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The impact of moderate-to-severe atopic dermatitis on sleep in adolescent patients from the Adelphi Real World Disease Specific Programme (DSP)™

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OBJECTIVE

- To describe the impact of atopic dermatitis (AD) on sleep in adolescent patients with moderate-to-severe AD, using real-world data from the Adelphi Real World Pediatric Atopic Dermatitis Wave II DSP™.

CONCLUSION

- Approximately half of adolescent patients with moderate-to-severe AD, or their caregivers, reported the patient at least sometimes experienced sleep impairment and sleep-related day-to-day disruption.
- Most (~7/10) adolescents with moderate-to-severe AD and their caregivers reported that the patient recently experienced sleep disturbance and sleep-related impairment.
- Although causation cannot be determined, these results indicate that many adolescents with moderate-to-severe AD may be impacted in their daily life due to sleep disturbance.

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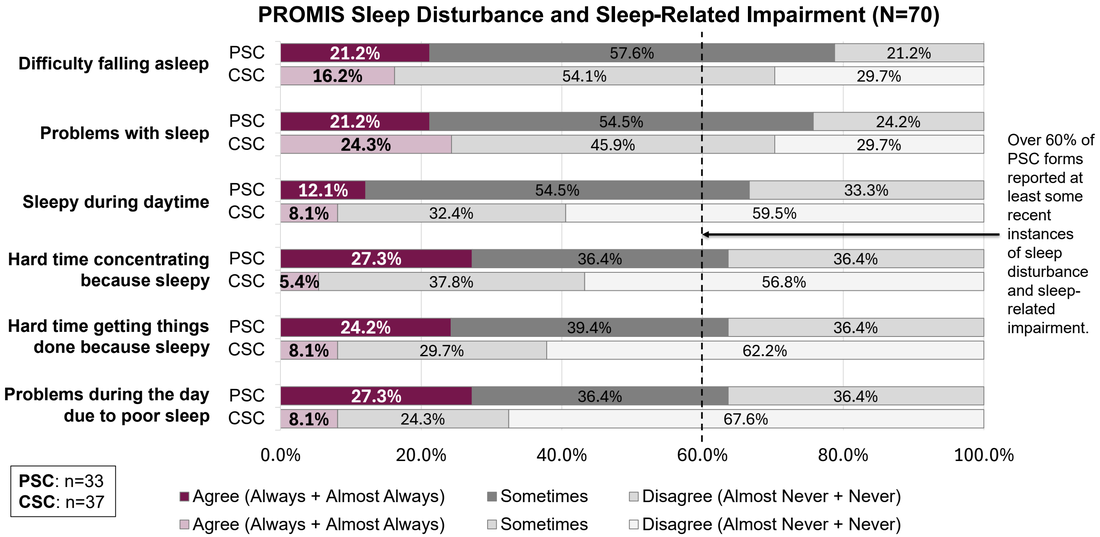
Approximately half of adolescents with moderate-to-severe AD, or their caregivers, reported the patient had recently experienced sleep disturbance and sleep-related impairment.

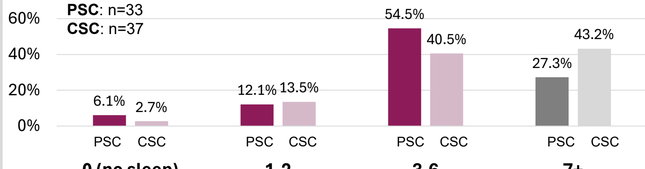


AD, atopic dermatitis; CSC, caregiver self-completed; PROMIS, patient-reported outcomes measurement information system; PSC, patient self-completed.

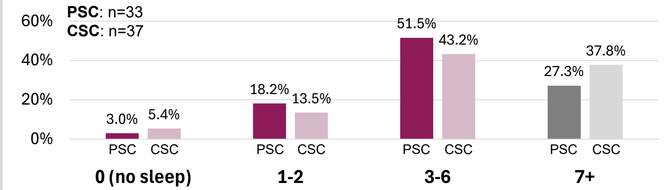
Most (~7/10) patients/caregivers reported at least a moderate impact (scores of 3 to 6) of AD on the patient's recent sleep.

"Thinking of the impact that eczema can have on your/your child's sleep; on a scale from 0 (no sleep) to 10 (perfect sleep). As a result of your/your child's eczema, …"

Patient/caregiver (N=70) response for, "…how was your/your child's sleep last night?"



Patient/caregiver (N=70) response for, "…your/your child's sleep over the last 7 days?"



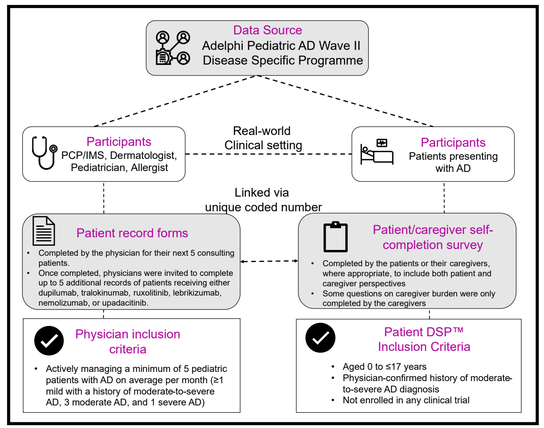
AD, atopic dermatitis; CSC, caregiver self-completed; PSC, patient self-completed. Darker colors represent PSC data while lighter colors represent CSC data; less impacted patients' data are presented in gray.

BACKGROUND

- Atopic dermatitis (AD) is a chronic, inflammatory skin condition characterized by intense itching and eczematous lesions and often begins in early childhood, with 90% of AD patients exhibiting symptoms within the first five years of life[1]
- AD can create a multi-dimensional burden that significantly impairs quality of life (QoL) for both patients and caregivers, particularly through sleep disturbances.
- Disrupted sleep in younger patients may hinder neurodevelopment and is not only distressing for patients but also impacts caregivers, contributing to overall emotional strain and reduced daily functioning; however, real-world data on this impact of adolescent AD remains limited.

STUDY DESIGN

- This study analyzed data from a cross-sectional survey in the 2025 Adelphi Real World (ARW) Pediatric AD Wave II DSP™, conducted in the US with elements of retrospective data collection[2,3,4,5].
- This analysis focused on moderate-to-severe adolescent patients (aged 12-17) with completed PSC/CSC forms (N=70).
- Patients (n=33) (or their caregiver [n=37] on behalf of the patient) voluntarily completed the validated sleep disturbance/impairment items (PROMIS), as well as other questions assessing recent symptom severity and sleep quality.



AD, atopic dermatitis; ARW, Adelphi Real World; CSC, caregiver self-completed; DSP, Disease-Specific Programme; PROMIS, patient-reported outcomes measurement information system; PSC, patient self-completed; US, United States.

AD, atopic dermatitis; PCP, primary care provider. *Patients/caregivers' participation was voluntary, and informed consent was obtained.

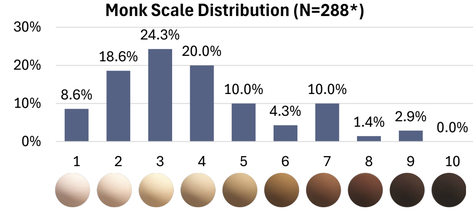
Patient demographics

Adolescents with moderate-to-severe AD (N=70)	
Age (years), mean (SD)	14.9 (1.5)
Female, n (%)	33 (47%)
BMI, mean (SD)	22 (3.6)
Ethnicity, n (%)	
White	43 (61%)
South or Central American Native	9 (13%)
Black, AA, African, or Caribbean	8 (11%)
East or Southeast Asian	6 (9%)
South Asian (Indian subcontinent)	3 (4%)
American Indian, Indigenous American, or Alaska Native	2 (3%)
Time since AD diagnosis (years), mean (SD)	6.1 (5.3)[a]

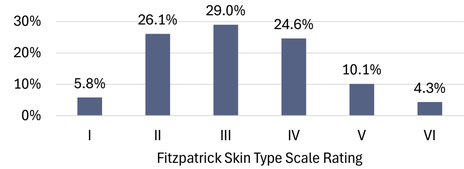
[a]n=46, as the physicians of 24 patients (34%) responded that they did not know. All data in the table is HCP-reported.
AA, African American; AD, atopic dermatitis; BMI, body mass index; n/N, number; SD, standard deviation.

Patient clinical characteristics

Monk Scale Distribution (N=288*)



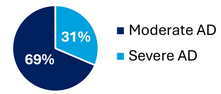
Fitzpatrick Scale Distribution (N=283*)



*Known data from all patients aged ≥12 to 17 years with moderate-to-severe disease (not limited to those with a linked PSC/CSC form).

Baseline disease severity (N=70)

AD severity was defined based on the validated Investigator's Global Assessment of AD (vIGA-AD)



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