

## **General approach to the treatment of atopic dermatitis**

### **Mild dermatitis**

- Appropriate general measures
- Emollients
- Topical corticosteroids
- Topical calcineurin inhibitors as second line or where corticosteroids are contraindicated

### **Moderate dermatitis**

- Appropriate general measures
- Emollients
- Moderate potency topical corticosteroids for maintenance
- Potent topical corticosteroids for flares
- Topical calcineurin inhibitors (tacrolimus or pimecrolimus) as maintenance for selected skin areas
- Sedating antihistamines

### **Severe dermatitis**

- Appropriate general measures
- Emollients
- Topical corticosteroids
- Topical calcineurin inhibitors (tacrolimus only) in selected skin areas

### **Acute flares**

- Systemic corticosteroids (short courses)
- Topical corticosteroids in hospital
- Sedating antihistamines
- Thereafter maintenance as for chronic disease

### **Chronic disease**

- UV light
- Non-steroidal systemic drugs: azathioprine, ciclosporin, methotrexate, mycophenolate

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

- Refer to dermatologist / paediatrician / allergist as appropriate
- Potent topical corticosteroids
- Phototherapy (NB-UVB)
- Ciclosporin, Methotrexate, Oral corticosteroids, Azathioprine, Mycophenolate mofetil, IVIG, IFN- $\gamma$
- Psychotherapeutic intervention