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Atopic Dermatitis



THE COMPARISON

- A** Pink scaling plaques and erythematous erosions in the antecubital fossae of a 6-year-old White boy.
- B** Violaceous, hyperpigmented, nummular plaques on the back and extensor surface of the right arm of a 16-month-old Black girl.
- C** Atopic dermatitis and follicular prominence/accentuation on the neck of a young Black girl.

Epidemiology

People of African descent have the highest atopic dermatitis prevalence and severity.

Key clinical features in people with darker skin tones include:

- follicular prominence
- papular morphology
- prurigo nodules
- hyperpigmented, violaceous-brown or gray plaques instead of erythematous plaques
- lichenification
- treatment resistant.^{1,2}

Worth noting

Postinflammatory hyperpigmentation and postinflammatory hypopigmentation may be more distressing to the patient/family than the atopic dermatitis itself.

Health disparity highlight

In the United States, patients with skin of color are more likely to be hospitalized with severe atopic dermatitis, have more substantial out-of-pocket costs, be underinsured, and have an increased number of missed days of work. Limited access to outpatient health care plays a role in exacerbating this health disparity.^{3,4}

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