

# eczema matters

Research, support, and education for those affected by eczema

Winter 2017

## Eczema in the fashion world

*“Godfather of Singapore Fashion”*

*Daniel Boey shares his  
AD struggles*

the itch to  
**WRITE »**

*An interview  
with screenwriter  
Peter Moffat*

**Celebrity Chef  
Elizabeth Falkner  
shares recipes for AD**

THE BOOK OF DANIEL  
ADVENTURES OF A FASHION INSIDER

**Living well with eczema**

Advice for feeling better  
physically and emotionally

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### INDICATION

DUPIXENT is a prescription medicine used to treat adult patients with moderate-to-severe atopic dermatitis (eczema) that is not well controlled with prescription therapies used on the skin (topical), or who cannot use topical therapies. DUPIXENT can be used with or without topical corticosteroids. It is not known if DUPIXENT is safe and effective in children.

### IMPORTANT SAFETY INFORMATION

**Do not use** if you are allergic to dupilumab or to any of the ingredients in DUPIXENT.

**Before using DUPIXENT, tell your healthcare provider about all your medical conditions, including if you:**

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- have a parasitic (helminth) infection
- have asthma
- are scheduled to receive any vaccinations. You should not receive a "live vaccine" if you are treated with DUPIXENT.
- are pregnant or plan to become pregnant. It is not known whether DUPIXENT will harm your unborn baby.
- are breastfeeding or plan to breastfeed. It is not known whether DUPIXENT passes into your breast milk.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins and herbal supplements. If you have asthma and are taking asthma medicines, do not change or stop your asthma medicine without talking to your healthcare provider.

#### DUPIXENT can cause serious side effects, including:

- **Allergic reactions.** Stop using DUPIXENT and go to the nearest hospital emergency room if you get any of the following symptoms: fever, general ill feeling, swollen lymph nodes, hives, itching, joint pain, or skin rash.
- **Eye problems.** Tell your healthcare provider if you have any new or worsening eye problems, including eye pain or changes in vision.

**The most common side effects include** injection site reactions, eye and eyelid inflammation, including redness, swelling and itching, and cold sores in your mouth or on your lips.

Tell your healthcare provider if you have any side effect that bothers you or that does not go away. These are not all the possible side effects of DUPIXENT. Call your doctor for medical advice about side effects. You are encouraged to report negative side effects of prescription drugs to the FDA.

Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch), or call 1-800-FDA-1088.

Use DUPIXENT exactly as prescribed. If your healthcare provider decides that you or a caregiver can give DUPIXENT injections, you or your caregiver should receive training on the right way to prepare and inject DUPIXENT. **Do not** try to inject DUPIXENT until you have been shown the right way by your healthcare provider.

**Please see accompanying Brief Summary on next page.**

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**Summary of Information about DUPIXENT® (dupilumab)  
(DU-pix'-ent)  
Injection, for Subcutaneous Use**

**Rx Only**

**What is DUPIXENT?**

- DUPIXENT is a prescription medicine used to treat adults with moderate-to-severe atopic dermatitis (eczema) that is not well controlled with prescription therapies used on the skin (topical), or who cannot use topical therapies.
- DUPIXENT can be used with or without topical corticosteroids.
- It is not known if DUPIXENT is safe and effective in children.

**Who should not use DUPIXENT?**

**Do not use DUPIXENT** if you are allergic to dupilumab or to any of the ingredients in DUPIXENT. See the end of this summary of information for a complete list of ingredients in DUPIXENT.

**What should I tell my healthcare provider before using DUPIXENT?**

**Before using DUPIXENT, tell your healthcare provider about all your medical conditions, including if you:**

- have eye problems
- have a parasitic (helminth) infection
- have asthma
- are scheduled to receive any vaccinations. You should not receive a “live vaccine” if you are treated with DUPIXENT.
- are pregnant or plan to become pregnant. It is not known whether DUPIXENT will harm your unborn baby.
- are breastfeeding or plan to breastfeed. It is not known whether DUPIXENT passes into your breast milk.

Tell your healthcare provider about all of the medicines you take including prescription and over-the-counter medicines, vitamins, and herbal supplements. If you have asthma and are taking asthma medicines, do not change or stop your asthma medicine without talking to your healthcare provider.

**How should I use DUPIXENT?**

- **See the detailed “Instructions for Use” that comes with DUPIXENT for information on how to prepare and inject DUPIXENT and how to properly store and throw away (dispose of) used DUPIXENT pre-filled syringes.**
- Use DUPIXENT exactly as prescribed by your healthcare provider.
- DUPIXENT comes as a single-dose pre-filled syringe with needle shield.
- DUPIXENT is given as an injection under the skin (subcutaneous injection).
- If your healthcare provider decides that you or a caregiver can give the injections of DUPIXENT, you or your caregiver should receive training on the right way to prepare and inject DUPIXENT. **Do not** try to inject DUPIXENT until you have been shown the right way by your healthcare provider.
- If you miss a dose of DUPIXENT, give the injection within 7 days from the missed dose, then continue with the original schedule. If the missed dose is not given within 7 days, wait until the next scheduled dose to give your DUPIXENT injection.

- If you inject more DUPIXENT than prescribed, call your healthcare provider right away.
- Your healthcare provider may prescribe other topical medicines to use with DUPIXENT. Use other prescribed topical medicines exactly as your healthcare provider tells you to.

**What are the possible side effects of DUPIXENT?**

**DUPIXENT can cause serious side effects, including:**

- **Allergic reactions.** Stop using DUPIXENT and go to the nearest hospital emergency room if you get any of the following symptoms: fever, general ill feeling, swollen lymph nodes, hives, itching, joint pain, or skin rash.
- **Eye problems.** Tell your healthcare provider if you have any new or worsening eye problems, including eye pain or changes in vision.

**The most common side effects of DUPIXENT include:** injection site reactions, eye and eyelid inflammation, including redness, swelling, and itching, or cold sores in your mouth or on your lips. Tell your healthcare provider if you have any side effect that bothers you or that does not go away. These are not all of the possible side effects of DUPIXENT. Call your doctor for medical advice about side effects. You may report side effects to FDA 1-800-FDA-1088.

**General information about the safe and effective use of DUPIXENT.**

Medicines are sometimes prescribed for purposes other than those listed in a Patient Information leaflet. Do not use DUPIXENT for a condition for which it was not prescribed. Do not give DUPIXENT to other people, even if they have the same symptoms that you have. It may harm them.

This is a summary of the most important information about DUPIXENT. If you would like more information, talk with your healthcare provider. You can ask your pharmacist or healthcare provider for more information about DUPIXENT that is written for healthcare professionals.

For more information about DUPIXENT, go to [www.DUPIXENT.com](http://www.DUPIXENT.com) or call 1-844-DUPIXENT (1-844-387-4936)

**What are the ingredients in DUPIXENT?**

**Active ingredient:** dupilumab

**Inactive ingredients:** L-arginine hydrochloride, L-histidine, polysorbate 80, sodium acetate, sucrose, and water for injection

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**NATIONAL Eczema ASSOCIATION**

**OUR MISSION**

The National Eczema Association (NEA) improves the health and quality of life for individuals with eczema through research, support and education.

**National Eczema Association** Association is a national nonprofit patient advocacy organization dedicated to eczema education and research. The association was founded in 1988 in Portland, Oregon, by individuals with eczema, nurses, physicians and others concerned with the enormous social, medical and economic consequences of this disease. NEA is governed by a volunteer Board of Directors and advised on medical issues by a volunteer Scientific Advisory Committee. The association is supported by individual and corporate donations. Advertising is accepted for publication if they are relevant to people with eczema and meet certain standards.

*Eczema Matters* provides health information from a variety of sources, but this information does not dictate an exclusive treatment course and is not intended as medical advice. Persons with questions regarding specific symptoms or treatments should consult a professional health care provider who has the appropriate training and experience. Opinions expressed by *Eczema Matters* do not necessarily reflect the views of the National Eczema Association, its Board of Directors, its Scientific Advisory Committee or its contributors.

# Letter from Julie



**A**s part of our NEA community, you've no doubt been hearing that this is the "Decade of Eczema." But what does this mean, and why is it important?

I often reflect on how different things were in the eczema world just two years ago. For over a decade, we had no new treatment options. It seemed as though you (the patient) were an afterthought when it came to drug development and policies regarding your access to health care and treatments.

Now the eczema patient and family is front and center. Researchers are engaging patients in every facet of new drug development, creating therapies that address needs and gaps in care. We're seeing more groundbreaking research, public awareness, industry investment and policy changes. Finally, the true impact on patients' quality of life is receiving the light and attention it deserves.

This year, we saw two safe and effective treatments come to the marketplace, and there are more than 65 new therapies in the clinical trial pipeline. Some of this research centers on prevention,

some on the fascinating world of the microbiome, and yet others are specific to itch. I've said it before: That is what HOPE looks like!

Isn't it the most heartwarming feeling to know that children born today with moderate to severe atopic dermatitis may never have to know what it is like to live without effective treatments?

Or that we may find a way to prevent this disease before it starts? Believe me, that gets me up fast in the morning!

I hope this brief walk through the "Decade of Eczema" serves to inspire and empower you to live your very best life with eczema. Speaking of walking, thank you so much for joining me for my live Facebook walks during Eczema Awareness Month in October. Our theme, "Be Well: Mind + Body" empowered our community to take

care of their whole selves—not just their physical health, but their mental, social and emotional health too.

Wellness is the underlying theme of this issue of *Eczema Matters*. We asked patients and providers to share their best tips on page 6, and even got some sound advice from celebrity chef Elizabeth Faulkner on page 12, the man behind HBO's "The Night Of" Peter Moffat on page 24, and "The Godfather of Singapore Fashion" Daniel Boey on page 28.

**Finally, the true impact on patients' quality of life is receiving the light and attention it deserves!**

May you and yours enjoy happiness and comfort this holiday season. 🌈

Warmly,

Julie Block

President & CEO

*P.S. Don't forget to join us for our three-day patient conference in Chicago, June 22–24, 2018!*



# what tips and recommendations do you have for indulgent (but eczema-friendly) products?

I spray my jacket or outer-most clothes with the perfume or fragrance I like so it doesn't have skin contact, but I still smell like whatever I want without the itch! – **Elyssa R.**

ooo

SheaMoisture. I use the Raw Shea Butter and the Raw Shea & Argan Oil lines since I like the smell more, but I can use all their stuff, and IT ACTUALLY HELPS! – **Sasha P.**

ooo

Always moisturize your skin. My favorite moisturizer products are Aveeno and Cetaphil. Every now and then take vitamin E and vitamin C. Go to sleep early! – **Jocelyn A.**

ooo

I use Cheryl Lee MD products and VMV Hypoallergenics products, unscented bar soap and some jojoba oil after my bath for moisture retention. – **Rebekah B.**

ooo

Hale Therapeutic grade essential oils. – **Jamie M.**

The less alcohol in the product the better, including shampoo and conditioner. I love Head and Shoulders Silky and Smooth, and Dove is usually pretty good. – **Yve F.**

ooo

Anytime I'm brave enough to try a product with any kind of fragrance I feel like I'm indulging. But oddly enough, I've found eye drops to help gently soften/moisturize my facial eczema. – **Rachel E.**

ooo

The Honey House Naturals bee bars work well for me. During a flare-up, I switch to fragrance-free, but I can usually use a scented version with no problem. There are other beeswax and shea butter lotion bars that work too. – **Elaine S.**

ooo

I use scented goat milk soap, which does not bother my skin. – **Kathrine S.**

I have been making my own products with beeswax, grapeseed oil, coconut oil, sunflower oil and vitamin E oil. Feels great and really moisturizes my skin. – **Julie O.**

ooo

Aquaphor Baby wash—the whole family uses it. Our youngest is 10 years old, and this is still what we use. – **Amanda T.**

ooo

I have been using coconut oil, turmeric and vitamin E oil. It helps to keep eczema off my face! – **Lemia M.** ●

*Responses have been edited for length and clarity. The opinions expressed by NEA contributors are their own and do not necessarily reflect the opinions or positions of the National Eczema Association.*

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# *Living well* with eczema

by Margaret Crane

**We asked a patient, medical doctor and psychologist for their best advice to conquer the daily struggles of life with atopic dermatitis.**



**F**or more than 3 million children and adolescents living with moderate to severe atopic dermatitis (AD)—the most common and serious type of eczema—the worst words in the English language are “don’t scratch.”

Teachers, friends and even parents may utter these words with the best of intentions, but when young patients are under the lash of relentless itch, the last thing they want to hear is to stop doing the very thing that provides momentary relief.

What’s more, a command—even a constructive one—is likely to reinforce the unwanted behavior, not prevent it, says Jennifer LeBovidge, Ph.D., a psychologist in the AD Center at Boston Children’s Hospital and a member of the Harvard Medical School faculty. “It’s a little like telling someone not to think about pink elephants.”

LeBovidge helps children, adolescents and families assemble a toolkit of strategies for dealing with the daily burden of the disease. “Sometimes you need a hammer, and sometimes you need a wrench,” she says.

That’s why it’s important to have plenty of options, LeBovidge explains. Some



strategies are concrete and physical, such as taking a daily medicine or sticking to a particular routine.

Others are more subtle and personal, such as practicing self-care or changing your mindset about the disease. What these strategies all have in common is that they require patients to know themselves.

### 5 tips from a patient

Children and teens with eczema are often told that they'll grow out of it, but Kathy Sage, like many others, never did. She also suffers from two comorbid conditions: food allergies and asthma.

"I flip-flop between these three," she says. "When my eczema flares, my asthma is not as bad and vice versa. The same goes for my food allergies. They tend to erupt just when my skin calms down."

Sage's toolkit of strategies runs the gamut from open-ended to extremely specific. In the latter category is an ointment she makes from three simple ingredients: water, an emulsifier and coconut oil. Her homemade remedy cools and calms her eczema more effectively than the over-the-counter products she has tried over the years, she says.



KATHY SAGE

Sage recognizes that wellness remedies are extremely individual, and she's under no illusion that what works for her will work for everyone. Still, she's eager to share her top five wellness tips that apply to just about anyone seeking ways to ease their symptoms and enhance their quality of life.

#### 1. Know your triggers.

What triggers an itching and scratching cycle for you? How do you stop it in its tracks? Knowing your triggers is the best way to defuse them.

Sun, heat and sweat are the main culprits for Sage. She avoids direct sunlight and always wears a hat and

sunglasses. Summers in her hometown of Annapolis, Maryland, can get pretty hot, so air-conditioning tends to be her best friend during the summer months.

#### 2. Get regular exercise.

Do as much as you can but know when you've reached your limit. Sage says her limit is right before she breaks a sweat.

#### 3. Try Qigong.

Increasingly popular, this holistic Chinese modality is all about breathing, posture and slowing down the body's out-of-control reactions to stress. Sage says she can't recommend it highly enough.

4. Do something creative.

Sage favors reading, cooking, sewing, pottery, origami and fiber arts, but any activity that takes you outside yourself will do, she says.

5. Feel free to explore.

Try new things, such as yoga, positive thinking and mindful meditation, and remember to breathe throughout the day. Trial and error is often the best way to figure out what works for you, according to Sage.

5 tips from a doctor/patient

In sharing her best insights for living well with AD, Dr. Vivian Shi, a tenured member of the faculty of the University of Arizona College of Medicine in Tucson, relies on two sources of expertise: she’s a dermatologist whose principal focus is AD, and she’s a longtime AD sufferer herself. Like Sage, she developed the condition in childhood, and also like Sage, she never grew out of it.

Shi was born in South China, a region with high rates of pollution. Food and seasonal allergies, asthma and eczema are common there, especially in children. Her family immigrated to the U.S. when she was a teenager. “As an immigrant teen with AD, I experienced directly what it means to lack access to health care services,” she says. “Later, my experiences as a

patient, combined with my desire to heal others, led me straight to medical school.”

Shi celebrates the arrival of Dupixent (dupilumab), the first biologic for people with moderate to severe AD, calling it a “godsend.” But even the most effective medications don’t guarantee patients the quality of life they seek and deserve, especially given recent research attesting to the emotional burden of AD on the daily lives of patients.



People need medications, but they also need to find strategies for living well.

– Dr. Vivian Shi



A study published in the *Journal of the American Academy of Dermatology* in August 2017 cited significantly higher rates of anxiety, depression and sleep disorders in people with AD compared with people who don’t have the disease.

For Shi, the new data confirms what she already knows as a patient: People need medications, but they also need to find strategies for living well. Here are her top five wellness tips for patients struggling with the disease and its impact on mood and sleep:

1. Find time for yourself.

Self-care in every form requires a little solitude. Shi makes sure she carves out as much alone time as is reasonably possible in her busy life.

2. Communicate with your health care team.

Be proactive. Don’t hesitate to keep your doctors, nurses and others aware of what’s working for you and what isn’t. Let them know of any special circumstances that might affect your treatment. Medical professionals aren’t mind readers, Shi admits, so make sure they know what’s happening in your life.

3. Try a “hands-on” approach.

Massage is one of the top wellness strategies recommended by health care providers across the board. For those living with eczema, it can be a way to work moisturizer deep into the skin, while relaxing sore or tense muscles as a form of stress reduction. Shi encourages her patients to explore an array of healing options that rely on human touch.





#### 4. Know your oils.

Coconut oil is one of the most common natural oils used for moisturizing skin. Sunflower oil has healing prop-

erties as well. Look for cold-pressed virgin oils but avoid olive oil, essential oils and aromatherapy oils, which are known to irritate the skin, Shi says.

#### 5. Speak out!

Do your part to counter all the “fake news” and misinformation out there about eczema and AD. In a straightforward, non-confrontational way, tell your friends, teachers and co-workers that eczema isn’t contagious. The best way to change someone’s mindset is to come out of the shadows, speak up and speak out. You are your own best advocate, Shi says.

When it comes to speaking out, LeBovidge agrees with Shi: “Children might consider doing a ‘show and tell’ at school about their experiences with AD,” she suggests.



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Education can be very helpful and very powerful. Families can partner with a teacher or school nurse and find interesting, engaging ways to teach students and teachers alike about the disorder, thus cutting stigma down to size, LeBovidge says.

“And keep the language simple,” she adds. “A simple phrase like ‘you can’t catch it’ will go far toward disarming peers and neutralizing their fears.”

### 5 more tips for good measure

A team approach is at the heart of LeBovidge’s clinical practice. She urges AD families to include their children as active participants in their own skincare.

For instance, parents can turn it into a game in which they and their child take turns rubbing in moisturizer. Teens can incorporate self-care into special “spa” rituals in the evening, perhaps before doing their homework and crashing for the night.

With the wealth of available conventional and complementary wellness strategies, LeBovidge hones in on her own top five:

#### 1. Commit to a regular skincare routine.

Be consistent. Your routine may vary from day to day, depending on the severity of your symptoms, but gen-

erally follow your regimen. Not only will regular skincare habits help you control the condition of your skin; they’ll help you gain a sense of control over your AD, she says.

#### 2. Use guided imagery.

Take a vacation in your own mind. Imagine a pleasant scene that involves all of your senses. If you picture yourself on a beach, hear the seagulls, feel the ocean waves lapping at your feet and smell the salt air. Your body will relax as if you’re really there, she notes.

#### 3. Engage in a distraction activity.

Keep your hands busy. Children might enjoy drawing or building



You can also block some of the itchy messages to your brain by changing your sensations. If your eczema feels hot and burning, imagine using a dial to turn down the temperature, she recommends. Even the simple act of applying a cool compress can distract your brain and produce welcome changes in your body.

Apps tend to come and go, but relaxation and meditation apps are plentiful. All you need to do is search for them, LeBovidge says. Use them at bedtime to help you relax and sink into a good night's sleep.

Whatever your age, your situation and the state of your skin, remember that you're not alone. Keep communication lines open with your friends, family and the members of your health care team, she says.

It bears repeating that anxiety and depression are prevalent among people with AD, and young patients are especially vulnerable. "It's obvious that AD takes an emotional toll, but stress also appears to exacerbate the condition," says LeBovidge. If a child is feeling down, she strongly urges

Wellness takes practice, and while practice doesn't always make perfect, it will get easier over time. Start by putting together your own wellness toolkit. Build the quality of life you want and need, one day at a time. 🌱

[illegible]

- For more wellness tips and resources, subscribe to our free monthly e-newsletter, *Eczema Matters*. Sign up [nationaleczema.org/enews](https://nationaleczema.org/enews).
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# Hungry for eczema relief? You're not alone.

Culinary expert, author and TV personality Elizabeth Falkner is living with AD and wants to help get the word out.

By Kathryn Jones

**I**f you identify as a foodie, you'll probably recognize Elizabeth Falkner and her trademark spikey blonde locks.

The award-winning restaurateur and culinary expert has appeared as a competitor and sometimes a judge on popular cooking shows like "Top Chef," "Iron Chef America" and "Food Network Challenge." She also was the first American to win the "Free-style Neapolitan Pizza" category of the World Pizza Championship in Naples, Italy, in 2012.

The legendary pastry chef has been a long-time advocate for females in the culinary arts. A firm believer in physical fitness, she played soccer for 28 years, tackled her first marathon in 2016 and is highly skilled at the sword-fighting fitness program known as Jungshin.

Now she's taking the literary world by storm with two cookbooks under her apron and plans to publish her autobiography soon. In her memoirs, Falkner reveals something highly personal about herself. She's been living with moderate to severe atopic dermatitis (AD) for most of her life.

It wasn't until 20 years ago, when she was in her 30s, that Faulkner finally received a proper diagnosis. She remembers a doctor advising her to give up her culinary career. Yeah, right! Telling Elizabeth Falkner to stop cooking is like telling the grass to stop being green. "I'm like, 'Well that's the stupidest thing I've heard,'" she says with a laugh.

### AD took an emotional toll

Falkner suspected something was awry with her skin while playing soccer in her youth. But at the time, she shrugged it off as "skin guard rashes" and never gave much thought to the other symptoms of AD, such as allergies.

"But then things got really bad when I was cooking on the line," Falkner recalls. "I started getting bad lesions on my hands. It was so uncomfortable because, as you can imagine, being a chef, I was using my hands all the time."

Not only was it physically painful for Falkner to be cooking with eczema on her hands, she also felt self-conscious and worried that people would see her handling their food and assume she had a contagious disease. "I'd be like, 'Yeah, I know it looks gross. But it's not contagious,'" she says. "I'm a

Type A personality, so I just sort of pushed through it.

"I'd tell myself, 'Oh, I don't care what they think. I know I'm going to make killer food, and that's going to win them over anyway.'"

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The most frustrating part of AD, Falkner admits, is never being able to find long-term relief. "Everything that I've put on top of my skin doesn't really help me," she says. "It's temporary, maybe, but it's always coming back. Emotionally, that's really hard for me; it probably is for everybody. It's something that's not just physically affecting you, but psychologically affecting you for the rest of your life."

### Speaking up = speaking out

The hardest part of living with AD, according to Falkner, is the isolation it brings. She often felt like she didn't have anyone to talk to about it. But in hindsight, keeping her hardships to herself and not talking about AD with anyone was her way of staying in denial about the seriousness of this disease.

"I've done a lot of things in my career to postpone my emotionally dealing with it," she says. "Your skin is your biggest organ and to have something like this happen to your biggest organ is a big deal. This clearly isn't something just on the outside. I've been trying to treat it for this long on my skin, but it must be something coming from inside."

Falkner knows how important it is to spread awareness about this chronic, inflammatory disease, which is why she was the 2016 Understand AD Ambassador. Understand AD is a national awareness campaign and educational program sponsored by Sanofi and Regeneron Pharmaceuticals, Inc. in partnership with the National Eczema Association. For more information, visit [UnderstandAD.com](http://UnderstandAD.com).



“It’s very comforting for me to have this discussion about AD because I don’t think people around me have really understood just how painful it is,” Falkner says. “Atopic dermatitis is more than skin deep. Having this disease can get in the way, but try not to let it get in the way of the things you love to do.” ●



## Be your own **TOP CHEF**

For a May 2016 livestream culinary event in New York City, Falkner crafted a three-course meal drawing inspiration from the stories of everyday people with AD, like 35-year-old foodie, Lindsay, who joined Falkner in the kitchen. Here are the recipes

### SOUP TO SOOTHE

4 ea. medium carrots,  
chopped into 1/2" pieces  
2 ea. yellow onion, chopped  
1 ea. leek, sliced into 1/4" pieces  
1 ea. 2" pc. turmeric, sliced  
1 ea. 2" pc. ginger, sliced  
2 ea. cloves garlic, sliced  
4 C. chicken or vegetable stock  
4 stems of Italian parsley  
1/2 tsp. toasted cumin seeds  
1/2 tsp. coriander seeds, crushed  
1/2 tsp. toasted fennel seeds  
Kosher salt and  
fresh ground pepper to taste  
Lime to taste

### TURMERIC SPICED CARROT BROTH

#### DIRECTIONS

1. In a medium saucepan, add 1 TB. olive oil or coconut oil on medium-high heat
2. Add the chopped onion and leek and allow to sweat for a few minutes
3. Add the turmeric, ginger, garlic, carrots, cumin, coriander and fennel
4. Add parsley, a pinch of salt and a few cranks of black pepper and cook for another minute
5. Add the chicken or vegetable stock and a little more salt
6. Turn heat down to a low simmer as soon as mixture starts to come to a boil and slowly simmer until carrots are soft and cooked through
7. Strain and season to taste
8. Add a squeeze of lime before serving

## UNCOVERED ENTRÉE

12 oz. striped bass filet  
cut into two pieces  
8 oz. whole milk plain  
Greek yogurt  
¼ cup pitted Kalamata olives,  
chopped  
1 bulb of fennel, sliced very thin  
and save the fronds or tops  
1 cup Italian parsley leaves  
½ cup mint leaves  
1 ea. Meyer lemon, sliced very thin  
½ cup extra virgin olive oil  
Kosher salt and fresh  
ground pepper

## PAN ROASTED STRIPED BASS WITH OLIVE YOGURT & SHAVED FENNEL & MEYER LEMON

### DIRECTIONS

1. Score the fish skin with a few cuts so that the skin doesn't shrink while cooking
2. Season the fish with salt and pepper on both sides Heat a sauté pan on high heat and add 2 tablespoons canola, olive or coconut oil
3. Place the two pieces of fish skin side down in the pan and turn heat down to medium-high
4. Cook the fish on one side for about 3 minutes
5. Combine the olives and yogurt together in a bowl and set aside
6. Combine the shaved fennel, sliced lemons, parsley and mint together with a couple pinches of salt and pepper and olive oil in a bowl
7. Turn the fish over skin side up to cook for another minute
8. Spoon some olive yogurt on plates and set the fish on top
9. Cover the fish with the fennel and lemon salad
10. Serve immediately

## COMMUNITY DISH

1 box fresh pappardelle pasta  
1 cup whole milk  
4 oz. butter, room temperature  
1 oz. flour  
1 whole nutmeg  
4 oz. Gruyere cheese, grated  
2 oz. Parmigiano-Reggiano, grated  
4 oz. mixed mushrooms,  
rough chopped or torn  
1 ea. yellow onion, chopped  
1 clove garlic, minced  
2 oz. sherry wine  
2 oz. dry white wine  
1 tsp. fresh thyme leaves,minced  
2 Tbsp. marjoram leaves  
Kosher salt and freshground pepper  
Pinch of sugar

## PAPPADELLE PASTA WITH SWISS FONDUE SAUCE, MUSHROOMS, MARJORAM & THYME

### DIRECTIONS

#### Béchamel sauce:

1. Begin making the roux by melting butter in a saucepan over medium heat. Once the butter is melted, whisk flour into the butter until a thick, rough paste forms. Whisk constantly while the mixture bubbles over medium heat. The roux will become smooth and begin to thin
2. In a separate saucepan, bring milk to a simmer and add the roux and whisk until thickened to create a béchamel sauce
3. Grate ½ of the nutmeg into the béchamel sauce. Season with salt and pepper
4. Add the Gruyere and Parmigiano cheeses and whisk until the cheeses are fully melted
5. Set aside and keep mixture warm

#### Pappardelle pasta:

1. Bring a large pot of water to a boil and add a pinch of salt

#### To serve:

Portion pasta in hot bowls and pour some of the béchamel sauce onto the pasta. Garnish with a few stems of marjoram or Italian parsley. Serve immediately.

2. In a sauté pan over medium heat, add a little olive oil and chopped onion, a little salt and pinch of sugar and cook on low heat for about five to ten minutes
3. Add the sherry wine and reduce until onions are caramelized
4. In a separate sauté pan over low-medium heat, add a little olive oil and mushrooms and cook for about three to five minutes, stirring regularly
5. Add minced garlic, thyme and white wine and cook for another minute
6. Add the onion mixture and the marjoram. Season to taste with salt and pepper
7. Cook the fresh pasta in the boiling water. Ladle some of the pasta water into the mushroom and onion mixture and reduce liquid
8. Drain the pasta and add to the onion and mushroom mixture, gently coating the pasta



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# DISCOVERY ZONE

## The latest news, research and discoveries about eczema

by Kathryn Jones



### Scientists identify a gene mutation that may cause AD

Scientists are on a mission to discover better treatments—and a cure—for the most common yet difficult-to-treat form of eczema: atopic dermatitis (AD). But to do that, they must first find the answer to the question, “What causes AD in the first place?”

Researchers have suspected for years that a combination of genetics and environmental factors are at play. But only recently have they identified a possible answer to that million-dollar question. Mutations or defects in a gene called CARD11 could lead to AD.

Scientists from the National Institute of Allergy and Infectious Disease (NIAID), a division of the National Institutes of Health (NIH), and other research institutions discovered these mutations in four unrelated families with severe AD. Their

findings, published in the journal *Nature Genetics*, also suggest these defects could possibly be corrected by supplementing an amino acid called glutamine.

Researchers studied the genetic sequences of patients with AD and identified eight individuals from four families who all had mutations in the CARD11 gene. This gene provides instructions to a cell-signaling protein also of the same name.

When cells don’t communicate with each other properly, it can lead to a host of problems in the immune system, including inflammatory skin diseases like AD. The researchers concluded that CARD11 gene mutations prevent two cell-signaling pathways from activating properly. One of those pathways, known mTORC1, is activated, in part, by glutamine.

While some people in the study with the gene mutations had additional

health issues like infections, others did not. This implied that mutations in CARD11 could cause AD without leading to other medical issues often found in severe immune system disorders.

The scientists also noted that each of the four families had a distinct mutation that affected a different region of the CARD11 protein, and yet, all of these gene mutations had similar effects on T-cell signaling. Growing cultured T-cells from patients with CARD11 mutations with excess glutamine seemed to boost mTORC1 activation, according to the scientists.

In other words, scientists might be able to correct these cell-signaling defects that lead to AD by supplementing glutamine and leucine, another amino acid that activates mTORC1. The researchers are now planning a study to assess the effect of supplemental glutamine and leucine in people with AD with and without CARD11 mutations.



### Does Vitamin D<sub>3</sub> improve eczema? Scientists can't agree

Vitamin D<sub>3</sub> is believed to have many health benefits, from strengthening bones and teeth to regulating insulin levels and staving off cancer. But can taking vitamin D<sub>3</sub> supplements lessen the signs and symptoms of eczema? For the time being, scientists appear to be at a deadlock.

Previous studies have suggested that Vitamin D<sub>3</sub> deficiency is a culprit in the pathophysiology of eczema. In other words, some researchers believe people with eczema who don't get enough Vitamin D<sub>3</sub> in their system have a greater chance of experiencing an inflammatory response that could trigger their AD, asthma or allergic rhinitis (hay fever).

In one such study, 65 patients with moderate to severe AD in Mexico

were given either a cellulose capsule placebo or 5000 IU oral vitamin D<sub>3</sub> per day for three months. At week 12, the vitamin D<sub>3</sub> group saw nearly twice as much improvement in their AD than those on the placebo who remained vitamin D<sub>3</sub> deficient.

Results of this study were reported by Dr. Karen Sanchez-Armendariz of the National Autonomous University of Mexico in Mexico City at the annual meeting of the Society for Investigative Dermatology in Portland, Oregon, in late April 2016. But in May 2017, a new study was published in the journal *PLOS Medicine* refuting previous claims that vitamin D<sub>3</sub> can reduce eczema symptoms.

A team of researchers—led by Dr. Brent Richards of the McGill University and the Lady Davis Institute at the Jewish General Hospital, both in

Montreal, Canada—set out to determine whether genetic changes associated with vitamin D levels lead to a greater chance of developing asthma, AD or high levels of Immunoglobulin E (IgE), an immune molecule linked to allergies.

The team reviewed the genetic and health data of more than 100,000 participants from previous large-scale studies. They claimed to find no statistically significant differences between people with or without any of the four genetic changes associated with lower levels of vitamin D and rates of asthma, AD or IgE levels.

Is vitamin D good for our health? Doctors across the board say absolutely. Vitamin D helps our bodies absorb calcium and essential nutrients like phosphorus to maintain healthy bones and teeth. We can get it from

sunlight, fatty fishes like tuna or salmon, and vitamin D-enriched dairy products and cereal. But can it help with our eczema? The verdict on that one is still out.



### Phase 3 Clinical Trial Starts for AD Drug Tralokinumab

The phase 3 clinical trial have begun for tralokinumab, a new systemic treatment for moderate to severe atopic dermatitis. Manufactured by LEO Pharma, tralokinumab is an investigational human monoclonal antibody that targets cytokine IL-13. Cytokine IL-13 plays a significant role in the development of inflammatory diseases such as asthma and AD.

ECZTRA 1, the first clinical study in the clinical program for tralokinumab in AD, is a randomized, double-blind, placebo-controlled, phase 3 trial to evaluate the safety and effectiveness of tralokinumab. It would be administered to patients with moderate to severe AD who are candidates for systemic therapy.

“In this phase 3 program, we will establish how tralokinumab’s specific targeting of IL-13 might offer a potential new treatment for patients with this complex and chronic disease,” said Dr. Eric Simpson, professor and director of clinical trials at the Oregon Health and Science University Department of Dermatology.

Tralokinumab was first discovered by a biotech company in the U.K. called Cambridge Antibody Technology. After 2007, it was under development by MedImmune, a member of the AstraZeneca group of companies. LEO Pharma acquired the global license to produce tralokinumab from AstraZeneca in July 2016.



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“Eczema patients are in need of new treatment options,” said Julie Block, president and CEO of NEA. “This is a disease with a significant impact on patients’ quality of life, and we welcome LEO Pharma’s investment in new clinical approaches.”



### Pregnancy protein may be used to treat eczema

A team of researchers from Hokkaido University in Japan may have identified a new treatment for allergic responses in atopic dermatitis (AD), and the key ingredient is typically associated with pregnancy.

Human leukocyte antigen (HLA)-G is a protein that interacts with specific cell receptors to stop certain immune responses. It’s best known for its role in protecting the fetus from attack by its mother’s immune system during pregnancy.

According to the study results, which were published in the journal *International Immunopharmacology*, Professor Katsumi Maenaka and his team used an extract made from three common dust mite species to induce atopic dermatitis in laboratory mice.

Dust mites are considered a common causative allergen or a common

allergen that causes symptoms of AD. After applying the dust mite extract on and around the mice’s ears for 15 days, they began to display symptoms of AD, including dry skin, bleeding and scarring.

The areas around the ears affected with AD were then treated with topical HLA-G1, a major form of HLA-G, every other day for 20 days. The mice treated with HLA-G1 showed marked improvement of the skin lesions compared to the mice who had not been treated with HLA-G1.

These results suggest that HLA-G1 may improve symptoms of AD by suppressing the allergic response. The scientists also noted that the mice treated with HLA-G1 did not

experience weight loss, which is a common side effect of certain AD treatments.

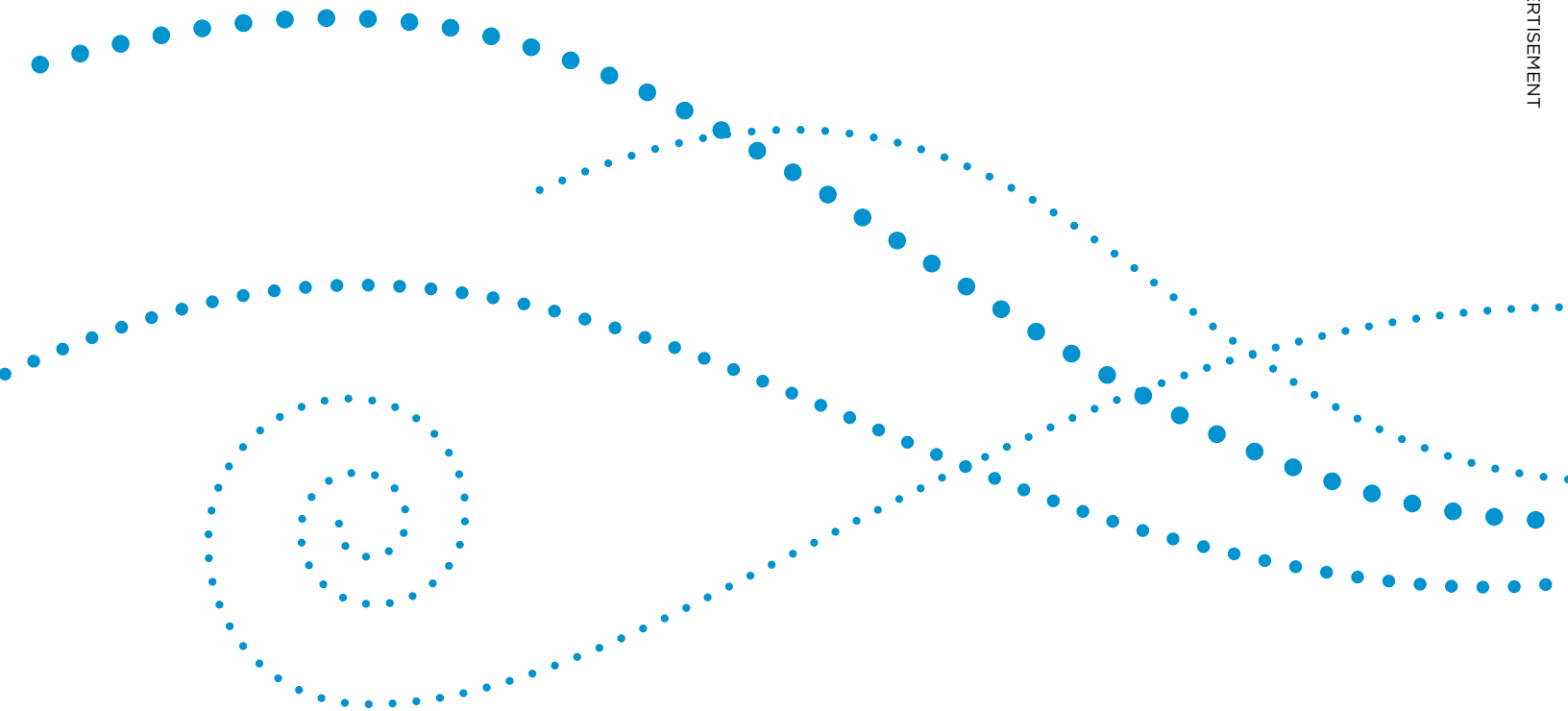
Previous research conducted by Maenaka and his team found that the same HLA-G proteins used in the AD study may also suppress joint swelling for rheumatoid arthritis. “Our study provides novel insights on the function of HLA-G proteins, which can provide clues on efficient therapeutic strategies for patients with atopic dermatitis, rheumatoid arthritis and other related diseases,” Maenaka said.

However, he noted, further investigation is needed to better understand HLA-G’s role in suppressing immune system reactions. ●

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Scientists are making tremendous strides in conducting the groundbreaking research needed to bring us better treatments and a cure. For the latest on eczema-related research, visit [nationaleczema.org/category/discoveries](http://nationaleczema.org/category/discoveries).



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# Managing your child's eczema

*Parenting a child with a chronic skin condition like eczema is no cakewalk. Fortunately, there are things you can do to help your child feel more comfortable and happy in his or her skin. Dr. Robert Sidbury answered questions about the latest treatments and offered skincare tips for children of all ages in a recent NEA webinar. Please note that portions of this Q&A have been edited for clarity and brevity.*

## **My son has been diagnosed with eczema on his hands. They are red, raw, rough, cracked and bleeding, but no itching. Does eczema always itch or could it be something else?**

The absence of itch would make me entertain other possibilities. But you can have certain areas that are such thick skin areas; they may not itch as much, and yet it may still be part of an eczematous process. If they are washing their hands frequently at school, I would want them to moisturize afterwards or else it's going to drive the eczematous process no matter what it is. Vaseline under cotton gloves at night can help drive that moisture in.

**You mentioned redness as a sign of inflammation and irritation, but for children with darker skin tones, it may not be as easy to see that. Do you have recommendations for what to look for in those cases?**

We don't think of inflammation as a color, do we? We think of inflammation as a state. It is redness. But it's also swelling. It's also warmth. And in the case of eczema, it's also itch. One of the important variants of atopic dermatitis that we'll often see in patients with darker skin types is a so-called follicular eczema, which has the look of perma-goosebumps. The skin looks like the hairs are standing on end, but that's actually inflammation—and

that's eczema. So I would look for that follicular pattern to be a clue.

## **Will swimming in the ocean or saltwater pools make eczema better or worse?**

In some cases, yes. In others, no.

When I will actually use it is when I have a child whose skin is so open and so broken down that they can't get into the bath because it stings. Sometimes you can put a little salt into the







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bath, mix it around and get it nice and dilute. Then the water actually stings less. So in that sense, it is beneficial to use salt. Epsom salts are fine. Table salts will do. See how a tablespoon of salt feels and work your way up. But to say whether saltwater is inherently good or bad for eczema is no more appropriate than to say whether a bath is inherently good or bad.

### Can or should you apply moisturizer after a baby has been drooling or after a child is hot, sweaty and dirty from playing in the park?

Starting with the drooling baby, you can take a little coat of Vaseline and mois-

turize the area before the meal, and it can act as a barrier. Then at the end of the meal, you clean them up and apply another coat of Vaseline, and they're good to go. If an 8-year-old comes off the playground covered in dirt, do you want to slather them in moisturizer? No, you don't. But once they clean up, you absolutely do. And if they're going to come in for a little bit, clean up and go back out, you probably wouldn't want them rolling around in the dirt covered in Vaseline and having that stick to their skin.

### On the topic of food sensitivities, what are some things parents can and should be

### looking at to help keep their child's eczema under control?

Eczema is the ultimate feeling of lack of control for the sufferer because you itch and you don't know why. It's the ultimate feeling of lack of control for the parent because it breaks your heart to see them suffer and not be able to fix it. There's a certain element of acceptance of the inability to control all aspects of eczema. That said, you want to do everything in your power to make things better. From a food standpoint, if there seems to be a relevant food trigger, eliminate it or have it assessed by an allergist. If the child wants to have more control by putting on their own moisturizer, let them do it. It's important to pick your battles and act accordingly as long as they are safe, simple things that might help. ●



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*Dr. Robert Sidbury is associate professor in the department of pediatrics and chief of the division of dermatology at the University of Washington School of Medicine. He also is co-chair of NEA's Scientific Advisory Board.*

# *The itch* to write

by Kathryn Jones

*Peter Moffat, the man behind BBC's "Criminal Justice," which inspired HBO's "The Night Of," says he created a lead character with severe eczema for personal reasons.*



**A**fter a night partying with a female stranger, Nasir Kahn wakes up to find her deceased and is charged with her murder, but his streetwise lawyer is determined to get him acquitted. That's the storyline behind the Emmy-nominated HBO crime drama "The Night Of."

Those who've seen it know that there is something unique about the lawyer character, John Stone. He has a raging case of atopic dermatitis, the most common form of eczema. In fact, his skin condition seems to be a primary subplot on the show. Stone is shown scratching his eczemic skin with chopsticks, paying his dermatologist a visit and assuring people it's not contagious.

But that's not the only show to shine a spotlight on severe atopic dermatitis. In fact, "The Night Of" is based off of the British miniseries "Criminal Justice," which aired on the BBC network between 2008 and 2009.

Peter Moffat, the man who wrote "Criminal Justice," created a character with atopic dermatitis with a specific purpose in mind. He wanted to bring awareness to the disease that afflicts more than 10 percent of the world population—himself included.



“Suddenly, millions of people in Great Britain are watching this character I created who has severe atopic dermatitis and asking questions about it.”

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"I pictured this character to be one of those low-life, unattractive lawyer types with dandruff and the one suit they wear every day in court with shiny elbows because they've worn it so often," says Moffat, who himself

was a "lawyer type" before he took up writing full time, having served as a barrister in the British court system. Barristers stand apart from American attorneys in the sense that they wear black robes and colonial wigs during trials.

"At first, I felt a bit guilty and worried I was deducing this disease by attaching it to those characteristics," Moffat admits. "But suddenly, millions of people in Great Britain are watching this character I created who has severe atopic dermatitis and asking questions about it."

"And the same thing happened with 'The Night Of,'" he continues. "I've been following the social media response, and one tweet I really loved said, "'The Night Of' is the story of a guy's eczema with a murder subplot.' I thought that was brilliant."

## Shunned on the subway

Moffat has been living with eczema for as long as he can remember, dating back to the time when he was 5 years old playing sports in his backyard. His mother noticed a rash creep up on the backs of his knees and promptly took him to a physician.



“The doctor said I had infantile eczema, and as I grew up, it would no longer continue to bother me. I went away feeling really reassured,” Moffat recalls. “But then nothing changed. There were steroids, cortisone ointments, home-made stuff—none of which made any significant difference. Fifty years later, my severe eczema is still here.”

Just like the character John Stone, atopic dermatitis wreaks havoc on Moffat’s feet. “I try to wear flipflops or sandals to get as much air as possible to them, but people stare at them when I’m in public, which is fine with me. I don’t care what they think. But it tells me what a real problem it can be for those who are less confident in their public life,” he says.

“They cover up what they shouldn’t be covering up, which I think is bad physically for the management of this disease and also bad emotionally because they feel they have to keep it private. And neither of those things are good.”

He recalls a time when he was riding the subway in London and witnessed two parents look down at his feet with disgust and move their child away from him. “It was obvious to me that they thought this was a contagious disease,” Moffat says.

“Also, it was November in London, when it was a bit cold, and they must have thought I was a bit deranged for wearing flipflops. I wanted to tell them,

‘Listen, guys, it’s fine. This is what it is. You can’t catch it from anyone.’ But my response instead was to carry on doing the same thing I was doing.”

## Awareness is contagious

Moffat believes his main triggers are stress, central heating and, oddly enough, potato peels. “Even just thinking about it I can feel it coming on,” he says. “Here comes the rash, and then you are scratching it, and that speeds it up more.

“I know intellectually that it’s bad to scratch, but despite what I know, I can’t help but do it. When I wake up, I can’t believe how much I’ve scratched myself in my sleep. Even





my wife wakes up in the night from me scratching, so it's not just the sufferers who are impacted."

Intriguingly, his wife, a fellow writer and barrister was also living with eczema until the birth of their first child, when it mysteriously went away. "It cleared up overnight and never came back," Moffat says. "That's interesting to me because it suggests some kind of hormonal component to this disease, which I know not to be true or think not to be true.

"But the lack of medical clarity about what I've been living with for the past 50 years is unsettling," he continues. "I'm longing for a unified perspective from the medical profession and an understanding and awareness from the public on what this disease means for people and what's really going on. I think the more awareness we raise and the more we talk about this disease, we'll be able to change that."

Moffat's motivation to raise awareness around this disease is what led him to join the Understand AD: A Day in the Life program. Sponsored by Sanofi US and Regeneron Pharmaceuticals, Inc. in partnership with the National Eczema Association, Understand AD is an awareness program created to educate people about uncontrolled moderate to severe atopic dermatitis.

"I want other people who have this disease to not be afraid to speak up about it and not feel embarrassed by it," Moffat says. "I want them to feel more normal than they are sometimes allowed to feel. If you can be open about it, talk about it with your friends and family. Wear flipflops on the [subway] if you want to, and don't let the world say you can't." 🌍

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*For more information about Moffat and the Understand AD: A Day in the Life program, visit [www.UnderstandAD.com](http://www.UnderstandAD.com).*

“I want other people who have this disease to not be afraid to speak up about it.”







# Eczema in the Fashion World

**“Godfather of Singapore Fashion”  
Daniel Boey shares how he conquers  
the daily struggles of life with eczema.**

by Kathryn Jones

**W**ith his trademark funky eyeglasses and charming, effervescent personality, Daniel Boey, a.k.a. “The Godfather of Singapore Fashion,” is one of the most highly sought-after fashion show choreographers and producers in the world. His appearance as a judge on “Asia’s Next Top Model” helped make him a household name, and with two hilarious tell-all books under his belt, the busy fashion guru shows no signs of slowing down.

Boey’s latest book “Behind Every \*itch is a Back Story: The Struggles of Growing Up with Rash” reveals how living with eczema has influenced his personality and relationships with other people, particularly in a cut-throat industry like the fashion world where people aren’t always kind. Boey was not shy about his experiences with eczema in his book and took a similarly candid approach during a recent interview with NEA.

**NATIONAL ECZEMA ASSOCIATION:**

***How long have you been living with eczema?***

**DANIEL BOEY:** I began to take notice of it in primary school, when classmates would point out (and sometimes laugh at) the red patches on my joints after physical education classes. I guess I never noticed them before, and it started to make me really self-conscious. As I grew older, the rash started to spread—to the palms of my hands and fingers, my toes, my neck and my scalp and face—which were the most severe. I went through much of my late 20s, through my 30s and 40s, with a flushed, red tinge and a flaky complexion because of this.

**NEA: *What treatments or methods have you tried?***

**DB:** I was willing to try everything from scientific and medical procedures to



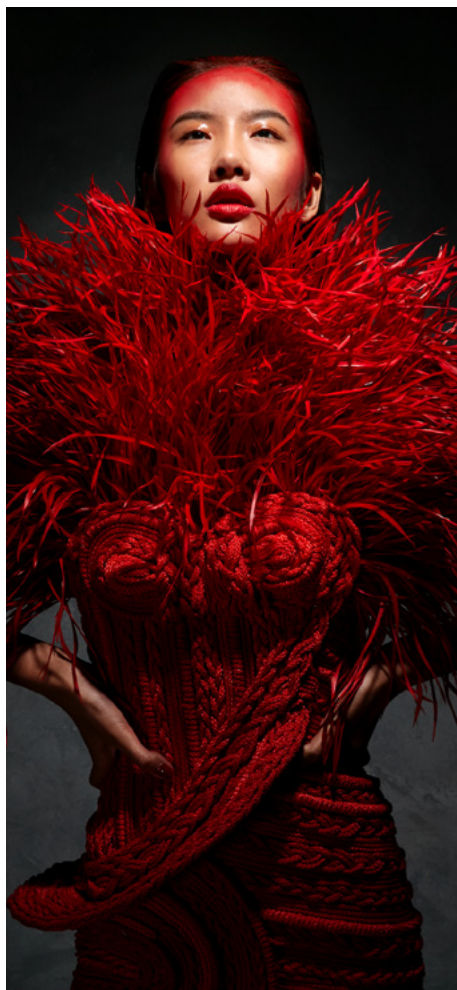
traditional Chinese medicine to old wives' tales. Some worked, while most of the others were just pure hocus pocus. However, the day I finally accepted the fact that eczema cannot be cured, but it can be controlled, was the day I stopped panicking and rational thinking took over. Stress is a huge factor, and once you learn to deal with that, you take a huge step in controlling the breakouts. All the spiritual jaunts resulted in me discovering the merits of meditating, which has been wonderful in helping me cope with stress.

**NEA: Any advice for managing symptoms?**

**DB:** Moisturize, moisturize, moisturize. I have found that scented moisturizers don't work for me, as it sets off my sinuses, so I always go for the unscented versions. I carry a pouch filled with antihistamines, travel-sized moisturizers and hand creams everywhere I go so that I am always within reach of relief. And drink plenty of water. It's important to hydrate both internally and externally. And try not to stress unnecessarily.

**NEA: What are some challenges you've encountered in terms of feeling socially stigmatized or bullied because of your skin?**

**DB:** Apart from being called "lobster" and other nicknames? Hahaha.



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**“I’ve been told before that there is no place in fashion for someone like me, but that made me even more determined to prove everyone wrong.”**

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Sometimes, it's not just the words that are used, but the intent behind them. Words can be mild, but the tone can be cutting. It hurts when you know you've sometimes been excluded from activities or jobs because of the rash and not your personality or abilities. And it took me many years to get over that psychological trauma.

**NEA: What advice would you have for people who are bullied or misunderstood?**

**DB:** I realized from as early as school that people will judge you based on your looks first, abilities second. And I went through life pretty much feeling miserable, then angry, then defensive. I've been told before that there is no place in fashion for someone like me, but that made me even more determined to prove everyone wrong. Thanks to an early mentor, who told me to create my own legacy, I was determined to do just that.

I've grown a thick skin along the way and learned how to bulldoze my way through the fashion industry. I realized that you can't buy respect and friendship. And if people choose not to associate with me because they are embarrassed to be seen with "the rashy one with sinus," then these shallow specimens are not people I really want in my life anyway! So I have chosen to



surround myself with honest, down-to-earth folks who will not hesitate to take me down a few notches if I start becoming an unreasonable diva.

**NEA: What is your advice for people with eczema who are currently hiding their condition?**

**DB:** Life is what you make of it and you alone are responsible for how happy you want to feel. Find your own support system and your own coping mechanism. Couple that with a sensible lifestyle. Know what the triggers are and what forms of relief are out there. Knowledge is power, and the more knowledge you have of your condition, the better equipped you are to fight it. Having the right mindset is half the battle won already.

**NEA: Do you think your decision to go public with your eczema might influence others to look at themselves, each other and the industry differently?**

**DB:** It never occurred to me at the onset that having eczema or sinus could be a stumbling block in fashion. If I had known, I might have taken a different path. I discovered it quickly, however. But by the time I realized the true nature of the industry, I was having so much fun that I decided to fight for my place in it. If people were fixated on my red, rashy face, then I would make my shows so fantastic that they would see beyond that.

**NEA: Have you met others in the fashion world who**

**have eczema or other skin conditions?**

**DB:** The industry has most definitely changed since the 1980s and 1990s. We are seeing models with skin pigment conditions, plus-sized models, transgender models, people with tattoos and piercings, etc., all being embraced today. The advent of the internet has given people who do not traditionally fit into the preconceived ideas of fashion and beauty an avenue to stand out. Hopefully, the same chance can be given to people with eczema, both backstage and front.

**NEA: Do you have any fashion advice for people with eczema?**

**DB:** Do your research and know your fabrics. Know what triggers your breakouts and what fabrics you can wear without a massive reaction. You can still look fashionable and subscribe to the latest trends even if the trends come in fabrics you can't wear. For instance, wool sets me scratching like a rabid monkey, so my "wool" jumpers are actually Supima cotton knits. If I need to wear a wool coat in winter, I wear a layer inside to protect my skin from coming into contact with the wool. Likewise, with wool trousers, I always wear leggings underneath to prevent my legs from flaring up. I also use a quilt with a soft cotton cover instead of a wool blanket.



**NEA:** *Considering you're in the public spotlight these days, is there one thing about you that no one else knows?*

**DB:** I actually have a fear of public speaking! Quite unexpected, huh? Hahaha! People think I lead a flashy, fabulous life, but in reality, I really am no different from anybody else. I have personal issues, work issues, financial woes and insecurities just like most people. But I put on my pants one leg at a time just like most people. I have learned to walk proud and not hide, even when I am having the most severe breakout. When people look at me or call me names, I have grown the courage to just keep on walking. 🌱





# What's Happening at the National Eczema Association

by Karey Gauthier

## Best EAM ever, thanks to you

October was Eczema Awareness Month (EAM), and our theme for 2017 was "Be Well: Mind + Body." All month long, we gave you the tools you need to live their best life with eczema, starting from the inside-out. After all, what's a healthy body without a happy mind?

Special activities for EAM included:

- Weekly Facebook lives with our NEA President and CEO Julie Block
- An Oct. 18 Webinar featuring licensed clinical social worker Jennifer Moyer Darr called "How to Be Well When You Don't Feel Well: The Brain-Body Connection"
- Facebook live chat with The National Institute of Arthritis and Musculoskeletal and Skin Diseases about eczema and mental health
- Weekly emails detailing the connection between eczema and mental health, and ways to support it

ANTHONY TRIAS' TEAM WON THEIR EMPOWER GYM CHALLENGE AND DONATED THEIR WINNINGS TO NEA



MEGAN CASHMAN SHARES HER SPIRIT FOR ECZEMA AWARENESS MONTH ON SOCIAL MEDIA

Our favorite part was seeing members of the eczema community join the conversation and help spread awareness about eczema on Facebook, Twitter and Instagram using the hashtags #eczemamonth, #unhideeczema, and #bewellmindandbody.

NEA would like to send a special shout-out to our community for making this one of the best Eczema Awareness Months of all time. But how will we top ourselves next year? Guess you'll have to wait and see!



## NEA to unveil digital health care tools

In line with its mission to be a trusted source of information for people living with eczema as well as their caregivers and loved ones, NEA is developing web-based tools to make it easier for patients and caregivers to organize and prepare for health care appointments.

The first step in this process is helping people with eczema locate a health care provider they can trust. That's why NEA created the Eczema Provider Finder—launching in early 2018. Visit [EczemaProviderFinder.org](http://EczemaProviderFinder.org) to search for a doctor by location and specialty among a list of providers who have been identified for their expertise and experience in treating eczema.

In the future, NEA plans to launch what's known as an SDM Resource Center. This will be an online portal that gives eczema patients access to checklists, decision aids and action plans so they can better communicate with their health care providers about their medical needs and preferences.

SDM is short for shared decision-making, which is a health care model that recognizes patients as experts over



COMMUNITY MEMBERS ENJOY THE LEADERS IN ECZEMA FORUM AT MT. SINAI

their own health conditions or diseases, while recognizing health care providers as experts in the treatment and management of those diseases. The idea is for these two “experts” to use specialized tools and resources online so they can collaborate before, during and after medical appointments.

For its leadership and innovation in the SDM health care model, NEA recently received the top prize of \$50,000 from the Pharmaceutical Research and Manufacturers of America (PhRMA) Foundation's Value Assessment Challenge Award program.

Stay tuned for more information as NEA works to unveil these tools and resources as part of our continued effort to improve the lives of those affected by eczema.

## An update on our PEER Program



Patients play a fundamental role in the advancement of research through clinical trials and research studies. That's why NEA is excited to share some important research projects that have the potential to change millions of lives.

People Engaged in Eczema Research (PEER) is NEA's platform to engage members of the eczema community in this vitally important research. Through PEER, people with eczema have access to information about clinical trials, research projects, surveys and more.

This fall, we launched the NEA Clinical Trials Directory. This part of the PEER Program allows our community members to search for clinical trials based on location, participation requirements and treatments being studied.

You may have also seen (and hopefully participated in) NEA's survey series



during the fall. In September, we sent you an Advocacy Survey which will help direct NEA's work to influence policies and laws that affect your access to care. The Community Survey we sent in November helped us learn more about you and what topics are most important to you and your family.

We want you to know that we are listening! Eczema research is moving forward at a rapid pace. To keep this momentum going, and continue to unravel the eczema puzzle, patient/caregiver participation is critical. Keep your eyes out for future PEER communications, and get involved if you can.

## Big plans in store for 2018

With the incredible advancements happening in eczema research, from new treatments to better understanding of the causes of the disease, to

fully understanding the impact on quality of life, it has never been more important to bring this information to our community.

Throughout 2017, we hosted a total of six webinars. Topics included:

- Introducing Biologics
- No More Tears: Managing Your Child's Eczema Symptoms
- Treating Eczema and Atopic Dermatitis with Topicals
- Complementary and Alternative Treatments for Eczema: Separating Fact from Fiction
- How to Be Well When You Don't Feel Well: The Brain-Body Connection
- Newly Diagnosed with Atopic Dermatitis? What You Need to Know

You can find archives for all of these webinars on [Nationaleczema.org](http://Nationaleczema.org). We look forward to continuing our Webinar Wednesday program into 2018 with a new series of topics. Want to suggest a topic for us to cover? Contact us at [nationaleczema.org/contact](http://nationaleczema.org/contact) and share your ideas!

This year, we enjoyed our Leaders in Eczema one-day forums at National Jewish Health in Denver, and at Mount Sinai in New York, where we gathered eczema experts to discuss topics ranging from sleep and eczema, to complementary and alternative treatments, to the latest eczema-related scientific advancements and research. These events were nothing short of mind-blowing and gave us all hope.

We are thrilled to provide more opportunities to learn together, support one another and embrace hope next year! In 2018, we will not be hosting the Leaders in Eczema one-day forums, but instead are thrilled to bring back our three-day patient conference! We hope you will join us June 22–24 in Chicago for what is sure to be a life-changing event. See you there! 🌍





# 5 ways to reduce stress in kids with eczema

From yoga and meditation to reading time and art therapy, we hope these tips will help your child feel better from the inside-out.

By Jennifer Roberge



**W**ith all the talk about treatments and dietary changes for eczema out there, it's easy to forget some of the sneakier ways that eczema symptoms can be aggravated. You've looked into finding the right laundry detergents, soaps and cleaning supplies, and you've researched which fabrics are most gentle for eczema.

While all of these factors are important in managing your child's sensitive skin and eczema symptoms, focusing solely on their physical environment could mean you're overlooking something equally important: mental environment.

That's right. Your child's headspace could be triggering rashes, especially those mysterious "we've-been-doing-everything-right" outbreaks. If you're not addressing stress in children with eczema, you could be missing a huge opportunity to improve your child's wellness.

Stress management tricks can help your child curb their eczema outbreaks and grow up with a honed set of self-care techniques. Try a few of these anti-stress methods to find one that works for your child. Remember, everyone is different, and some strategies may work better than others.



## 1. YOGA

Chances are you've tried meditation or yoga on your own time, but children can also benefit greatly from both practices. There are plenty of YouTube channels and DVD programs geared towards bringing younger audiences into these valuable relaxation practices.

Aside from grounding your child during periods of stress, yoga is a great way to improve body health and—quite literally—help them loosen up. Check out “Laughter Yoga” for an especially joy-inducing practice. You can also use it as a great family bonding moment!

## 2. MINDFULNESS & BREATHING EXERCISES

This practice goes hand in hand with yoga techniques. By practicing mindful breathing exercises, such as belly

breathing or cyclical breathing, you can help teach your child important stress-busting techniques that they can use for the rest of their lives. Some recommend using balloons or bubble blowing as a fun tactile component to these calming practices.

## 3. CALMING TOYS AND TOOLS

Especially helpful for younger children, DIY glitter jars help give children with eczema an entrancing visual tool that allows them to focus their energies elsewhere (which is perfect as a distraction technique to minimizing itching!).

Not only is it fun to make, but this snow-globe-like object can also help build a structured routine for calming and being present. Similarly, you can add something like a goo timer (a.k.a. ooze tube) to your soothing toy collection to help calm stressed or upset little ones.

## 4. FAMILY READING TIME

Aside from the fact that regularly reading together will help your child do better in school, story time is also a great way to curb stress in children with eczema. Reading to your kiddo helps you bond, and if they're still working on reading skills, it offers a low-pressure way for them to sit back and listen to a good story.

## 5. ART THERAPY

Science has long shown that making art can have a positive effect on anyone's wellbeing—but art can be especially helpful for the developing mind of a child. Use coloring books, free drawing, and even dough sculpting to give your child a creative outlet for stress. You can even find special creative therapy art books for kids geared towards self-esteem building and stress coping. 🌈



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Jennifer Roberge is the founder of The Eczema Company and the award-winning blog It's An Itchy Little World. Propelled to find a solution for her son's struggles with eczema, allergies and asthma, Jennifer has established herself as the go-to resource on integrative and holistic methods. Learn more on her Facebook and Instagram pages.

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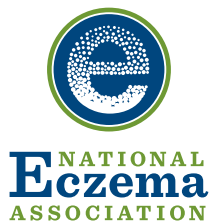
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Thank you NEA for support  
and understanding that's always  
more than just skin deep.

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