



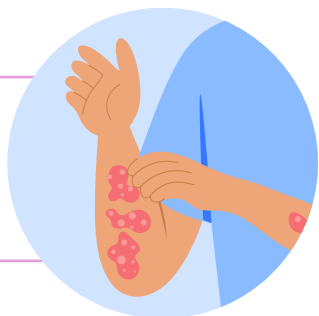
# The Future of Atopic Dermatitis Treatment: The Latest Patient Outcomes

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The medicinal product mentioned in this infographic, Adtralza ▼ (tralokinumab), is subject to additional monitoring

## What is AD?

AD is a chronic, **inflammatory skin disease** characterised by **pruritus** and **eczematous lesions**, which can affect **multiple body areas**.<sup>1,2</sup>



**70%**

Over 70% of patients with AD have H&N involvement<sup>2</sup>



The impact of AD on QoL varies by which body areas are affected, with the **H&N** involvement causing the **greatest** social, psychological, and **disease burden**.<sup>3,4</sup>

For many individuals with AD, the disease can be controlled with topical treatments; however, most people with moderate-to-severe AD require systemic therapy to improve disease control and QoL.<sup>1,2</sup>



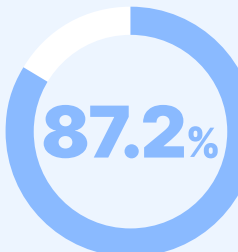
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## Biologics

Biologics for AD, such as dupilumab, tralokinumab, and lebrikizumab, are **immunomodulating target-specific drugs** as they target IL-4 and/or IL-13 to modulate Type 2 inflammation.<sup>10</sup>

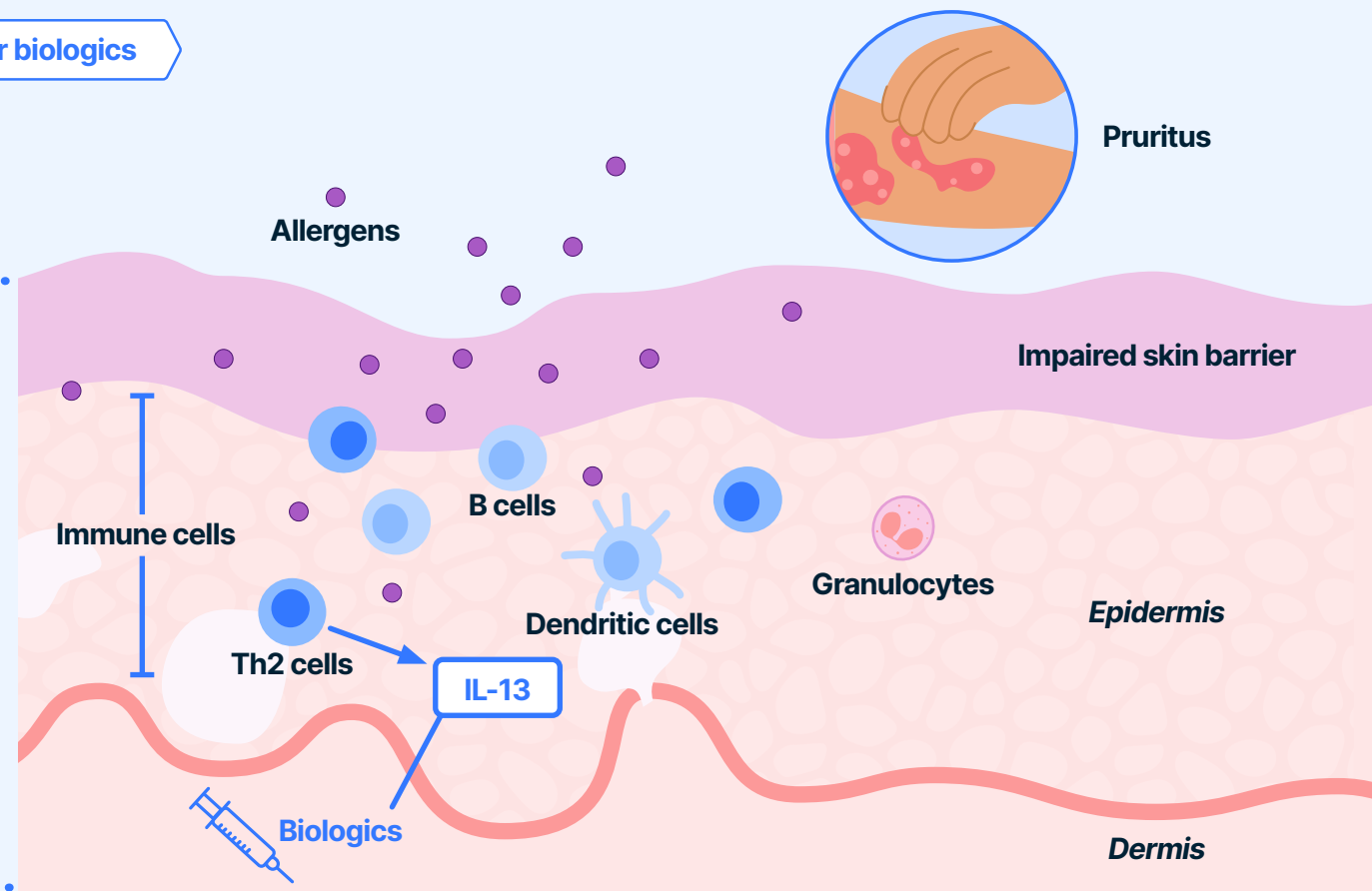
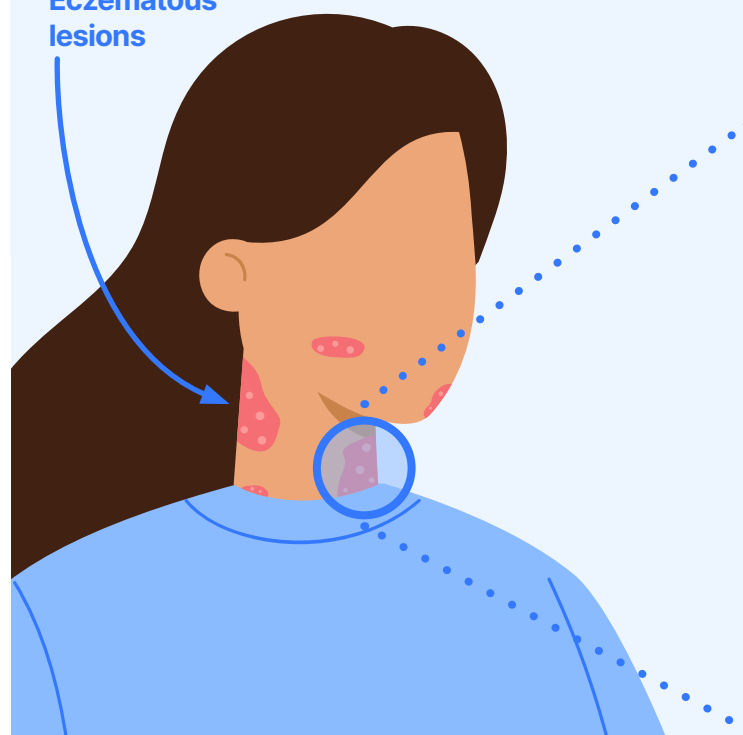
When used in combination with topical corticosteroids, tralokinumab has shown a **lasting efficacy and safety profile** in Phase II and III clinical trials,<sup>11</sup> including 6-years follow-up data in the ECZTEND trial.<sup>12</sup>

Long-term data demonstrate that **tralokinumab provides sustained improvements** in H&N AD, with **87.2%** of patients reporting Eczema Area and Severity Index  $\leq 1$  when treated up to 4 years, **leading to improved QoL by reducing discomfort and self-consciousness**.<sup>13</sup>



Understand more about **tralokinumab** and other biologics

### Eczematous lesions



**Pruritus**

**Impaired skin barrier**

**Epidermis**

**Dermis**

## Treatment Landscape

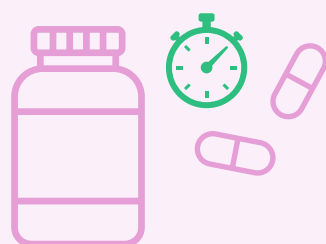
### Conventional therapies

Conventional therapies like corticosteroids, cyclosporine, and methotrexate remain widely used due to cost and accessibility, yet all carry long-term adverse events risks.<sup>5,6</sup>



### Small molecule JAK inhibitors

Small molecule JAK inhibitors offer rapid symptom relief but carry infection and cardiovascular risks. Due to their short half-life, missed doses can lead to flare-ups.<sup>7,8</sup>



### Biologics

Biologics like dupilumab, lebrikizumab, and tralokinumab are effective, well-tolerated treatments for AD.<sup>9</sup> Tralokinumab uniquely demonstrates consistent efficacy in the head-and-neck region, supported by both clinical trials and real-world data.<sup>9</sup>



## Future and Conclusion

The AD treatment landscape is rapidly evolving, with new biologics emerging to target diverse pathways beyond Type 2 inflammation, addressing the need for safer, more effective options for a complex and varied disease.

As awareness grows, systemic biologics are poised to play a larger role in AD treatment, even in early stages, offering long-term control, reducing disease burden, and improving QoL from a young age.



Prescribing information can be found [here](#)

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## Abbreviations:

AD: atopic dermatitis; HCP: healthcare professional; H&N: head and neck; JAK: Janus kinase; QoL: quality of life.

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