

Supplementary Figure 2. Round 2 Voting Results

The impact of early successful management of AD on the natural history of the disorder and development of other atopic and non-atopic morbidities (e.g. neuropsychiatric conditions) during a patient's lifetime is not currently known

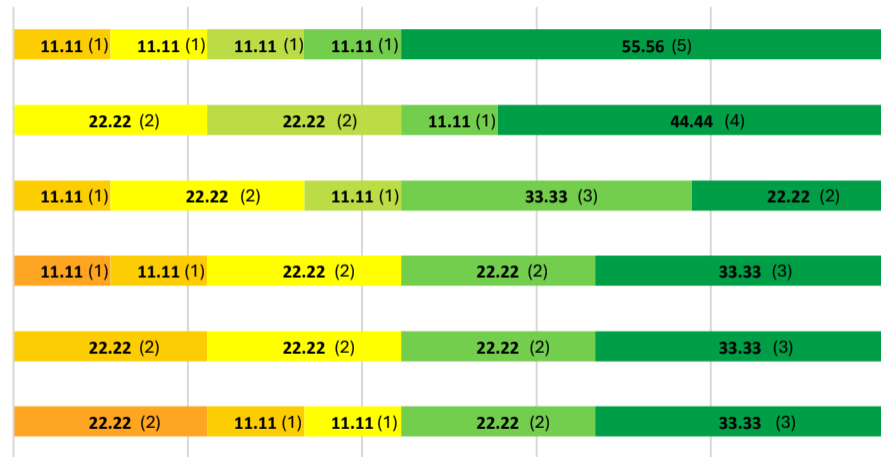
AD is a disease that may spontaneously improve with age in some patients, so the disease-modifying impact of systemic therapy on AD over the longer-term may be difficult to establish

Discontinuation of systemic therapies may be considered when there is a sustained period of clear or almost clear skin, or in response to tolerability concerns

The timing of systemic and biologic therapy dose escalation will depend on factors including therapy choice, disease severity and patient considerations but should generally be after a minimum of 12–16 weeks of treatment

Dose escalation of systemic therapy should be based on inadequate clinical response to treatment due to disease severity

Systemic therapy may be considered for children and adolescents if they have severe, persistent AD that is uncontrolled with optimized topical therapies and treatment adherence, or moderate AD and other factors including poor adherence, highly impaired quality of life or difficulty applying topical preparations



■ 1-Strongly disagree
 ■ 2
 ■ 3
 ■ 4
 ■ 5
 ■ 6
 ■ 7
 ■ 8
 ■ 9-Strongly agree