

LET'S PUT SKIN IN THE GAME

A PATIENT CHARTER FOR PEOPLE LIVING WITH ATOPIC ECZEMA

This charter has been produced by Sanofi in collaboration with National Eczema Society, Eczema Outreach Support, British Skin Foundation, and Allergy UK.



The impact on people's lives and beyond

Atopic eczema is a chronic inflammatory skin condition with wide-ranging financial, social, and psychological impacts on patients and society. ¹



If I was able to control my journey in a more positive way, I would say that I would ideally have been diagnosed earlier. I would have talked to the right people at the point of first getting symptoms, and not having two or more years of worrying and not knowing what was going on. And I could have just been given the best treatment for me at the time.²

A 2021 Sanofi survey of 268 people living with moderate-to-severe eczema found that:

1/2 of people reported having to **take time off** work due to their condition⁴



1/3 of people spend at least an hour a day **managing their condition**³

The cost to the economy of lost productivity is estimated to be between £6,741 and £14,166 per year for patients with moderate-to-severe eczema.⁵

78%

of patients said eczema had negatively impacted their mental health²

60% of people lived with atopic eczema for over **15 years**²

Depression, anxiety, and suicidal ideation are more common amongst people with moderate-to-severe eczema⁶



Our vision for people living with Atopic Eczema



Access to specialist care and psychodermatology services is improved

People living with atopic eczema become genuine **partners in their own care**

People living with atopic eczema are supported to better manage the condition and their **mental health** through **education** and the provision of wider psychosocial services

Dermatology services are supported to provide **patient-centric care**



Our vision for people living with Atopic Eczema

Mental health & psychodermatology

- The mental health impact of atopic eczema to be recognised and acknowledged
- Psychological wellbeing given parity to physical health
- Psychosocial support for mental and emotional wellbeing provided across all care settings

Professional information and education

- Increased dermatology training for community-based healthcare professionals
- Community professionals to have access to dermatology expertise

Patient information and education

- Increased patient education on management options by professionals
- Improved education on long-term management methods among patients and carers

Access to specialist care services

- Timely access to specialist reviews when symptoms do not improve
- Accurate diagnosis via in-person first appointments with dermatologists
- Patient-initiated follow-up (PIFU) if symptoms change and for flare-ups
- Increased shared decision-making around discharge from specialist care

Long-term care for a long-term condition

- Prompt access to care when needed, including timely support during flare-ups
- Regular treatment plan reviews in-person at appropriate intervals
- Teledermatology appointments where appropriate, supporting long-term management
- Full use of the Advice and Guidance GP service to support appropriate management



What is Atopic Eczema?

Atopic eczema is a long term condition which causes patches of itchy, cracked, dry and sore skin. The impacts of the condition are detrimental to patients' wellbeing; impacting their quality of life, increasing their risk of developing depression and other mental illnesses, and affecting their social and professional lives.

According to the National Eczema Association, there are seven different types of eczema,⁷ of which atopic dermatitis is the most common.⁸ Atopic dermatitis is also known as atopic eczema.⁹

About this Patient Charter

This Patient Charter has been developed jointly by British Skin Foundation, Eczema Outreach Support, National Eczema Society, Allergy UK, and Sanofi UK. We all have a shared commitment to improve the lives of people living with atopic eczema. This Charter is intended as a set of principles, wishes and aspirations from the patients' perspective, to help them live better with atopic eczema.

While we are aware the NHS is under enormous pressure and facing high demands on dermatology services, this Charter aims to act as a manifesto for policy change and resource allocation to achieve expanded access to patient-centred services.

We hope this will be a useful guide to policy makers, NHS managers, Integrated Care System leaders, nurses, doctors, allied health professionals and everyone involved in the delivery of care for people living with atopic eczema.

References

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