### January 2021 to March 2021

Title	Publication	Date	Overview
Wash, dry, repeat: protecting your skin this winter	Nursing Standard, Vol. 36, No. 2, pages 58-59.	February	Article discuses how with PPE and COVID-19 infection prevention measures already taking their toll on nurses' skin, taking some extra steps can help boost protection for the skin during the colder months. The author recommends increasing the frequency of application of moisturisers and emollients, and considering using a richer, thicker type to help protect and prevent dry skin. It is suggested that switching to a product that contains a combination of a blend of humectants and emollients (including fatty acids, ceramides and cholesterols), can help to put back what the skin is lacking and support the skin barrier. Other recommendations include limiting contact with harsh chemicals and using warm water, rather than hot water, when hand-washing. Also, it suggests that whilst the alcohol gel supplied in healthcare environments usually has emollients added to help protect skin, it is recommended nurses strike a balance between hand-washing and using alcohol gel.
Atopic dermatitis in children: when topical steroid treatment 'does not work'	The BMJ, Vol. 372, No. 8281, (Article n297), pages 328-333.	27 February	This CPD article explores atopic dermatitis (AD) in children and suggests that emollients are the essential treatment for acute flare and for maintenance, with topical corticosteroids (TCS) continuing to be the first-line pharmacological treatment. It discusses how many other conditions mimic AD in children, so any diagnosis warrants frequent review to assess for treatment response, especially if the skin lesions look atypical. When considering a patient's lack of response to TCS, it recommends exploring how they are being used (quantity, frequency, duration of application), the appropriateness of steroid potency prescribed, the ongoing use of moisturisers, the presence of other skin infections, and potential allergen exposure.
The global burden of atopic dermatitis: lessons from the Global Burden of Disease Study 1990–2017	British Journal of Dermatology, Vol. 184, No. 2, pages 304-309.	February	Data from the Global Burden of Disease Study suggests atopic dermatitis (AD) ranks 15th among all non-fatal diseases and has the highest disease burden among skin diseases, as measured by disability-adjusted life-years. The burden of AD has remained stable between 1990 and 2017, with the highest prevalence rate seen during early childhood and a second rise from middle age.

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Addressing challenges associated with long-term topical treatment and benefits of proactive management in patients with psoriasis	Journal of the European Academy of Dermatology & Venereology, Vol. 35, No. 1, (Suppl. 1), pages 35-41.	January	Article discusses how the majority of patients with psoriasis vulgaris (chronic plaque psoriasis) can be treated successfully with short-term topical therapies. However, it suggests that long-term management of psoriasis with topicals is challenging and tends to take a reactive approach to disease relapse, rather than a proactive approach aimed at maintaining disease remission. The authors suggest that patients are often dissatisfied with the delay in treatment response and inconvenience of applying topical treatments, and therefore frequently discontinue treatment leading to poor outcomes. Relapse is said to be common, particularly with reactive management, with some patients finding that their disease at relapse may be worse than their initial symptoms, thus having a detrimental effect on patient quality of life. The article also discusses the range of topical therapies available for the treatment of psoriasis, including emollients, salicylic acid and corticosteroids. It examines each therapy in turn, looking at formulation, patient acceptance, efficacy and adverse events.
COVID-19 and the skin: a focused review	Dermatology in Practice, Vol. 27, No. 1, pages 4-6.	Spring	Article discusses how the challenges presented during the COVID-19 pandemic have affected all aspects of healthcare and clinical medicine. It examines how the skin can be considered a window to the internal complications caused by SARS-CoV-2 infection, leading to specific cutaneous manifestations that may precede other symptoms and signs, aiding in the early diagnosis and management of infection. It suggests that studies have also shown that COVID-19 can exacerbate preexisting dermatological diseases such as psoriasis, acne, rosacea, atopic dermatitis and seborrhoeic dermatitis. The article also discusses 'International Dermatologists Fighting Coronavirus Together', an international platform aimed at providing free knowledge access and sharing on COVID-19 and the skin. The platform involves more than 700 physicians from over 20 countries and will host series of open access webinars devoted to COVID-19 and the skin.

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Use of telemedicine for ichthyosis: patient advocacy group as conduit to expert physician advice	Pediatric Dermatology, Vol. 38, No. 1, pages 137-142.	January/ February	A study investigating the effectivess of a telemedicine service for patients and their families with keratinising disorders found that it showed meaningful success. The Foundation for Ichthyosis and Related Skin Types (FIRST) Tele-Ichthyosis has been operating since 2009 and as part of the study surveys were sent electronically to all users of the service to assess their experiences. 88 geographically diverse cases were reviewed showing increased use over time, by various specialists for patients of all ages. 66% of cases were definitively ichthyosis and most submitters queried on diagnosis (47%) or treatment (72%). Most submitters described the service as easy to use (66.6%) and advice as timely (61.1%), clear (66.6%), and beneficial (61.1%). The authors suggest this report highlights how a rare-disease patient advocacy group successfully supports physician collaboration and patient outcomes through secure and efficient telemedicine.
Common but crushing: how skin conditions can affect mental health	Nursing Standard, Vol. 36, No. 2, pages 51-54.	February	Article explores the mental health impact of living with skin disease and shares the results of a survey undertaken by the All-Party Parliamentary Group on Skin (APPG). Among 544 patients with skin disease surveyed by the APPG, almost all (98%) reported that their condition affected their emotional and psychological well-being. Experiences of isolation, embarrassment, shame, depression and anxiety appear to be commonplace, along with stigmatisation, discrimination and a lack of social acceptance. More than 5% of respondents reported having had suicidal thoughts linked to their skin condition. The article gives advice for healthcare professionals on how to offer mental health support to patients. It also shares a case study of a family with two young boys with eczema, and the huge impact this experience has had on the mother's mental health, as well as that of her sons. The APPG report suggests psychodermatology training and learning opportunities for nurses, some examples of which are listed in the article.

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Pediatric allergic contact dermatitis. Part I: clinical features and common contact allergens in children	Journal of the American Academy of Dermatology, Vol. 84, No. 2, pages 235-244.	February	Article describes the most common clinical presentations of allergic contact dermatitis (ACD) in children and identifies paediatric patients who are appropriate for patch testing. It also discusses current trends in ACD, recognising the significant negative impact it has on the quality of life of children. In addition, it also names and discusses the most common allergens causing ACD in children including nickel, propylene glycol and lanolin.
A helping hand	Dermatology in Practice, Vol. 27, No. 1, pages 22-23.	Spring	Article discusses how new research by the Changing Faces charity and ChildWise research agency suggests that young people with skin conditions urgently need better support services. A significant number of people referred to the charity's wellbeing service have skin conditions that affect their appearance, including eczema, ichthyosis and vitiligo. The article suggests that when children access support from Changing Faces it can be transformational. One such case is a 12 year old boy with Bullous Ichthyosiform Erythroderma who received support from the charity following upsetting experiences at his school. The boy has to use daily ointments and creams and wear dressings to stop his skin from getting infections. He also has to bathe twice a day (sometimes more) for up to an hour and a half at a time.
Psoriasis flares following systemic glucocorticoid exposure in patients with a history of psoriasis	JAMA Dermatology, Vol. 157, No. 2, pages 198-201.	February	The results of a retrospective cohort study suggest that systemic steroids may be much less likely to trigger severe flares in patients with psoriasis than what is traditionally thaught in dermatology. Among 1,970 patients with a diagnosis of psoriasis before receiving systemic corticosteroids, a 1.42% (95% CI, 0.72%-2.44%) psoriasis flare rate of any type was identified when prescribed their first course of systemic corticosteroids. Further stratification identified only one severe flare (erythroderma) among all flares reported, with no pustular psoriasis flares identified (0.07%; 95%CI, 0.00%-0.26%). The authors conclude that the results suggest that psoriasis flare rates for patients taking or finishing systemic corticosteroid courses is very low and predominantly associated with mild flaring and how strict avoidance of systemic corticosteroids in patients with psoriasis may be unnecessary.

