

A Guide to Chronic Hand Eczema: What Healthcare Professionals Should Know

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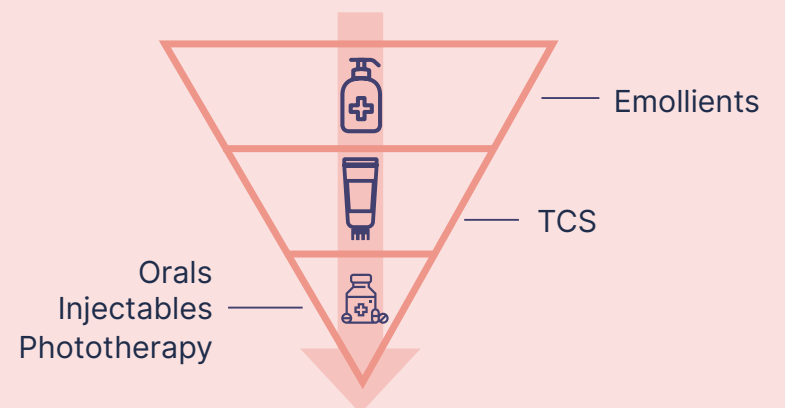
CHE is a complex, multifactorial, skin disease¹

- CHE is defined as hand eczema that lasts ≥ 3 months and relapses ≥ 2 times per year.^{2,3}
- Causes and symptoms differ from patient to patient:¹
 - Patients may present with multiple, overlapping subtypes, and in some patients no etiological factors are identified.^{4,5}
 - Symptoms can include crusting, scaling, fissures, and hyperkeratosis.²
 - Moderate-to-severe CHE is associated with itching, pain, and disturbed sleep, with a negative impact on QoL.^{1,6-8}
- Until recently, the true prevalence of CHE was unclear in the USA, and there are no US guidelines specifically for hand eczema.



Supplemental therapies are available for persistent CHE

CHE treatment begins with basic therapy such as exposure reduction and topical emollients for mild cases. TCS are used in more persistent, moderate severity cases, and phototherapy or systemic treatments are reserved for severe cases that have not benefited from TCS.^{3,9}

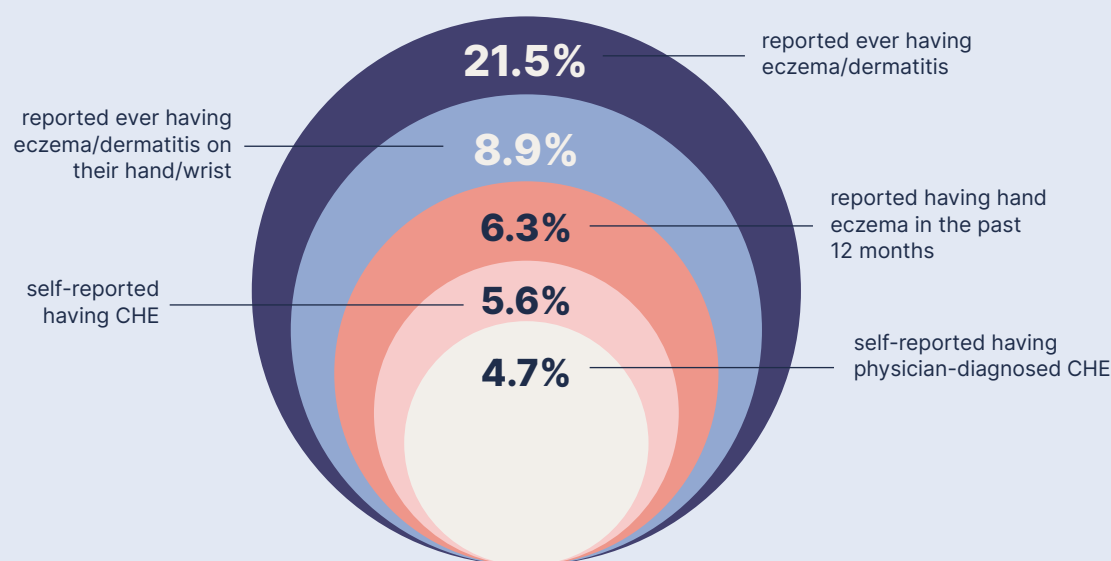


Real-world data for CHE

- Real-world data on CHE is crucial to guide disease management.¹⁰
- Recently, two large, multinational studies investigated the prevalence, characteristics, and impact of CHE in adults across Canada, France, Germany, Italy, Spain, and the UK: CHECK was an online survey of the general population (60,131 participants),¹¹ and RWEAL was a retrospective study to describe physician-recorded signs and symptoms, disease sites, and etiological subtypes among 1,939 patients with moderate-to-severe CHE.¹²

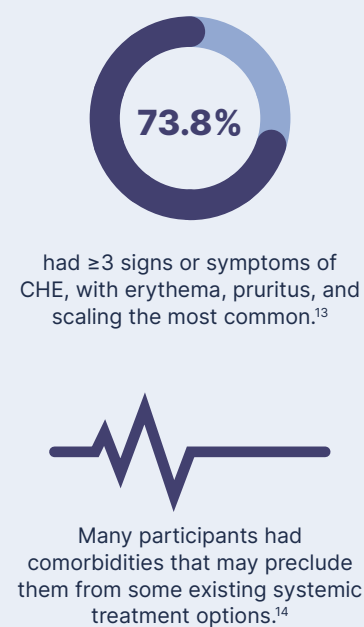
CHE prevalence

Among CHECK participants:¹¹



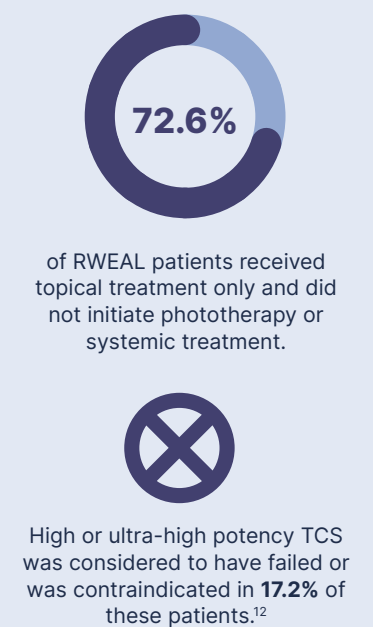
CHE characteristics

Among RWEAL participants:



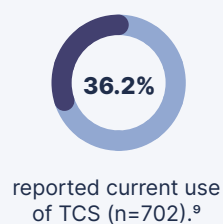
CHE treatment

During the last 12 months,

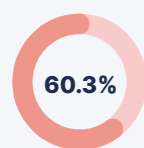


CHE impact

Of CHECK participants with self-reported physician-diagnosed CHE,



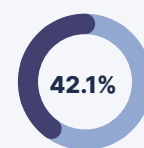
Despite TCS treatment,



of these participants reported moderate-to-severe signs of CHE over the last week, with itching, pain, and sleep disturbance over the last 24 hours.⁹

CHE had a substantial impact on QoL even during TCS treatment.¹⁰

Among CHECK participants with self-reported CHE (n=2,330):¹⁵



attributed their CHE to their occupation or household/leisure activities.¹⁵

Of these participants, 12.2% changed their work assignments or reduced their working hours, 6.7% changed job or retired early, and 36.0% changed household or leisure activities.¹⁵

Key takeaways

- The prevalence of CHE in the general population is **nearly 5%**.¹¹
- **Novel, effective, and well-tolerated treatment options are needed** for patients with moderate to severe CHE in whom TCS is inadequate/inappropriate.¹²
- **CHE significantly impacts quality of life¹⁰**, and is often attributed to occupational or household tasks¹⁵. Many have to adapt work or leisure activities to manage the condition.¹⁵



Learn more about CHE

Visit LEO's awareness website:
<https://www.talkche.com/>

Abbreviations:

CHE: chronic hand eczema; **CHECK:** Chronic Hand Eczema epidemiology, Care, and Knowledge of real-life burden; **DLQI:** Dermatology Life Quality Index; **QoL:** quality of life; **HEIS:** Hand Eczema Impact Scale; **RWEAL:** Real-World trEatment & mAnagement of chronic hand eczema in cLinical practice; **TCS:** topical corticosteroids; **VAS:** visual analogue scale.

References:

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