

Obesity in early childhood is associated with atopic dermatitis later in childhood and adolescence in the United States

Jaya Manjunath, BS¹ and Jonathan I. Silverberg, MD, PhD, MPH^{1,2}

¹Department of Dermatology, George Washington University School of Medicine and Health Sciences, DC.

²Department of Dermatology, Northwestern University Feinberg School of Medicine, Chicago, IL.

Introduction

Atopic dermatitis (AD) is a chronic, inflammatory skin disease affecting approximately 9.6 million U.S. children under the age of 18.1

The identification of modifiable risk factors for AD is important to further our understanding of the prevention and treatment of AD in the pediatric population.

Previous cross-sectional studies demonstrated associations between obesity and AD in childhood.

Few longitudinal studies have examined the temporal relationship between obesity and AD, i.e. does obesity cause AD or vice versa.²

Research Objectives

We investigated the following associations:

- Overweight (≥85th BMI-percentile) or obesity (≥95th BMI-percentile) with AD during childhood overall
- 2. Overweight or obesity at age 5 years and the subsequent development of AD at ages 9 or 15 years, and
- 3. AD at age 5 years and subsequent development of overweight or obesity at ages 9 or 15 years.

Methods

- We used data from the Fragile Families and Child Wellbeing Study, a longitudinal US birth cohort study consisting of 4898 children born in 20 large cities.
- The presence of AD was determined by a positive response to "In the past 12 months, has (child) had eczema or skin allergy?" assessed at the 5, 9 and 15 year follow up surveys.
- Obesity was defined as ≥95th percentile BMI and overweight was defined as ≥85th percentile BMI.
- Statistical analysis was completed using SAS 9.4 (SAS Institute, Cary, NC).
- Multivariable logistic regression models were constructed to assess the association between obesity or overweight and the presence of childhood AD as well as the association between AD at age 5 and being obese and/or overweight later in childhood.

Results

>OEth paragraf	sociations between overwei	A D	Crude OR	P	aOR	P
≥85 th percentile BMI No AD		AD	(95% CI)		(95% CI)	
No	944 (85.2%)	164 (14.8%)	1.00 (ref)		1.00 (ref)	
Yes	467 (80.7%)	112 (19.3%)	1.38 (1.06-1.80)	0.0348	1.38 (1.06-1.80)	0.0348
≥95 th percent	ile BMI		<u>-</u>			
No	1190 (84.5%)	218 (15.5%)	1.00 (ref)		1.00 (ref)	
Yes	221 (79.2%)	58 (20.8%)	1.43 (1.04-1.98)	0.0481	1.43 (1.03-1.97)	0.0481

Multivariable logistic regression models were constructed with ≥85th or ≥95th percentile BMI as the independent variable. History of AD at age 9 or 15 was the binary dependent variable. Those with AD at age 5 were excluded. Covariables included sex and race/ethnicity. Odds Ratios (OR) were estimated.

AD, atopic dermatitis; aOR; adjusted odds ratio; CI, confidence interval; OR, odds ratio.

Bolded values indicate statistical significance.

Table 2. Associations between Atopic Dermatitis at age 5 and overweight or obesity at ages 9 or 15.									
AD	Not Overweight/ Obese	Overweight/Obese	Crude OR (95% CI)	P	aOR (95% CI)	P			
No	1036 (67.4%)	501 (32.6%)	1.00 (ref)		1.00 (ref)				
Yes	193 (64.8%)	105 (35.2%)	1.13 (0.87-1.46)	0.3934	1.11 (0.85-1.44)	0.4430			
	Not Obese	Obese							
No	1490 (81.7%)	333 (18.3%)	1.00 (ref)		1.00 (ref)				
Yes	273 (79.1%)	72 (20.9%)	1.18 (0.89-1.57)	0.3125	1.16 (0.87-1.54)	0.3450			

Multivariable logistic regression models were constructed with history of AD as the independent variable. ≥85th or ≥95th percentile BMI was the was the binary dependent variable. Those with ≥85th or ≥95th percentile BMI at age 5 were excluded. Covariables included sex and race/ethnicity. Odds Ratios (OR) were estimated.

AD, atopic dermatitis; aOR; adjusted odds ratio; CI, confidence interval; OR, odds ratio.

Conclusions

- In conclusion, there was an association between obesity and the presence of AD later in childhood, however AD during early childhood was not associated with the development of obesity later in childhood.
- These results support that the association between obesity and AD is driven by obesity causing AD, rather than AD causing obesity.
- Additional research is necessary to investigate whether weight loss could potentially reduce the risk of AD development in later childhood.

References

- 1. Association NE. Eczema Stats. https://nationaleczema.org/research/eczema-facts/. Published 2021. Accessed May 26, 2021.
- 2. Zhang, A., & Silverberg, J. I. (2015). Association of atopic dermatitis with being overweight and obese: a systematic review and metaanalysis. *Journal of the American Academy of Dermatology*, 72(4), 606-616.