

# FINDING THE TREATMENT OPTION THAT'S RIGHT FOR YOU

There are many different treatment options available for AD, be it oral treatments, creams and injections for the more moderate-to-severe cases.

Each treatment option works in a different way. This includes help with managing your symptoms and controlling inflammation. Finding the right treatment option for you will be an important conversation you can have with your doctor.

Except for hydrating creams and non-drug products, which can be found on the shelf at your local pharmacy, all the treatments listed on the following pages require a prescription from your healthcare professional.

Remember everybody responds to treatments differently – work with your doctor to find the right treatment, or combination of treatments, for your specific needs.

In this guide, we'll walk through the different types of treatments there are for AD. That way, you've got the knowledge to confidently discuss them with your doctor and get one step closer to controlling your AD.



# TOPICAL TREATMENTS

Topical treatments are applied directly onto the skin's surface to manage the signs and symptoms of AD and can be used alongside other treatments or on their own. These include hydrating creams, topical corticosteroids, topical calcineurin inhibitors, topical phosphodiesterase 4 inhibitors and topical combination products.

## Hydrating creams

(e.g., Gold Bond® and Aveeno®)

Hydrating creams are products that contain moisturizing ingredients, such as ceramides or colloidal oatmeal, to help improve the skin's moisture barrier and increase skin hydration. Look for creams that have the Eczema Society of Canada's "Seal of Acceptance" as they are ones that are free of irritating ingredients and perfumes.

Hydrating creams are cosmetics that are available over-the-counter.

### How do they work?

Depending on the ingredients that they contain, hydrating creams work in a variety of ways to relieve dryness. Some creams work by improving the skin's moisture barrier and increasing skin hydration.

### How often do you use them?

Hydrating creams should be used after every bath or shower to help seal the moisture in your skin. They can also be applied several times throughout the day.

### How are they administered?

Hydrating creams should be applied directly to the affected area(s) while your skin is still damp. This will trap moisture in the skin.

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## Topical corticosteroids (TCS)

(e.g., clobetasol propionate, betamethasone dipropionate, mometasone furoate, hydrocortisone)

Topical corticosteroids (TCS) represent a broad range of medicines that help relieve the swelling, itching and redness of AD. Some variations of TCS can be used in both children and adults, while others are specifically for adult use only.

The need for a prescription depends on the type of TCS – some are available over-the-counter (OTC), while others require a prescription from your healthcare professional.

### How do they work?

Corticosteroids typically work by reducing inflammation of the skin (redness and swelling) and itching.

### How often do you use them?

TCS are usually applied one to four times per day. The duration of treatment can vary anywhere from 5 days to up to 3 weeks, depending on the type of TCS and area of skin being treated.

### How are they administered?

TCS are available in a number of different formulations, including foam, cream, ointment, lotion and gel. In all cases, they should be applied directly to the affected area(s) of your skin.

### What are the possible side effects?

TCS may cause side effects such as reactions at the application site, skin thinning or softening, burning, tingling, stinging, itching, irritation, dryness, cracked skin, pain, itchy rash (urticaria), inflammation of hair follicles (folliculitis), unwanted hair (hypertrichosis), acne-like reactions, skin colour changes (hypopigmentation) and allergic contact dermatitis.

These are not all the possible side effects you may feel. Read your Product Insert for a complete list.

## Topical calcineurin inhibitors (TCIs)

(e.g., tacrolimus, pimecrolimus)

Topical calcineurin inhibitors (TCIs) are used to treat AD in both children (2 years and older) and adults after other therapies have been shown to be ineffective or unsuitable.

TCIs require a prescription from your healthcare professional.

### How do they work?

The exact mechanism of TCIs is unknown, but they have been shown to help control inflammation, itch or redness associated with AD.

### How often do you use them?

TCIs are generally applied twice daily, for example, once in the morning and again in the evening.

They are used for short or intermittent long periods of treatment. Once your signs and symptoms resolve, you should stop taking TCI treatment and be instructed by your doctor about what to do if symptoms recur.

### How are they administered?

TCIs are available in both cream and ointment formats. As such, they should be applied directly to the affected area(s) of your skin.

### What are the possible side effects?

TCIs may cause side effects such as stinging, a burning feeling, a sensation of warmth at the application site or itching of the skin that is being treated.

These are not all the possible side effects you may feel. Read your Product Insert for a complete list.

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## Topical phosphodiesterase 4 (PDE4) inhibitors

(e.g., crisaborole)

Topical PDE4 inhibitors are non-steroid medicines that are applied to the skin to treat both children (3 months and older) and adults with mild to moderate AD.

This type of treatment requires a prescription from your healthcare professional.

### How do they work?

The exact way these products work is unknown, but it is thought that PDE4 inhibitors work by reducing the amount of substances in your body that trigger the rash and itchiness caused by eczema.

### How often do you use them?

Topical PDE4 inhibitors are usually applied to the affected areas twice daily, however your healthcare professional will determine what is appropriate based on your medical condition and response to the drug. Never use any more or less of the drug than what your healthcare professional says.

### How are they administered?

This type of medicine is typically available as an ointment and should be applied directly on the affected area(s) of your skin.

### What are the possible side effects?

Topical PDE4 inhibitors may cause side effects such as pain on the area where you applied the medicine, such as burning or stinging.

These are not all the possible side effects you may feel. Read your Product Insert for a complete list.

## Topical combination products

(e.g., fusidic acid/hydrocortisone acetate, flumethasone pivalate/clioquinol)

Topical combination products are creams used to treat AD, in which skin is red, swollen, itchy and infected by germs (bacteria). They can be used in both children (over 2 years) and adults.

This type of therapy usually requires a prescription from your healthcare professional.

### How do they work?

Topical combination products combine two types of medicines: a corticosteroid with either an antibiotic or an antibacterial/antifungal ingredient. These medicines work together in different ways to both kill the bacteria and reduce the swelling, redness, pain and itchiness in the skin.

It's important to remember that these therapies only work on bacterial or fungal infections. They do not treat viral infections.

### How often do you use them?

Topical combination products are generally applied up to three times daily for approximately one to two weeks, depending on the treatment prescribed.

### How are they administered?

This type of medicine is typically available as a cream and should be applied directly on the affected area(s) of your skin.

### What are the possible side effects?

Topical combination products may cause side effects such as redness, itching, burning or irritation in the area where the medication is used, various types of skin rashes (dermatitis) in the area where the medication is used, thinning skin, stretch marks or surface veins, skin redness, lightening of your skin colour, changes in the growth of your body hair, excessive sweating or other signs not present before using these medications.

These are not all the possible side effects you may feel. Read your Product Insert for a complete list.



## NON-TOPICAL TREATMENTS

If topical treatments alone aren't enough to manage the signs and symptoms of AD, a dermatologist may prescribe a treatment beyond topicals to help you control the condition. This could be an immunomodulator, an immunosuppressant or an oral steroid, depending on factors such as age and the severity of AD.

Some of these treatments target the immune system and work from within the body to reduce the inflammation associated with AD. They are either taken as a pill or an injection.

## Immunomodulators

(e.g., dupilumab, tralokinumab, lebrikizumab)

Immunomodulators are a type of treatment that your doctor may choose to prescribe in combination with another therapy (e.g., topical corticosteroids). Immunomodulators for moderate-to-severe AD are injectable medicines.

Immunomodulators medicines require a prescription from your healthcare professional.

### **How do they work?**

Immunomodulators for AD are antibodies (a type of specialized protein) that block the action of key inflammatory proteins involved in AD. Certain types of proteins in your immune system, called “IL-4” and “IL-13”, play a major role in the symptoms of AD. Immunomodulator therapies for AD block the action of those proteins, which helps reduce itch and improve the condition of your skin.

### **How often do you take them?**

Immunomodulators for AD are generally injected once every 2–4 weeks. Be sure to follow directions and take any immunomodulator medicine exactly as your healthcare professional has prescribed.

### **How are they administered?**

Immunomodulators for AD are given via an injection under the skin (subcutaneous use), generally in your thigh or stomach area. You can use the upper arm if somebody else gives you the injection.

Once trained, some patients choose to inject themselves at home, while others prefer to have somebody else give them the injection.

### **What are the possible side effects?**

Immunomodulators may cause side effects such as upper respiratory tract infections (i.e., common cold and sore throat), allergic reactions (fever, feeling ill, swollen lymph nodes, hives, skin rash, skin or eyelid itching and joint pain), injection site reactions, eye and eyelid inflammation including redness, swelling, itching and dryness, eye pain or change in vision, eye infections, high amount of a certain white blood cell (eosinophilia), trouble sleeping, gastritis, joint pain, headache, facial rash or redness, parasitic helminth infections, oral herpes (cold sores), and herpes zoster (shingles).

These are not all the possible side effects you may feel. Read your Product Insert for a complete list.

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## **Immunosuppressants**

(e.g., upadacitinib, abrocitinib)

Your doctor may choose to prescribe an immunosuppressant if other medications aren’t an option for you, or if they aren’t controlling your AD symptoms. Immunosuppressants for moderate-to-severe AD are oral medicines (i.e., taken by mouth) and may be used with or without topical corticosteroids.

Immunosuppressants require a prescription from your healthcare professional.

### **How do they work?**

Immunosuppressants interfere with immune signals in the body to help lower inflammation. Immunosuppressants lower the activity of an enzyme in your body called JAK, which stands for “Janus kinase”. JAK normally helps to turn on your immune system when you need it. However, if it’s too active, it can lead to inflammation.

In people with AD who have inflammation, immunosuppressants can improve the condition of the skin and reduce itching, flares, and overall symptoms of AD.

### **How often do you use them?**

Immunosuppressants are taken daily at about the same time each day.

### **How are they administered?**

Immunosuppressants come in the form of tablets and are taken by mouth.

You may need blood tests before you start taking an immunosuppressant. These tests may be repeated to help your healthcare professional know how the medication is affecting your blood and liver.

### **What are the possible side effects?**

Immunosuppressants may cause side effects such as: throat and nose infections, cough, bronchitis, pneumonia, headache, dizziness, nausea, vomiting, cold sores, infections, herpes zoster (shingles), back pain, acne, weight gain, inflammation of the hair follicles, flu (influenza), pain in your belly, fatigue (feeling unusually tired and weak), and allergic reactions (trouble breathing, chest tightness, wheezing, severe dizziness or light-headedness, hives, or swelling of the lips, tongue or throat). Immunosuppressants may also cause abnormal blood test results.

Serious warnings and precautions for immunosuppressants include increased risk for developing serious infections that may lead to hospitalization or death; lymphoma, skin cancer and other cancers; blood clots; and major heart-related problems like heart attack or stroke.

These are not all the possible side effects you may experience. Read your Product Insert for a complete list.

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## Oral steroids

(e.g., prednisone, prednisolone)

Oral corticosteroids are used to treat numerous conditions, including AD.

Oral steroids require a prescription from your healthcare professional.

### How do they work?

Corticosteroids decrease your body's reaction to some diseases and reduce symptoms of inflammation (e.g., redness and swelling).

### How often do you take them?

Your healthcare professional will determine the appropriate dose and dosing frequency based on your condition. When your AD has improved, your doctor will gradually reduce your dose. Be sure to follow your healthcare professional's guidance when tapering to reduce the risk of side effects.

### How are they administered?

Oral steroids are tablets that should be taken orally (by mouth).

### What are the possible side effects?

Oral steroids may cause side effects such as increased appetite, weight gain, bloating, change in taste, abnormal fat deposits, nausea, vomiting, diarrhea, abdominal pain, indigestion, hiccups, thinning hair, unusual hair growth, feeling of general discomfort or uneasiness, dizziness, forgetfulness, confusion, fatigue, irritability, euphoria (intense feelings of well-being, elation, happiness, excitement and joy), change in strength and reflexes, rounder face, increased sweating, headache, increased or decreased motility and number of sperm, and skin problems. These medicines may also hide symptoms of infections, may cause latent infections to become active, and may induce infections by normally inoffensive organisms due to lowered body resistance.

These are not all the possible side effects you may feel. Read your Product Insert for a complete list.

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## Non-drug products

There are also non-drug products that may be used to help prevent dryness. Look for these products on the shelf at your local pharmacy.