

# IMPACT OF ATOPIC ECZEMA ON LIFE CHOICES AND DESTINY: FINDINGS FROM THE “SCARS OF LIFE” PROJECT.



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## INTRODUCTION

Atopic eczema [AE], is a chronic inflammatory skin disorder affecting millions of people worldwide. Atopic eczema can appear in adulthood but is more common in childhood and adolescence. Because skin is the largest and most visible organ, atopic eczema can have a profound and lasting impact on the course of a person's life, a subtle or significant impact on the choices one’s can face in life. Frustration, resentment, discouragement, stigmatization or resilience are feelings that can impact people with skin diseases depending on each individual personality.

## MATERIAL & METHODS

We mobilized 30,801 adults in 27 countries on five continents. People were divided into several groups according to the timing of onset of AE. Our results compare adult populations with AE according to whether it appeared in childhood (ECA= Eczema in Childhood and Adulthood) or only in adulthood (EOA = Eczema Only in Adulthood). The questionnaire was developed in collaboration with different patient associations\* and international AE experts and included questions related to AE, and SOL questionnaire which assesses the impact of a disease on life choices. The project was reviewed by a French ethics committee and was found to be in accordance with the ethical standards set forth by that committee. These first results compare ECA with EOA populations. Given our objective of examining the long-term effects of a life trajectory, we deemed it appropriate to limit our study population to individuals aged 30 and above.

## RESULTS

A total of 10,258 participants with current AE were recruited in 27 countries between February and May 2024, including 5,931 (57.8%) women and 4,237 (42.2%) men. The mean ± SD age was 41.84 ± 14.70 years. A total of 2,875 individuals were identified as having ECA, while 7,883 were identified as having EOA.

To address potential biases in baseline characteristics between groups, a 1:1 propensity score matching without replacement was performed. Propensity scores were calculated using a logistic regression model including the following normalized covariates: gender, severity and age.

A total of 5,750 matched individuals were identified, and two ECA and EOA comparable groups were constructed [Table 1].

Patients who had AE in childhood exhibited greater Impact as measured by the SOL score [32,29 ± 31,27 vs 21,53 (± 25,04), P-value <0.0001]. Atopic patients whose disease began in childhood were significantly more likely to report that their AE presented a barrier to becoming a parent, affected their love life or sexuality, had a negative impact on their self-image and self-confidence, and hindered their professional career.

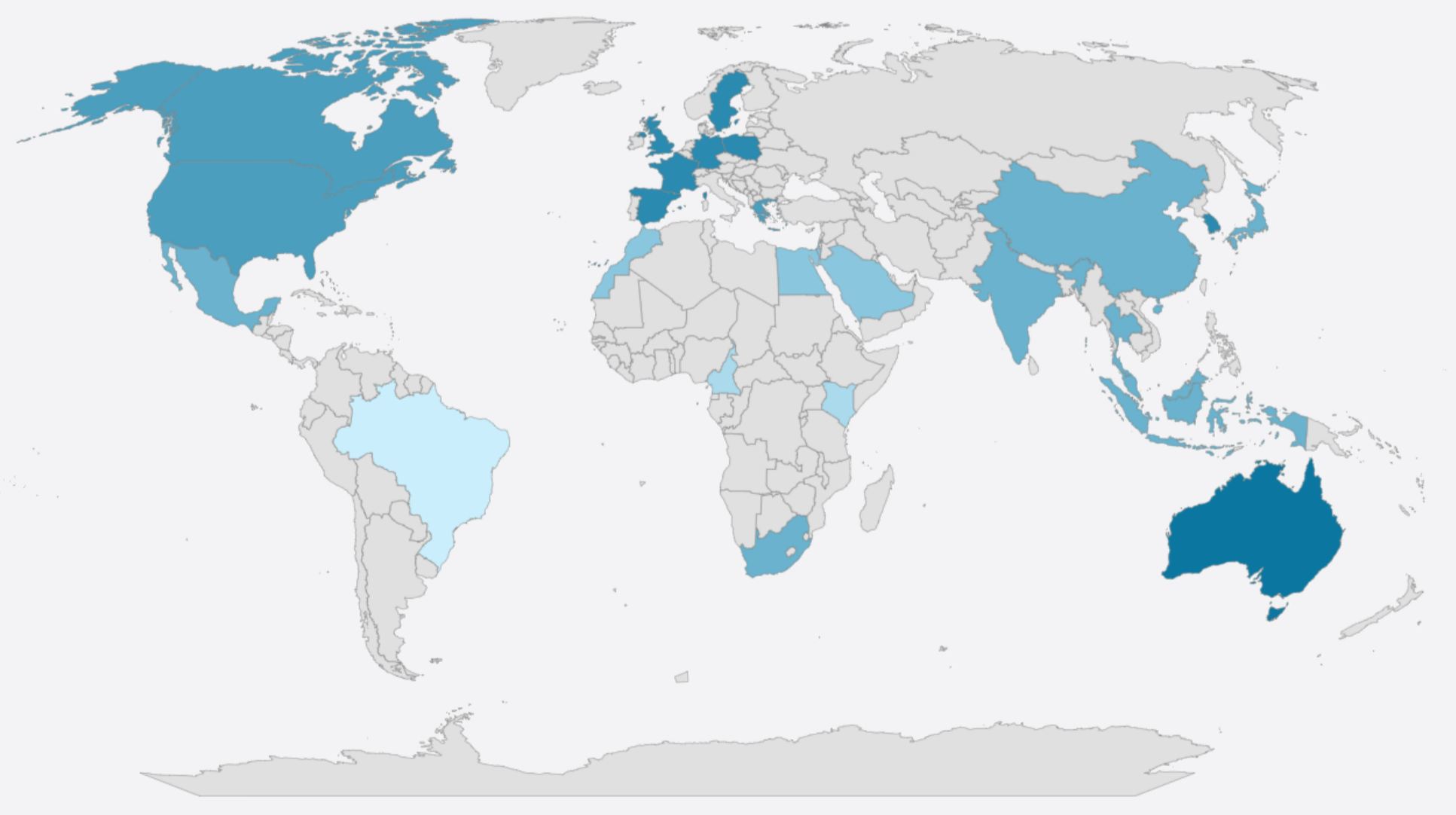


Table 1: Description of the populations in each group

	With Eczema in Childhood & Adulthood		With Eczema Only in Adulthood		Standardized mean differences	P-Value	
	n	%	n	%			
GENDER	Male	1106	38.47%	1104	38.4%	-0.0014	0.978
	Women	1769	61.53%	1771	61.6%		
AGE		37.29	± 12.46	37.3	± 12.51		
	Range:	18.0	; 87.0	18.0	; 99.0	0.0011	>0.999
SEVERITY	Mild	1148	39.93%	1146	39.86%	-0.0014	0.979
	Moderate & Severe	1727	60.07%	1729	60.14%		



## CONCLUSION

Adults with AE whose eczema started during childhood had significantly more difficulties in several crucial areas, including occupational well-being, job adjustment, personal life, family relationships, and self-esteem compared to those whose AE started only in adulthood. These results highlight the importance of a proactive and preventive approach to managing AE.

\* Association Française de l’Eczema [France] ; National Eczema Association [USA] ; Asociación de Afectados por la Dermatitis Atópica [Spain], The Israeli Association for Atopic Dermatitis [Israel]