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*Medical Dermatology, Eczema*

## Cyclosporine is Superior to Prednisolone for Severe Eczema in Adults

**Source:** Schmitt J, Schäkel K, Fölster-Holst R, et al. *Prednisolone versus cyclosporine for severe adult eczema. An investigator initiated double-blind placebo controlled multi-centre trial. Br J Dermatol.* 2009 Oct 26. [Epub ahead of print]

Dr. White has disclosed no financial relationship relevant to this commentary. This commentary contains discussion of a commercial product/device. This commentary does not contain a discussion of an unapproved /investigative use of a commercial product/device.

**Objective:** At the end of this activity the physician will be able to cite that cyclosporin is superior to prednisolone in controlling acute flares of eczema.

Although systemic corticosteroids such as prednisolone are commonly prescribed for severe eczema, efficacy has never been tested in a clinical trial. Prednisolone was therefore compared with cyclosporine, which has recently shown good efficacy and tolerability for this indication.

In this randomized, controlled trial, adults with eczema unresponsive to topical treatments were recruited from 4 university hospitals in Germany. Patients were randomized to receive prednisolone at an initial dosage of 0.5-0.8 mg/kg (tapered to completion by 2 weeks, followed by placebo for 4 weeks) or cyclosporine 4.0-2.7 mg/kg for 6 weeks. Patients were monitored for 12 weeks after therapy completion. Efficacy was defined as the proportion of patients with stable remission, or at least 50% improvement in the SCORing Atopic Dermatitis (SCORAD) index relative to baseline during active treatment, and no flare during the 12-week follow-up.

The trial was terminated prematurely because of a high withdrawal rate due to severe exacerbations of eczema (39% withdrawal rate during follow-up). Therefore, 38 patients were analyzed (prednisolone: n = 21; cyclosporine: n = 17). The mean age was 30 years, 55% were male, and 74% of patients had allergic rhinitis or asthma. Significantly more patients receiving cyclosporine achieved stable remission (6 of 17; 35%) compared with prednisolone (1 of 21; 5%). Among the secondary end points, relapse after a previous SCORAD response occurred in 8 of 9 patients (89%) taking prednisolone versus 5 of 11 (46%) taking cyclosporine. Disease exacerbation during follow-up was responsible for study withdrawal in 10 of 21 prednisolone patients (48%) and 5 of 17 cyclosporine patients (29%).