



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

Practice aid from a touchPANEL DISCUSSION

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## Practical care and management

### Assessing burden of disease

- PN is a severe condition in which itch plays a central role. Patients experience itch of high intensity that is often accompanied by painful sensory symptoms, such as burning and stinging<sup>1</sup>
- Before starting symptomatic topical and/or systemic therapy, patients with PN should undergo a careful diagnostic evaluation along with treatment for any underlying disease<sup>2</sup>
- As well as patients being assessed for PN severity, including duration and intensity of itch, they should also be assessed for other elements that contribute to disease burden<sup>2,3</sup>
- The need for behavioural and emotional support related to anxiety or depression should also be assessed<sup>3</sup>

### PN disease burden is multifactorial<sup>3</sup>

#### Impaired quality of life:

Sleep deprivation  
Missed work/school  
Emotional impacts:  
depression, anxiety,  
anger, shame,  
helplessness  
Social isolation



#### Associated comorbidities:

Impaired liver, renal, or  
thyroid function  
Diabetes  
HIV  
Hepatitis B/C virus  
Malignancy

## Defining patient treatment goals

- It is important that physicians take individual patient treatment goals into account when managing PN<sup>1</sup>

### Common patient treatment goals<sup>1</sup>



Improvement of itch  
Improvement of lesions  
Improvement of sleep  
Know origin of prurigo  
Normal daily life  
Improvement of psychological burden  
Able to wear clothes without discomfort  
Improvement of pain  
Less dependent on doctor visits  
Confidence in therapy



- Treatment of PN should be based on clinical judgment rather than on a strict stepwise approach<sup>3</sup>
- Multimodal therapies, which include topical, systemic and/or phototherapy, may need to be implemented to achieve the goals of therapy<sup>4</sup>

## Treatment considerations

- Dupilumab, a monoclonal antibody blocking interleukin 4 and interleukin 13, is the first medicine specifically indicated to treat PN<sup>5-7</sup>
- Treatment should include therapies targeting both neural and immunologic mechanisms of pruritus<sup>3</sup>
- Treatment should be tailored to the individual needs of the patient considering:<sup>3</sup>

### Clinical presentation



### Response to prior treatments



### Comorbidities



- Frequently, a combination of topical agents, including moisturizers, systemic drugs and psychosomatic treatment, is needed to achieve treatment goals<sup>2</sup>



## Abbreviations

|     |                              |
|-----|------------------------------|
| HIV | Human immunodeficiency virus |
| PN  | Prurigo nodularis            |

## References

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