Dupilumab Treatment Improves Health-Related Quality of Life in Children Aged 6 Months to 5 Years With Moderate-to-Severe Atopic Dermatitis

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Disclosures

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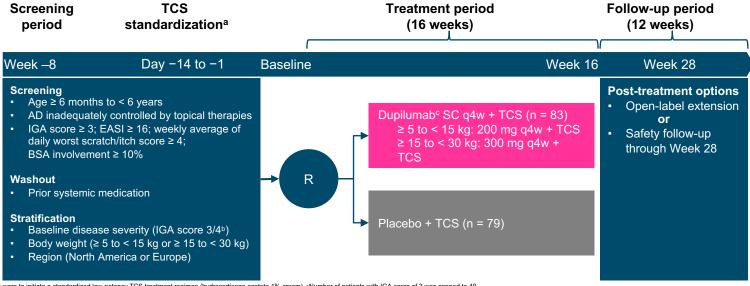
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Methods

Objective: To determine the impact of 16-week dupilumab treatment with concomitant low-potency TCS on HRQoL in children aged 6 months to 5 years with moderate-to-severe AD inadequately controlled with topical therapies and their caregivers

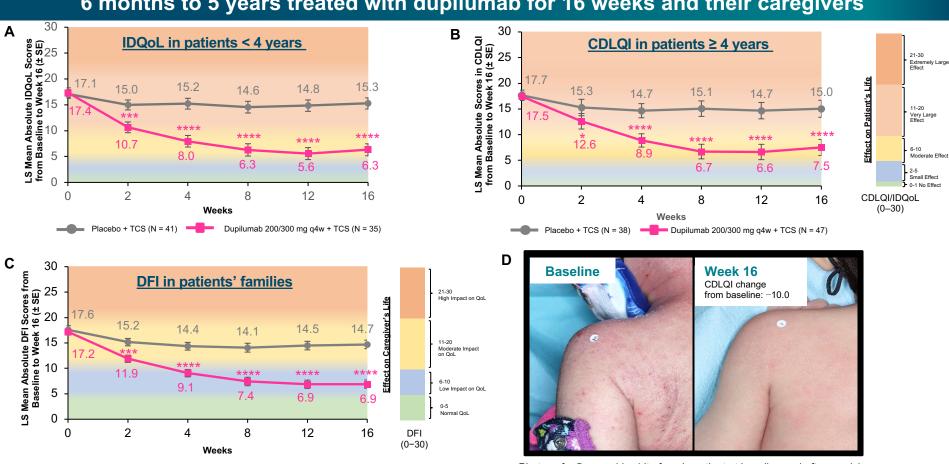
Analysis: Children aged 6 months to 5 years with moderate-to-severe AD inadequately controlled with topical therapies were randomized 1:1 to SC dupilumab q4w (200 mg if baseline weight \geq 5 to < 15 kg, 300 mg if \geq 15 to < 30 kg) or placebo for 16 weeks with concomitant low-potency TCS

LIBERTY AD INFANT/PRE-SCHOOL study design



•Starting on Day –14, all patients were to initiate a standardized low-potency TCS treatment regimen (hydrocordisone acetate 1% cream). •Number of patients with IGA score of 3 was capped to 40. •No loading dose. Weight-tiered doses were assigned by baseline body weight for the duration of the study. AD, atopic dermatitis; BSA, body surface area; EASI, Eczema Area and Severity Index; HRQoL, health-related quality of life; IGA, Investigator's Global Assessment; q4w, every 4 weeks; R, randomization; SC, subcutaneous; TCS, topical corticosteroids.

Rapid and significant improvement in IDQoL, CDLQI, and DFI scores in children aged 6 months to 5 years treated with dupilumab for 16 weeks and their caregivers



Placebo + TCS (N = 79) Dupilumab 200/300 mg q4w + TCS (N = 83)
Photos of a 5-year-old, white female patient at baseline and after receiving 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, representing an LS mean change of 200 mg dupilumab q4w for 16 weeks, represen

Safety and discussion

Dupilumab has demonstrated an acceptable safety profile¹

Discussion

- Dupilumab treatment for 16 weeks with low-potency TCS rapidly and significantly improved HRQoL measures as early as Week 2, with improvements continuing to Week 16
- This significant improvement to HRQoL measures was reflected in the CDLQI, IDQoL, and DFI scores in children aged 6 months to 5 years with moderate-to-severe AD and their caregivers