

# Effectiveness of different strenghts of topical steroids in children with eczema in general practice.

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Class III corticosteroid is more effective than a class I corticosteroid for treating a moderate flare-up of atopic dermatitis in children.

<b>Ethische beoordeling</b>	Positief advies
<b>Status</b>	Werving nog niet gestart
<b>Type aandoening</b>	-
<b>Onderzoekstype</b>	Interventie onderzoek

## Samenvatting

### ID

NL-OMON21308

### Bron

NTR

### Verkorte titel

The Rotterdam Eczema study

### Aandoening

Atopic dermatitis

### Ondersteuning

**Primaire sponsor:** Erasmus Medical Center

**Overige ondersteuning:** SBOH

### Onderzoeksproduct en/of interventie

### Uitkomstmaten

#### Primaire uitkomstmaten

Primary outcome will be change in subjective disease severity after 24 weeks follow-up in the

trial, measured with Patient-Oriented Eczema Measure (POEM) questionnaire.

## Toelichting onderzoek

### Achtergrond van het onderzoek

#### Rationale:

Atopic dermatitis (AD) or eczema is a chronic, highly pruritic inflammatory skin disease, and is the most common chronic skin disorder in children. Eczema is in the top 10 of highest prevalence disorders in general practice in children up to 18 years

The aim of treatment is to keep the skin condition optimal, prevent flare-ups and treat symptoms as soon as they occur. Treatment is initially started by the general practitioner. According to the recently revised guideline of the Dutch College of General Practitioners (NHG) for AD, a stepwise approach is advocated; when AD is mild to moderate, a mild (class I) to moderate potent (class II) topical corticosteroid (CS) is preferred, while potent (class III) CS is used only when AD is severe. It may be that during a flare up, AD can be best treated intermittent with a potent CS (pulse treatment) in terms of time to recovery, patient satisfaction, amount of CS used, and reconsultations.

#### Objective:

To determine whether a potent topical corticosteroid (CS) is more effective than a mild topical CS in the treatment of children with a moderate flare-up of atopic dermatitis (AD) in primary care on short and long term.

#### Study design:

Prospective cohort study with an embedded open-label randomized controlled trial.

#### Study population:

Patients with the diagnosis AD, aged between 12 weeks and 18 years, who visited the GP for AD or received repeated prescription for AD in previous 12 months.

#### Intervention:

The intervention group will start with a potent CS (class III) at a flare-up of the AD.

#### Main study endpoints:

Changes in subjective disease severity after 24 weeks follow-up in the trial, measured with a recommended and validated questionnaire for patients with AD (POEM).

## Doel van het onderzoek

Class III corticosteroid is more effective than a class I corticosteroid for treating a moderate flare-up of atopic dermatitis in children.

## Onderzoeksopzet

Subjects will be asked to complete a weekly questionnaire (POEM) for 24 weeks.

At baseline, 1, week, 4 weeks and 24 weeks of follow-up Eczema Area and Severity Index (EASI) will be scored.

## Onderzoeksproduct en/of interventie

The intervention group will start with a potent corticosteroid (class III) when having a flare-up of the atopic dermatitis. The GP-guideline group will receive treatment according to the Dutch GP-guideline (start with mild CS class I).

## Contactpersonen

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## Deelname eisen

## **Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)**

In order to be eligible to participate in the cohort study (and possibly be eligible for the trial), a subject must meet all of the following criteria:

- Age >12 weeks and < 18 years
- Diagnosis of eczema (ICPC-code or prescription of topical treatment of eczema) + confirmation of the diagnosis by the GP
- Consultation or repeated prescription in previous 12 months
- Informed consent

In order to be eligible to participate in the trial, a subject must meet all of the following criteria:

- Participation in cohort (see above)
- Flare-up (i.e. need to intensify topical treatment) from patients and/or parents point of view
- TIS-score  $\geq 3$  and  $< 6$

## **Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)**

A potential patient who meets any of the following criteria will be excluded from participation in the cohort study:

- As determined by the GP (e.g. family problems)
- Currently under treatment of a dermatologist
- Language barrier
- No access to internet (necessary to fill in weekly online questionnaire)
- Contra-indications for the study medication:

□ previously side effects with any of the medications

□ hypersensitivity to corticosteroids

A potential patient who meets any of the following criteria will be excluded from participation in the trial:

- Use of CS in 2 weeks before inclusion in trial
- >50% of body affected
- Other skin disorders hampering proper assessment of eczema
- Pregnancy and or breastfeeding
- Contra-indications for the study medication:
  - untreated skin infections caused by a bacterium, virus, fungal, or parasite
  - incurable wounds, ulcerative skin disorders
  - ichthyoses, acne vulgaris, rosacea, juvenile plantar dermatosis, skin atrophy, skin lesions
  - diaper rash
  - perianal and genital itching

## Onderzoeksopzet

### Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Geneesmiddel

### Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-11-2017
Aantal proefpersonen:	150

Type:

Verwachte startdatum

## Ethische beoordeling

Positief advies

Datum:

30-08-2017

Soort:

Eerste indiening

## Registraties

### Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 55693

Bron: ToetsingOnline

Titel:

### Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

### In overige registers

Register	ID
NTR-new	NL6492
NTR-old	NTR6679
CCMO	NL61504.078.17
OMON	NL-OMON55693

## Resultaten