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A brief review of comorbidities associated with atopic dermatitis

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Background: Atopic dermatitis (AD) is known to be associated with other allergic diseases. These conditions include asthma, food allergy, and allergic rhinoconjunctivitis. AD typically occurs in early childhood with allergic comorbidities developing later in life in a serial fashion. This progression is termed the "atopic march" and is considered the classical presentation of atopic disease. However, recent evidence suggests that this paradigm may not hold true for a significant portion of patients with these conditions. Not only is the timing of development likely more complex than previously believed, the comorbidities associated with AD are possibly more numerous and varied.

Methods: We conducted a systematic search of the literature on AD and associated extracutaneous disease. The two-step search involved a targeted search of PubMed and EMBASE and a hand search of all abstracts published in 5 key journals. The final yield was 65 articles, which consisted of 41 case-control studies (63.1%), 19 cohort studies (29.2%) and 5 meta-analyses (7.7%).

Results: The results of this systematic review support the notion that atopic dermatitis is strongly associated with other atopic diseases, including asthma, hay fever, and allergic rhinoconjunctivitis. However, it also suggests that the classical paradigm of the "atopic march" does not apply to all patients with atopic dermatitis. There is likely a diversity of phenotypes for patterns of allergic disease. We found a major association between AD and neuropsychiatric disorders, particularly autism spectrum and attention deficit hyperactivity disorders. We found evidence that patients with AD may have an increased risk of developing lymphoma, squamous cell carcinoma (SCC) and basal cell carcinoma (BCC). There was also a small body of evidence suggesting an increased risk for myocardial infarction, stroke and cardiovascular death. The evidence on autoimmune comorbidities was mixed, with the only significant association being a reduced risk of type 1 diabetes mellitus.

Conclusion: Our analysis supports a significant association between AD and neuropsychiatric, cardiovascular and infectious disorders as well as increased risk for malignancies. Surprisingly, patients with AD had a decreased risk of developing type 1 diabetes mellitus.

Biography

Lauren Bonomo, BA, graduated with honors from Yale University and is now a Medical student at the Icahn School of Medicine at Mount Sinai. She is currently on a scholarly year, pursuing research in Icahn's Department of Dermatology. She is particularly interested in inflammatory and autoimmune skin disease, including atopic dermatitis, psoriasis, vitiligo, and alopecia areata.

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