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### *P11.03*
### HOW AND WHAT ADVERSE EVENTS ARE REPORTED AND CAPTURED IN RANDOMISED CONTROL TRIALS (RCTS) OF EMOLLIENTS IN THE TREATMENT OF ECZEMA?

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Emollients are universally recommended for atopic dermatitis/eczema but knowledge of the frequency and nature of adverse effects associated with their use is limited. To determine how well adverse events are reported in randomised controlled trials (RCTs) which included a leave-on emollient as treatment for eczema. Medline was searched from inception (1946) to May 2022. Inclusion criteria: RCTs of emollients as a leave-on treatment in adults or children with atopic dermatitis/eczema. Exclusion criteria: non-RCTs; patients with other diagnoses included; use of emollient other than as leave-on treatment (i.e. bath additives or soap substitutes, or as preventative); not published in English; not in humans. The references of eligible papers were reviewed for any additional, relevant research. Data were extracted into an Excel spreadsheet and analysed descriptively. An assessment of study quality was carried out using the JBI tool for RCTs. *Results:* From 369 potential papers, 35 papers were included (exclusions: 330 after initial screening; 11 after reading in full; 7 added from references of eligible papers). 89% reported collecting data on adverse events but the methods used were poorly reported (64% unclear). 11% used patient questionnaires/diaries. Adverse reporting in trials which include emollients in patients with atopic dermatitis/eczema are poorly reported. Future research should clearly report how and what adverse events were captured, and collection and reporting should be standardised across studies.

### *P11.04*
### THE GLOBAL ATOPIC DERMATITIS ATLAS: MAPPING THE GLOBAL BURDEN OF AD AND MORE

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Atopic dermatitis (AD) is a highly prevalent, chronic skin disease in children and adults. It ranks 15th among all non-fatal diseases using Global Burden of Disease data (disability-adjusted life years) and first among all skin diseases, making AD an important public health problem worldwide. To develop and maintain the Global Atopic Dermatitis Atlas (GADA), filling gaps in the epidemiological data, developing research tools, conducting original fieldwork and providing recommendations for governments, policy-makers, health professionals and patient organizations based on best evidence. Based on the Global Psoriasis Atlas, GADA was initiated by the International League of Dermatological Societies (ILDS), together with the International Society for Atopic Dermatitis (ISAD), the International Eczema Council (IEC), the European Taskforce for AD (ETFAD) and the International Alliance of Dermatology Patient Organizations (GlobalSkin). The GADA project will have three initial phases: 1) a systematic review of the current epidemiological data on AD burden; 2) international consensus work to improve and standardise epidemiological study designs; and 3) developing research tools for fieldwork. We plan to conduct epidemiological surveys with the developed, standardised methodology, focusing on geographical areas with lack of data. We have published the first GADA report on our website www.atopicdermatitisatlas.org, and will publish our future work in scientific papers and on our website. We intend that GADA will grow and serve as a global resource for all stakeholders dealing with AD.

### *P11.05*
### ASSOCIATION BETWEEN THE SEVERITY OF ATOPIC DERMATITIS AND THE QUALITY OF SLEEP

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*Introduction:* Sleep disorders along with pruritus are indicators of severity in atopic dermatitis (AD) and directly impact the quality of life and emotional well-being of patients and their families. Objective: The first aim of this study was to evaluate the association between the severity of atopic dermatitis, the alteration in sleep quality and its impact on quality of life. *Methods:* This was an observational case series with prospective and cross-sectional chart review conducted in the AD clinic of the Medical Specialties Unit from May to September 2020. 138 patients aged 13 to 88 years were evaluated, including 62 patients with mild, moderate and severe AD. Pruritus, CDLQI, DLQI, and sleep quality using the Pittsburgh Index were assessed by EASI, POEM, and NRS. ITCH. *Results:* 62 patients were included, 61% ($n = 38$) were women and 39% ($n = 24$) men, the average age was 33.14. By EASI, moderate cases were 45% ($n = 28$), followed by mild 32% ($n = 20$) and severe 23% (14). While evaluating sleep quality with the Pittsburgh index, 74% ($n = 46$) slept poorly and 26% well. Associating severity by EASI and poor sleep quality, 80% ($n = 16$) were mild, moderate 68% ($n = 19$) and severe 79% ($n = 11$), without association ($p = 0.699$). In patients who slept poorly ($n = 46$), the POEM evaluation was: mild 67% ($n = 4$), moderate 64% ($n = 21$), severe 100% ($n = 13$) and very serious 78% ($n = 7$), without significant association ($p = 0.066$). A deterioration in sleep quality regardless of severity was observed, being more frequent