

# Living review compares treatments for atopic dermatitis

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Abrocitinib, 200 mg daily, and upadacitinib, 30 mg daily, seem to be

slightly better than dupilumab for atopic dermatitis, according to a living review published online March 16 in *JAMA Dermatology*.

Aaron M. Drucker, M.D., from the University of Toronto, and colleagues compared reported measures of efficacy and assessment of safety in clinical trials of systemic [atopic dermatitis](#) treatments as part of a living [systematic review](#) and meta-analysis. Twenty-one new studies were added since October 2019, for a total of 60 studies, involving 16,579 [patients](#).

The researchers found that in terms of the Eczema Area and Severity Index (EASI), up to 16 weeks of treatment in adults with abrocitinib, 200 mg daily, and upadacitinib, 30 mg daily, were associated with slightly greater reductions than dupilumab, 600 mg then 300 mg every two weeks (mean differences, 2.2 and 2.7, respectively). Compared with dupilumab, there were slightly smaller reductions seen in EASI with abrocitinib, 100 mg daily, baricitinib, 4 mg daily, baricitinib, 2 mg daily, and tralokinumab, 600 mg then 300 mg every two weeks (mean differences, -2.1, -3.2, -5.2, and -3.5, respectively). Little or no difference was seen between upadacitinib, 15 mg daily, and dupilumab. For Patient Oriented Eczema Measure, Dermatology Life Quality Index, and Peak Pruritus Numeric Rating Scales, the pattern of results was similar.

"Our results may aid shared decision making between [clinicians](#) and patients seeking to understand the relative merits of different treatment options for moderate-to-severe atopic dermatitis," the authors write.

Several authors disclosed financial ties to the biopharmaceutical and health care industries.

**More information:** Aaron M. Drucker et al, Systemic Immunomodulatory Treatments for Atopic Dermatitis, *JAMA*

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