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The impact of dry skin on health-related quality of life

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Background: A recent French prevalence study suggests that 23.83% of individuals have dry skin (20.01% among people without associated dermatosis and 32.48% among people with a concomitant skin disease).

Objective: To estimate the impact of dry skin on sleep and quality of life (QoL) in patients with chronic inflammatory skin diseases such as psoriasis, atopic dermatitis (AD), chronic spontaneous urticaria (CSU) or senile xerosis.

Methods: This multicenter, prospective, observational study (January 2017 to January 2018) included patients with a dermatologist's diagnosis of dry skin associated with skin disorders. Short-Form SF-12v2 Health Survey (SF12) and the Dermatology Life Quality Index (DLQI) were evaluated during outpatient dermatology consultations.

Results: The study population of 559 patients included 64% women with an average age different according to the chronic skin disorder (39 and 74 years old in case of atopic dermatitis, and senile xerosis respectively). 96% of patients were aware of their dry skin condition. Overall, 67% of patients reported sleep disturbance and for 41% it is linked to their sleep disturbance with a frequency of 85.7% for CSU, 73% for psoriasis, and 73% for senile xerosis. The average DLQI score was 5.3 and the physical-dimension and the mental dimension of the SF12 52.2 and 44.7, respectively. The DLQI score is significantly correlated to the sleep disturbance.

Conclusions: Dry skin affects patients' sleep. However, the impact on patients' QoL remains more difficult to assess. The DLQI showed some limitations in detecting this impact, in contrary, the SF12, especially the mental dimension, seems more relevant.

Commercial disclosure: None identified.

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Usefulness of an emollient in a stick format to improve compliance and skin conditions of atopic patients





Background: In treating atopic dermatitis (AD), a daily skin care routine is helpful to prevent flares and improve the quality of life. Investigate if the use of a stick in addition to an emollient balm is useful for atopic patients.

Methods: 69 patients (men, women, from 12 years old to 83 years old) with mild to moderate atopic dermatitis and an Eczema Area and Severity Index (EASI) score \geq 2 at the screening visit were included. Changes in global SCORAD, EASI, PBI, IGA, PGA scores, pruritus intensity (VAS), EQ5D, and DLQI were assessed after 14 days and 28 days.

Results: Emollient application once a day in the evening and of the stick as needed during daytime. There was a significant decrease of the severity at D14 and D28 assessed using EASI (reduction of 44.5% and 62.3% respectively) and SCORAD (reduction of 32.4% and 47.4% respectively). Pruritus was significantly decreased at D14 and D28 (respectively, –36.6% and –55.4%). Improvement of AD was noticed both by the dermatologist and the patients. Quality of life was improved after 14 and 28 days as demonstrated by the significant evolution of EQ5D and D1Q1.

Commercial disclosure: None identified.

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Use of a silicone-based gel for improvement of recovery after surgery with stitches in black skin



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Objective: To evaluate the healing effects of an epidermal recovery gel in black-skin patients after small surgery with stitches.

Methods: 34 patients with black skin participated in this study. They had stitches (nonabsorbable for 93.8%) after small surgery, biopsies, excision. 82.4% presented scars from previous skin injuries. After an average 4 weeks of application of the silicone-based gel containing actives to help repair and sooth, evaluation of the clinical signs (oedema, erythema, desquamation, pigmentation) and subjective symptoms (pruritus, tightness, discomforts) was done.

Results: Stitches were mostly located on the trunk, face and neck. After on average 4 weeks of application, twice a day for 82.4% of the patients, it was noticed few cases of ocdema, erythema, desquamation and puffiness and only with low intensity. 44% of patients presented light to moderate pigmentation. The skin tolerance of the product was good to excellent for 100% of the patients. Pruritus and tightness were only present in 15% of the patients and discomfort for less than 10%. 97% of the patients (n = 33) were very satisfied or satisfied by the product which responded to their expectation.

Conclusions: This study demonstrated the tolerance and repairing effect of a healing gel containing a particular combination of actives on black skin.

 $Commercial\ disclosure: None\ identified.$

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Using an emollient lotion to improve objective and subjective symptoms in atopic patients



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Background: Atopic dermatitis (AD) is a recurrent disease needing daily use of an emollient to improve skin barrier and hydration. The objective of this study was to evaluate the efficacy of a lotion to improve lesions and therefore quality of life of atopic patients.

Methods: 51 Chinese patients (11 adults, 40 children aged from 3 months to 13 years) suffering from mild to moderate AD (SCORAD 20-40 at the inclusion) participated in the study performed in Beijing, SCORAD, quality of life with DLQI and CDLQI were evaluated before (D0), after 2 weeks (D14) and 4 weeks (D28) of use of the lotion containing a high level of LRP-Thermal spring water. The patients did not receive any medical treatment for the duration of the study.

Results: Patients used the product twice a day. SCORAD was 27.9 on average at the inclusion. The treatment significantly reduced the SCORAD (-59.5% at D14 and -77.8% at D28 on average). 100% of the patients presented an improvement at D28. Quality of life was significantly improved at D14 and D28 (respectively 38.9% and 46.1% on average) for 81.8% of the adults and 85% of the children. Tolerance was high to excellent for all patients and the product very well appreciated.

Conclusions: The tested product helps to improve clinical signs, subjective symptoms, and quality of life for AD patients.

Commercial disclosure: None identified.

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