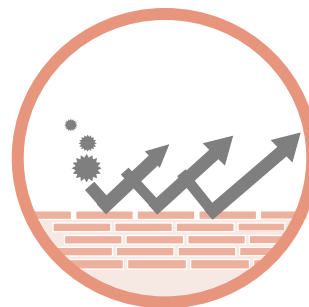
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Thank you

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References

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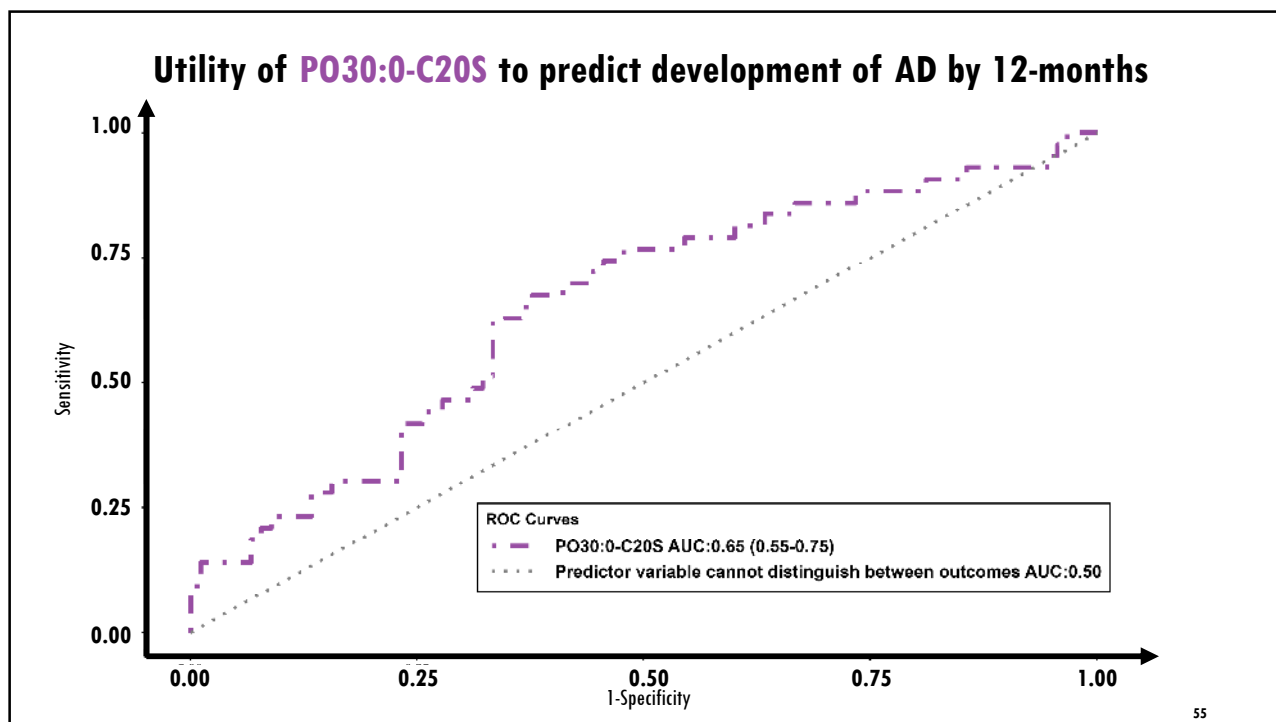
Are skin lipids useful for:



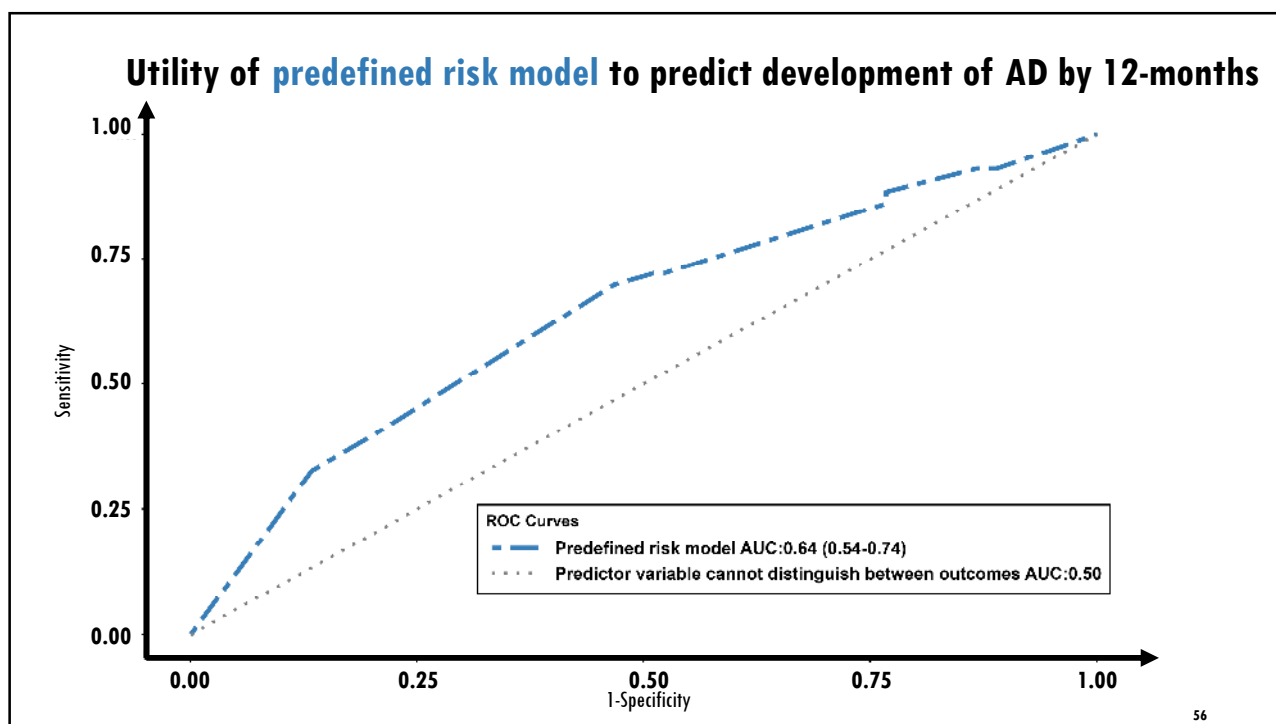
**1.
Early life
screening
program**

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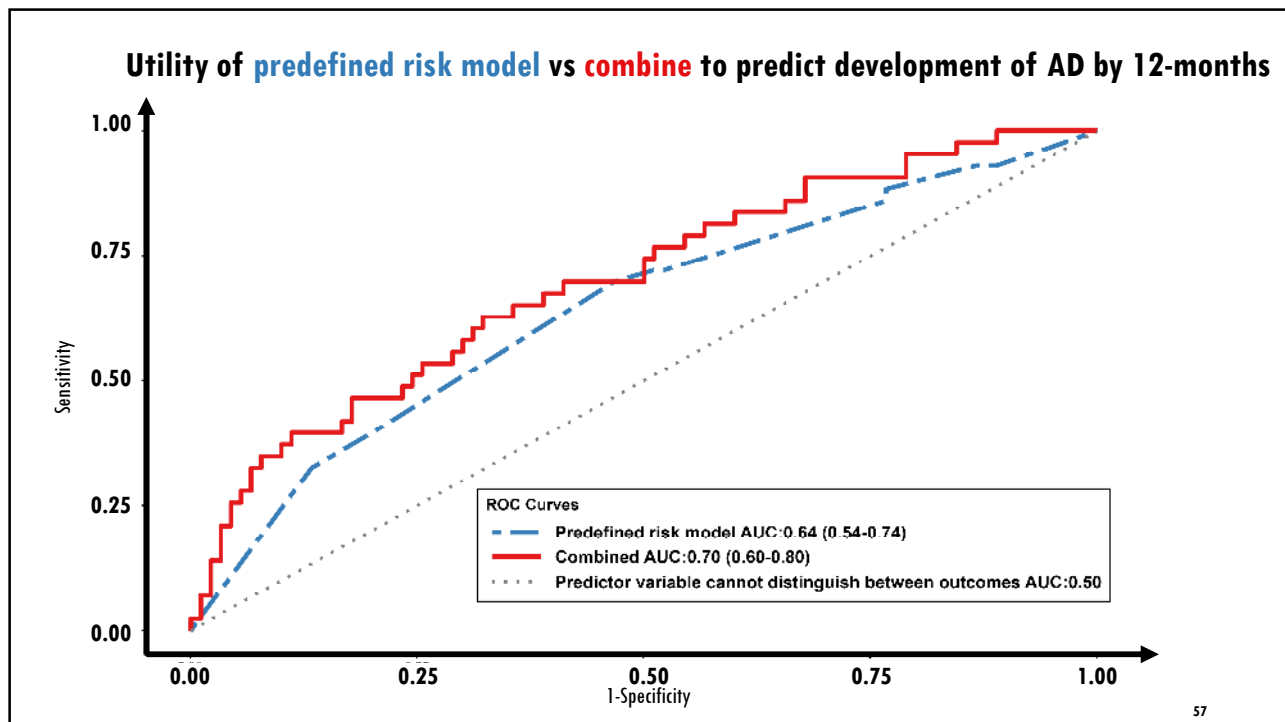
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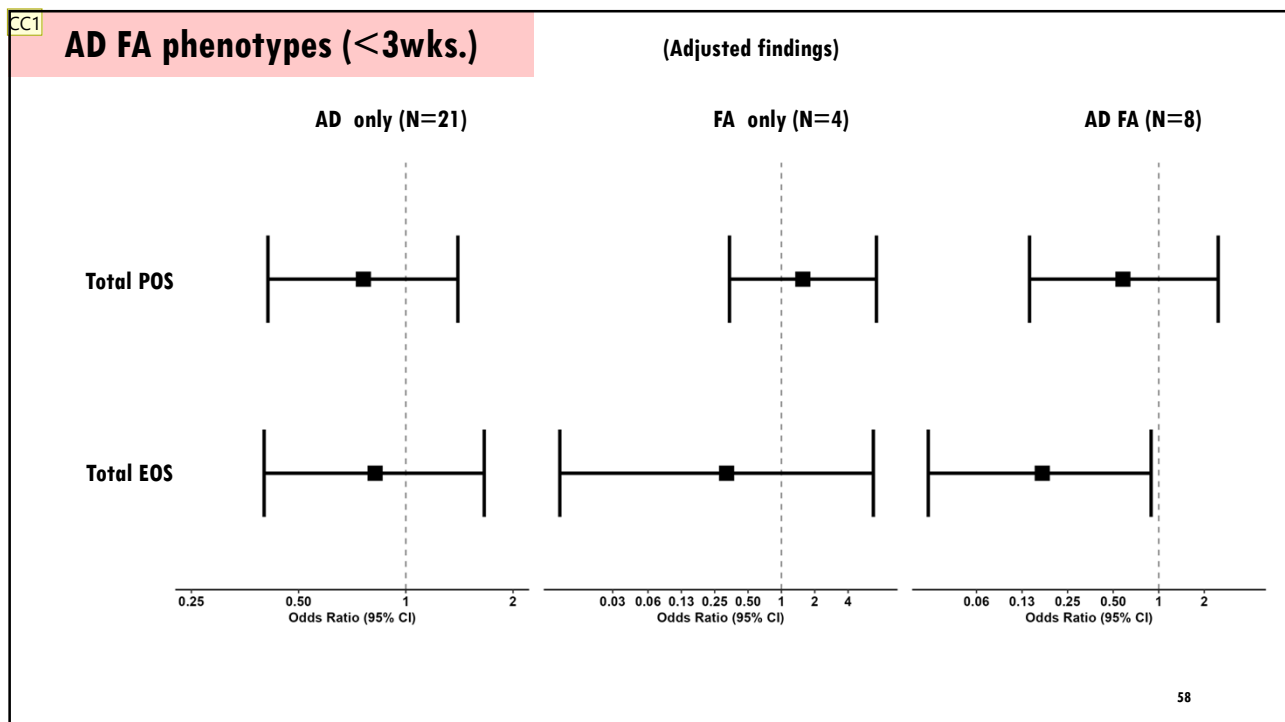
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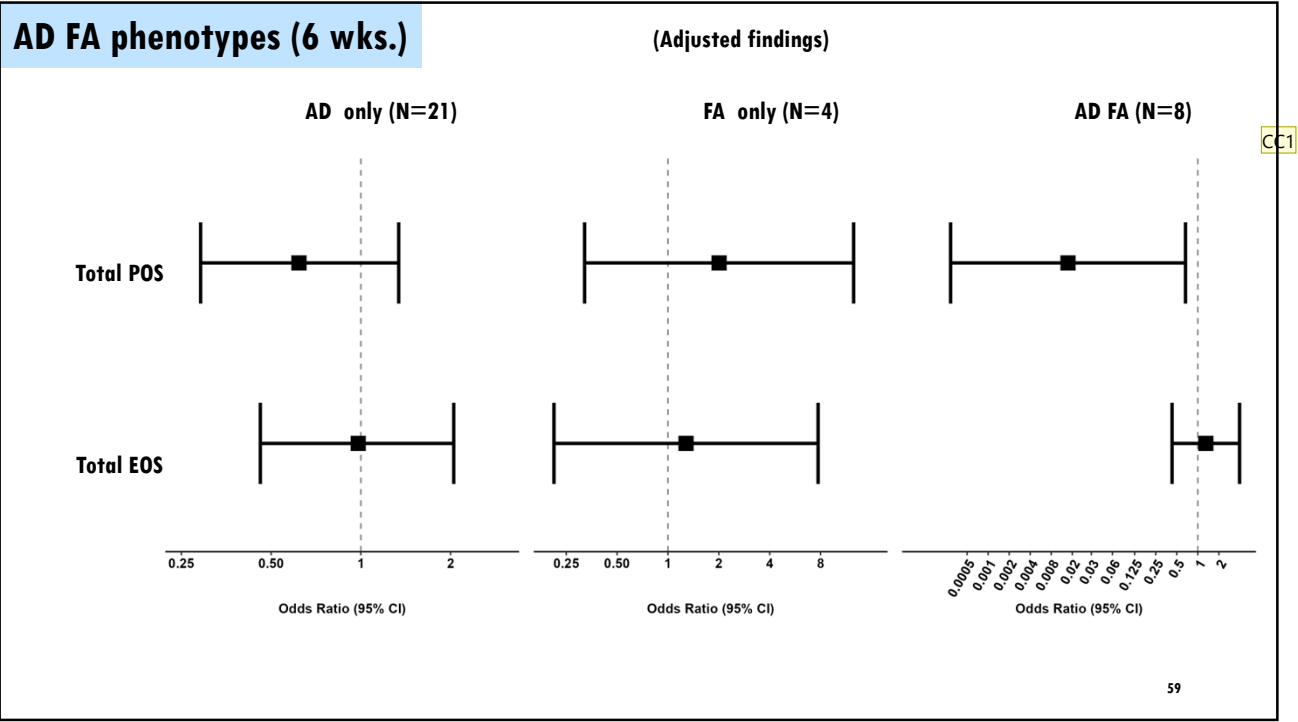
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CC1 Among 99 children,
No ad no fa = 63 children;
Only FA= 4 children
Only AD= 21 children
AD fA=8 children
3 children were excluded because they did not have FA data
Chia-Lun Chang, 2025-10-06T10:19:07.124

CC1 0 Very few fa cases
Chia-Lun Chang, 2025-10-06T10:20:29.466



CC1 The total pos and adfa ci is very wide pos (95% ci)- 0.0139 (0.00029, 0.666); with the small lower 95% ci end, the x axis numbers are tilted

Chia-Lun Chang, 2025-10-06T11:00:41.844

CC1 0 Although wide ci, it is interesting that at baseline, it was eos that was associated with adfa, but then at 6 weeks it was pos, and that eos is the precursor of eos, something happening to the skin in the first week of life?

Do you think it is a better if we have eos on top row then pos in next row?

Chia-Lun Chang, 2025-10-06T21:44:19.343