How to use EpiCeram®?

Unfortunately, there is no “magic cure” that will cure atopic dermatitis. The main objective in treating atopic dermatitis is to restore the compromised skin barrier, decrease the skin inflammation, and relieve the itching, thereby controlling the disease and improving the quality of life.

For best results, it is important that you follow proper instructions:

- EpiCeram® should be used twice a day (e.g., morning and evening) in atopic dermatitis on targeted (or affected) area as directed by your physician; it can be used for maintenance on areas prone to repeated atopic dermatitis.

- Should EpiCeram® be prescribed along with corticosteroids or a topical immunomodulator, it is recommended to apply EpiCeram® just a few minutes before applying steroids or topical immunomodulator on affected areas of the skin to allow proper penetration. To ensure efficacy of EpiCeram® in combination therapy, it should never be mixed with any other product.

- EpiCeram® should not be mixed on skin with an emollient or moisturizer.

- Apply EpiCeram® for a minimum of 2 to 4 weeks depending on the severity, or as directed by your physician. It is recommended to use EpiCeram® for maintenance on areas prone to eczema.

Other treatment recommendations:

1. **Restoring the skin barrier:** An effective skin barrier repair product i.e., EpiCeram® will restore water balance to the skin as well as protect the skin from outside pathogens, allergens and irritants.

2. **For flare prevention and maintenance** of chronic active atopic dermatitis, EpiCeram® Skin Barrier Repair Emulsion may be used regularly for maintenance or at the first sign of a flare.

3. **Controlling the skin inflammation:** Cortisone-derived ointments or creams and non-cortisone anti-inflammatory creams, such as the topical immunomodulators, may be prescribed by your physicians. However, if the skin barrier is restored, the inflammation will also go away. Your doctor will tailor a treatment that is most appropriate for the severity and location of the dermatitis.

4. **Controlling skin infections:** The effect of returning the pH of the skin back to normal contributes to the optimal barrier function of the skin. This produces a strong antimicrobial effect decreasing the bacteria that cause skin infections. However, your physician will recommend the most appropriate treatment should skin infections caused due to eczema (atopic dermatitis) need to be treated.

5. **Oral antihistamines:** Oral antihistamines may help control itching, your physician will recommend the most appropriate one. Antihistamines primarily help with the itching by causing drowsiness and allowing the child or adult to sleep at night.

6. **Clothing and life style changes:** Your physician may recommend not wearing woollen or flannel clothing as it may irritate the skin in some patients. They may also recommend adding bleach to the water for bathing for those patients who may need it. They could ask you about the soap or detergent you use or any occupational related questions that may help in recommending the best treatment for you. Your physician will provide any additional instructions below.

Your Physician’s Instructions

What is Atopic Dermatitis?

Atopic dermatitis (commonly known as eczema) is a particular type of skin barrier defect that is marked by dryness, associated itching, and a characteristic pattern of rash on the body. It is a chronic skin disease in which the skin goes through cycles of being inflamed and itchy.

What causes Atopic Dermatitis?

The exact cause of atopic dermatitis is unknown, although increasing evidence suggests that a genetic defect in proteins and lipid abnormality results in a compromised skin barrier, which is a critically important component of the disease process. In many patients, there is a family history of sensitive skin, atopic dermatitis, asthma or hay fever. Rarely, atopic dermatitis in infants may be related to food sensitivity; however, in the majority of cases, no meaningful food or allergic triggers can be found. Researchers believe that people with atopic dermatitis are genetically more prone to reacting to environmental triggers, and that coming into contact with an irritant (e.g., perfume, pet dander, pollen) triggers their extra-sensitive skin to react.
Atopic dermatitis usually starts early in life, from the ages of two months to two years. The condition is fairly common and may occur in as many as 10-30% of children and up to 3% of adults. Over the decades, the prevalence has increased. Many children with atopic dermatitis outgrow the condition during school age; although, some continue to have problems as an adolescent or even as an adult. Even if the parent of a child with atopic dermatitis doesn’t have the condition, it still affects them. Because the constant itching persists at night, it can be harder for children to sleep. Researchers estimate that kids with atopic dermatitis lose an average of 1.9 hours of sleep a night, and that their parents lose an average of 2.1 hours.

Who is affected by Atopic Dermatitis?

Atopic dermatitis is a common skin condition that affects people of all ages. It is caused by an overactive immune system that reacts to certain substances, known as allergens. These allergens can include dust, pet dander, pollen, perfume, and chlorine. In some cases, it can also be triggered by stress or cold temperatures. The skin becomes dry, red, itchy, and sore. It can be painful and may lead to infection if left untreated. People with atopic dermatitis may also experience dry skin, which can be hard to manage. It can be especially challenging for infants and young children who may not understand why they are itchy and may scratch themselves further.

Symptoms of Atopic Dermatitis

People with atopic dermatitis have skin that reacts very easily to irritants (e.g., dust, pet dander, pollen, perfume, chlorine), becoming red, flaky and very itchy. The skin is also vulnerable to surface infections caused by bacteria. Break-outs are especially common in places where the skin rubs together. For example, the insides of the elbows and knees can become very itchy. The skin is also vulnerable to surface infections caused by bacteria. Break-outs are especially common in places where the skin rubs together. For example, the insides of the elbows and knees can become very itchy.

The skin is dry and the rash is quite itchy, so infants may be restless and rub against the sheets or scratch, if able. The rash may involve the face or it may cover a large part of the body. As the child gets older, the rash may become more localized. In early childhood, the rash is commonly on the legs, feet, hands and arms. Later, the rash may be limited to the bend of the elbows and knees. As the rash becomes more established, the dry itchy skin may become thickened, leathery and sometimes darker in coloration. The more the person scratches, the worse the rash gets and the thicker the skin becomes.

How your Skin serves as a barrier?

If you want to understand what the skin looks like and what happens to the skin in eczema (atopic dermatitis), picture the skin structure in the form of a brick wall. It is composed of cells of the skin (the brick) and held together by ceramides, cholesterol and long-chain free fatty acids in the ratio of 3:1:1 (mortar and cement). If the mortar and cement breaks, the bricks will become loose and external dust and other external matters come between the bricks and further damage the wall. Just like the brick wall in a house, our skin serves as a barrier to the outside world, keeping our internal organs and system safe from the damaging elements and bacteria that can invade our bodies. In eczema (atopic dermatitis) your skin has an impaired barrier function that needs to be corrected. During itch-scratch cycle, the outer cells of the skin get damaged and thus the skin barrier breaks and it rapidly loses moisture, opens up to infections due to increase in pH and allergens which leads to inflammation. This gives a redness to the skin impacted by itching and scratching.

What is EpiCeram®?

EpiCeram® is the only available therapeutic product that treats and repairs the skin barrier as well as maintaining the skins protective barrier once healed.

Epicarerem® is a Skin Barrier Repair Emulsion. It is different from over-the-counter moisturizers because it delivers a scientifically balanced dose of ceramides, cholesterol and free fatty acids on a 3:1:1 ratio and which are some of the “building blocks” of healthy skin.

If you have mild to moderate eczema, EpiCeram® can be effective either alone or in combination with topical corticosteroids. For patients with more severe atopic dermatitis, it can be combined with a mild or midpotency topical corticosteroid.

Is EpiCeram® only for Atopic Dermatitis?

EpiCeram® is used for atopic dermatitis, but it can also be used for other skin conditions, including irritant contact dermatitis and radiation dermatitis. It helps relieve the burning and itching associated with these skin conditions.

How does EpiCeram® work?

An effective skin barrier repair product, i.e., EpiCeram®, will restore water balance to the skin as well as protect the skin from outside pathogens, allergens and irritants. By replenishing the skin’s physiologic lipids, EpiCeram® helps to normalize the skin’s pH and prevent it from drying out. For chronic active atopic dermatitis, EpiCeram® skin barrier repair emulsion may be used regularly for maintenance or at the first sign of a flare thus inflammation is also reduced.

Are there any Side Effects with EpiCeram®?

EpiCeram® is a very safe and well tolerated skin barrier repair emulsion that has very few adverse effects. Please consult EpiCeram® product insert that is available in the product pack for any further details.

Who can use EpiCeram®?

EpiCeram® can be used in all age groups: children, teens and adults. It can also be used in sensitive areas, including the face, the groin, and areas where the skin may rub together.

For more information on atopic dermatitis and EpiCeram® treatment, speak with your doctor, pharmacist, or visit www.epiceram.ca