



# **Prurigo nodularis: Improving awareness, diagnosis, management and quality of life**




Practice aid from a touchPANEL DISCUSSION

For more information, visit [www.touchimmunologyime.org](http://www.touchimmunologyime.org)

# IFSI guideline (2020) on the diagnosis and management of chronic prurigo, including prurigo nodularis<sup>1</sup>

## Diagnostic criteria

### Core symptoms

-  Chronic pruritus (≥6 weeks)
-  History and/or signs of repeated scratching
-  Excoriated, scaling and/or crusted pruritic lesions, often with a hyperpigmented border

### Associated criteria



- Lesions comprise papules, nodules and plaques, often distributed symmetrically, and rarely affect face or palms
- Lesions usually develop after the beginning of the itch; patients report burning, stinging and/or pain
- Patients may have impaired QoL, sleep loss, absence from work and obsessive compulsive behaviour
- Patients may experience depression, anxiety, anger, disgust, shame and helplessness

## Recommended lab tests

Erythrocyte sedimentation rate  
 Complete blood count (with differential)  
 Ferritin, lactate dehydrogenase  
 Creatine (with estimated GFR), urea  
 ASAT, ALAT, alkaline phosphate, GGT, bilirubin  
 Hepatitis B and C

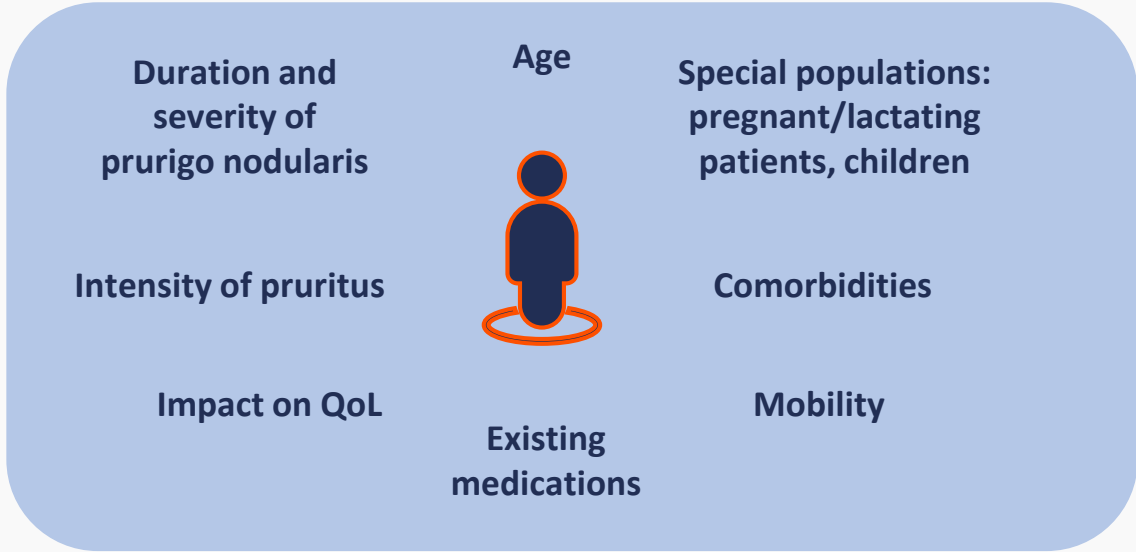
Thyroid function test  
 Fasting glucose or HbA1c  
 In case of clinical suspicion:  
 Total IgE  
 HIV  
 Indirect and direct immunofluorescence, ELISA BP180/230

## Monitoring disease course and burden

-  The guideline recommends using an itch intensity scale, such as the NRS, and a disease severity scale, such as the PAS or IGA-Prurigo, for documentation of the disease and treatment course.
-  To assess the burden and impact of psychosocial comorbidities, PROs may be considered to monitor QoL (e.g. DLQI, ItchyQoL), sleep disturbance, or emotional status (e.g. GAD-7 or PHQ-9).

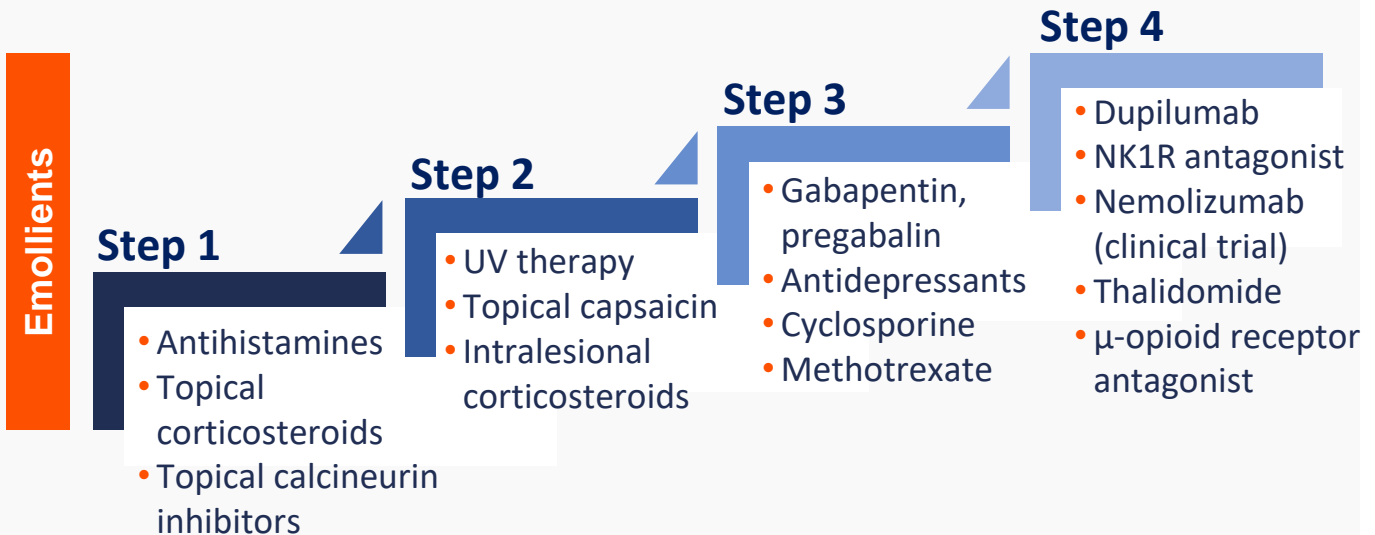
## Treatment recommendations

### Considerations for individualized therapy



### Treatment ladder

- The IFSI guideline recommends a stepwise approach to treating chronic prurigo, including prurigo nodularis
- Emollients are recommended as supportive care at every stage of treatment





## Abbreviations:

ALAT	alanine transaminase	IFSI	International Forum for the Study of Itch
ASAT	aspartate aminotransferase	IGA-Prurigo	Investigator Global Assessment for Prurigo
BP	bullous pemphigoid	IgE	immunoglobulin E
DLQI	Dermatology Life Quality Index	NK1R	neurokinin 1 receptor
ELISA	enzyme-linked immunosorbent assay	NRS	Numerical Rating Scale
GAD-7	Generalized Anxiety Disorder 7	PAS	Prurigo Activity and Severity Score
GFR	glomerular filtration rate	PHQ-9	Patient Health Questionnaire 9
GGT	gamma-glutamyl transferase	PRO	patient-reported outcome
HbA1c	glycated haemoglobin	QoL	quality of life
HIV	Human immunodeficiency virus	UV	ultraviolet

## Reference:

1. Ständer S, et al. *Itch*. 2020;5:e42.



The guidance provided by this practice aid is not intended to directly influence patient care. Clinicians should always evaluate their patients' conditions and potential contraindications, and review any relevant manufacturer product information or recommendations of other authorities prior to consideration of procedures, medications, or other courses of diagnosis or therapy included here.

Our practice aid coverage does not constitute implied endorsement of any product(s) or use(s). touchIMMUNOLOGY™ cannot guarantee the accuracy, adequacy or completeness of any information, and cannot be held responsible for any errors or omissions.

You can find more information on this disease using the hashtag #PrurigoNodularisLeague (Facebook, Instagram)