# EXPLORING THE FULL IMPACT OF MODERATE-TO-SEVERE ATOPIC DERMATITIS (AD)

## FROM THE PERSPECTIVE OF KIDS AND TEENS, CAREGIVERS, AND DOCTORS

Key Findings from the Atopic Dermatitis Global Adolescent & Pediatric (AD-GAP) Survey



#### **SURVEY PARTICIPANTS:**

- Kids (6-11 years) and teens (12-17 years) with moderate-to-severe AD
- Their parents and caregivers
- Independent Physicians
  - 45% dermatologists
  - 26% general practitioners 19% pediatricians
  - 10% allergists/immunologists

We asked nearly 4,000\* survey participants in 13 countries to rank the relative importance of 16 factors that impact quality of life (QoL) for kids and teens with AD, revealed through qualitative research.

Comparing their responses allowed us to identify similarities and differences between the perspectives of each group on these issues.

### The 16 QoL factors break down into five related domains:







Social & Family Impact



**Life Habits** 



**Psychological Burden** 



**Treatment Burden** 

#### Finding #1

### AD COMES WITH A SIGNIFICANT PSYCHOSOCIAL BURDEN, RECOGNIZED BY ALL

While small differences in perception were observed between all three groups, it's clear that the **psychosocial impacts of AD are amongst the most burdensome** and significant, with factors such as feeling ashamed, sad or anxious, and irritated ranking highly.

#### Finding #2

### KIDS AND TEENS WITH AD LIVE IN THE NOW, WHILE THEIR PARENTS ARE LOOKING TO THE FUTURE

AD causes a **high level of discomfort** for kids and teens, and they can have difficulty appreciating disease progression over time.

Despite significant QoL impacts reported, kids and teens with AD tend to live in the moment.

**Caregivers** witness the discomfort and impact of AD at home but are less aware of the impact it can have at school, often focusing on how AD will impact their child's lives in the future.



### Finding #3

### GAPS IN PERCEPTION PRESENT OPPORTUNITIES FOR IMPROVED COMMUNICATION

Perceptions of kids, teens and their caregivers were generally aligned, but sometimes differed from the perceptions of doctors. **Disturbed sleep was listed as the biggest impact of AD** but was not number one for doctors in either age range suggesting some impacts are being **underestimated**.





	Kids (aged 6-11)	Caregivers	Doctors
Your AD disturbs your sleep	1	1	2
Feeling ashamed because of AD	2	2	1
Feeling irritated because of AD	3		
Gets singled out because of AD			3
Feeling sad or anxious		3	,

	Teens (aged 12-17)	Caregivers	Doctors
Your AD disturbs your sleep	1	1	
Feeling ashamed because of AD	2	2	1
Feeling irritated because of AD			
Gets singled out because of AD			2
Feeling sad or anxious	3	3	3

While doctors ranked feeling ashamed because of AD as the number one factor, it is not always possible for them to discuss psychosocial burdens with their patients or their caregivers during appointments, underscoring an opportunity to improve communication between these groups.

We can bring positive change to the lives of kids and teens living with this chronic disease, and their families, by coming together to identify solutions

that promote open dialogue about the full impact of AD.

\*1,447 patients, 1,447 paired caregivers, and 1,092 independent physicians.