SUPPLEMENTARY MATERIAL

Advanced systemic treatments in patients with moderate-to-severe atopic dermatitis: key learnings from physicians practicing in nine Asian countries and territories

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Supplementary table 1. Management practices of atopic dermatitis (AD) across nine countries/territories in Asia

	Healthcare professionals responsible for diagnosing and managing AD	Healthcare coverage for advanced systemic treatments in AD			
Hong Kong (HK) • Children with AD are diagnosed and managed by pediatricians, dermatologists, and sometimes general practitioners • At present, there is no pediatric dermatology subspeciality in HK		Biologics and Janus kinase (JAK) inhibitors are not covered by the standard fees in the public healthcare system, nor included in most private health insurance			
India	 AD is primarily diagnosed by dermatologists Children with AD are sometimes diagnosed and managed by pediatricians At present, there is no pediatric dermatology subspecialty in India 	Healthcare is self-funded with limited government-assisted health insurance or social security			
Indonesia	 Apart from dermatologists, general practitioners and pediatricians are also responsible for diagnosing and treating patients with AD 	JAK inhibitors are not covered by national insurance, but several private insurers offer coverage of JAK inhibitor treatment			
Malaysia	AD is primarily diagnosed by dermatologists	 Healthcare is heavily subsidized in the public setting, with a well-established private system Specific criteria must be met to access biologics and JAK inhibitors through government-supported funding in the public setting 			
Philippines	 Children with AD are primarily diagnosed and managed by pediatricians Moderate to severe AD is usually referred to dermatologists and pediatric dermatologists At present, there is no pediatric dermatology subspecialty fellowship training in the Philippines 	 National health insurance partially covers hospitalization expenses, but it excludes the costs of AD treatment in general Government hospitals subsidize the cost of phototherapy 			
Singapore	 Children with AD are mainly diagnosed and managed by pediatricians even though the condition is often initially treated by family physicians At present, there is no pediatric dermatology subspecialty in Singapore 	 Patients seeking treatment in private health centers must bear the total treatment costs In the public setting, eligible patients received subsidized consultations and medications 			
Taiwan	 AD is primarily diagnosed by dermatologists Children with AD are sometimes diagnosed and managed by pediatricians Apart from dermatologists, general practitioners and family physicians are also responsible for diagnosing and treating patients with mild AD 	 Healthcare of AD is largely subsidized in the public setting, even private clinics are almost covered by national health insurance. National health insurance coverage is available for patients with AD for all topical steroids, topical calcineurin inhibitors, phototherapy and oral immunosuppressants except topical crisaborole 			

		Biologics and JAK inhibitors are covered by national health insurance with stringent inclusion criteria, but its validity is limited to one or two years depending on patients' treatment progress ^a		
Thailand	 Apart from dermatologists, general practitioners and family physicians are also responsible for diagnosing and treating patients with AD 	• National health insurance is available but does not cover any targeted therapies for AD ^b		
Vietnam	 AD is primarily diagnosed by dermatologists Children with AD are mainly diagnosed and managed by pediatricians At present, there is no pediatric dermatology subspecialty in Vietnam 	 Patients with AD do not receive full treatment cost coverage under the national health insurance Biologics for AD treatment are not currently approved 		

AD, atopic dermatitis; HK, Hong Kong; JAK, Janus kinase.

Supplementary table 2. Availability of biologics and Janus kinase (JAK) inhibitors for the treatment of moderate-to-severe atopic dermatitis (AD) across different regions

	Dupilumab	Abrocitinib	Baricitinib	Upadacitinib		
Region						
Europe	✓ (≥6 months)	√ (≥18 years)	√ (≥18 years)	✓ (≥12 years)		
United States	✓ (≥6 months)	√ (≥12 years)	×	✓ (≥12 years)		
Nine countries/terrorities in Asia						
Hong Kong	✓ (≥6 months)	√ (≥18 years)	√ (≥18 years)	✓ (≥12 years)		
India ^a	×	√ (≥18 years)	×	×		
Indonesia	×	√ (≥18 years)	√ (≥18 years)	×		
Malaysia	√ (≥6 years)	×	√ (≥18 years)	√ (≥18 years)		
Philippines	×	✓ (≥12 years)	√ (≥18 years)	×		
Singapore	✓ (≥6 months)	✓ (≥12 years)	√ (≥18 years)	✓ (≥12 years)		
Taiwan	✓ (≥6 months)	✓ (≥12 years)	√ (≥18 years)	✓ (≥12 years)		
Thailand	✓ (≥12 years)	√ (≥18 years)	√ (≥18 years)	×		
Vietnam	*	*	*	*		

AD, atopic dermatitis; JAK, Janus kinase.

A tick (\checkmark) indicates the treatment is approved for moderate-to-severe AD (with the age indication shown in parentheses), while a cross (x) indicates the treatment is unavailable or not approved for use in patients with AD.

The list included only United States Food and Drug Administration- or European Medicines Agency-approved biologics and JAK inhibitors available in the respective countries at the time of writing. The information is up to date as of the end of June 2023 and may not reflect subsequent updates.

^aReimbursement is initially valid for a year. It will only continue in the second year if the patient flares up after the 1-year treatment of biologics or JAK inhibitors.

bThe Thai government perceives AD to be an early onset, chronic inflammatory disease. Hence, covering medications for the entire course of treatment (starting from a young age) would be a substantial financial burden on public health expenses.

^aDupilumab is scheduled to be available very soon in India.