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# Centre of Evidence Based Dermatology

Impact Review Jan 2021 - Dec 2022



# Welcome

Thank you for taking some time to thumb through our 2021-22 Centre of Evidence-Based Dermatology (CEBD) impact report. We have tried to keep it brief with lots of images as it is meant to highlight just some of our work to give you a flavour of what we do and why it is relevant to you.

I will do my best not to highlight the highlights for you, but a few things strike me on reading this report. The first is how incredibly productive the whole team has been despite the pandemic. I can't get over the fact that we have published over 150 peer-reviewed articles in the last 2 years – I know that numbers of papers are not everything, but it does say something about hard work, influence, commitment and collaboration.

Second, I have to mention the 20th anniversary of your UK Dermatology Clinical Trials Network (UK DCTN). When I started the Network, I was always fearful that it would all fizzle out after a few years, but thanks to a committed team and being in the right place at the right time, the UK DCTN has flourished (pages 6 and 7). Our record in winning independent research funding and producing new impactful results in top journals has never been better. We are especially grateful to the British Association of Dermatologists for their support. It has also been such a joy to see our UK DCTN fellows progressing to become principal investigators in their own right.

Third, it is also heartening to see my colleagues (page 3) taking the CEBD in new directions such as database research, qualitative research, citizen science and women's health (see the feature on pages 14 and 15). We are so lucky to have such a wonderful team who all share our CEBD vision of independent research that matters to people with skin problems. Do take a peek at our core values section on page 4. These have emerged from our group as a whole and they help to explain what drives us in our day to day work. Every new colleague who joins us seems to "get it" – a sense of wishing to attain the truth about causes, prevention and treatment of skin diseases, a commitment for genuine patient and public involvement, adherence to high quality standards in research design and reporting and a desire to share study results widely so that they can be used for patient benefit.



*HCWilliams*

Hywel C. Williams OBE DSc FMedSci  
Co-director CEBD

# New directions

For the last 20 years, research into the treatment and prevention of eczema has been the bedrock of research activity at the Centre of Evidence Based Dermatology. Although eczema will continue to be an important area of research interest for our Centre, we are excited to be developing in new areas and building on the research interests of our emerging research leaders, who will drive the continued success of the Centre for years to come.



**Dr Esther Burden-Teh**  
*Associate Professor and  
NIHR Clinical Lecturer*

My focus is on skin diseases affecting children and young people; using a variety of methodologies I pursue the best evidence to improve diagnosis and treatment. I am currently working on research for psoriasis and acne.



**Dr Sonia Gran**  
*Associate Professor of  
Medical Statistics*

My main research interest is the epidemiology of rare skin conditions such as bullous pemphigoid and Stevens-Johnson Syndrome/Toxic Epidermal Necrolysis using large electronic healthcare records.



**Dr Paul Leighton**  
*Associate Professor of  
Applied Health Services  
Research*

I am a research methodologist with expertise in the use of qualitative methods in the development and delivery of clinical trials. My work has spanned multiple clinical areas and currently includes research into the management of Eczema, Vitiligo and Hidradenitis Suppurativa.



**Dr Rosalind Simpson**  
*Associate Professor and  
Consultant Dermatologist*

I am particularly interested in skin conditions that specifically affect women, in particular vulval skin conditions with lichen sclerosis being the focus of my recent grants

As described on pages 14 and 15 women's health is likely to be a key focus in coming years, as is work around improved diagnosis of skin disease. Working with primary care colleagues to ensure timely diagnosis of skin disease will help us to improve patients' experience of healthcare and prevent worsening of disease through delayed access to effective treatments.

In line with the changing landscape of the NHS, we are expanding research activity to include the role of community pharmacists in managing skin conditions, and as described on pages 9 and 10, digital solutions are likely to play an ever-increasing role in our research portfolio. We will also expand our interests to consider multi-morbidity, and the impact of skin treatments on health more broadly.



# Values of our Centre

As a research group, our core values address the latest challenges facing society today.

The needs of people with skin disease continue to be at the heart of everything that we do; building on our track record of working together with members of the public to address shared priorities. We also focus on reducing health inequalities, particularly in relation to challenges in the diagnosis and treatment of people with dark skin tones.

We are proud to be independent of commercial influence and make our resources freely available. Our research is largely supported through research grants from the National Institute for Health and Social Care Research (NIHR), for which we are very grateful. More widely, we are committed to demonstrating good citizenship within the dermatology community by training and supporting others, generating new knowledge by collaborating rather than competing, reducing research waste and being mindful of our research carbon footprint.



## Living our core values

The [Rapid Eczema Trials](#) project is a 5-year citizen-science initiative that launched in Sept 2022. This innovative project provides a great example of how we try to live up to our core values in our day-to-day research activities.

This project is co-led by Kim Thomas (Professor of Applied Dermatology research) and Amanda Roberts (patient partner with experience of living with eczema) and aims to improve the lives of people with eczema by answering questions that they have about managing their eczema. We hope to conduct several clinical trials in partnership with members of the public and to share all learning and resources openly, so that others can run eczema trials for themselves all around the world.



### Addressing health inequalities

- Testing of EczemaNet artificial intelligence software to assess eczema severity and ensure appropriate for use in skin of colour
- Breaking down barriers to inclusion in research across different groups and communities

### Being good citizens

- Online trial, with most meetings online, reduces use of paper and carbon emissions from travel
- Protocol, database and statistical code shared openly for others to use

### Having Independence

- Driven by eczema community
- Testing non-drug interventions

### Reducing research waste

- Ensure important questions are addressed that are known uncertainties
- Use HOME core outcome set, report fully and transparently

As researchers, we will be providing the methodological framework and support to enable members of the public to decide what questions they would like to tackle, to design their own clinical trials and to share this new knowledge amongst their own communities.

We hope that this project will encourage people who wouldn't normally get involved in research to do so and to feel part of an eczema research community that is making a difference to people's lives.

# Highlights 2021



In recognition for his public service encompassing an outstanding contribution to dermatology research and the National Institute for Health, CEBD Co-Director Prof Hywel Williams is awarded an OBE in the Queen's Birthday Honours list.



Launch of 'Dragon In My Skin' a collaborative venture between CEBD and Prof Fiona Cowdell (Birmingham City University) encompassing a new children's book, animation, song and teacher pack, all designed to help improve teaching around eczema.



Celebration of International Clinical Trials Day with a citizen science skin tone survey aiming to capture the words and descriptions people use to describe their skin with over 1300+ responses received.



Dr Esther Burden-Teh is awarded Best Registrar Paper at the British Association of Dermatologists Annual Meeting for "Seven important criteria for the diagnosis of psoriasis in children: The results of a large UK multi-centre diagnostic accuracy study (DIPSOC study)".



Fourteen dermatology trainees from across the country (along with their group mentors) attend the UK Dermatology Clinical Trials Network Trainee Group training day in London to present the study ideas they've developed as part of this initiative.



CEBD Clinical Associate Professor Dr Rosalind Simpson is awarded an NIHR Advanced Fellowship Award for a package of work on developing diagnostic criteria for vulval lichen sclerosis.

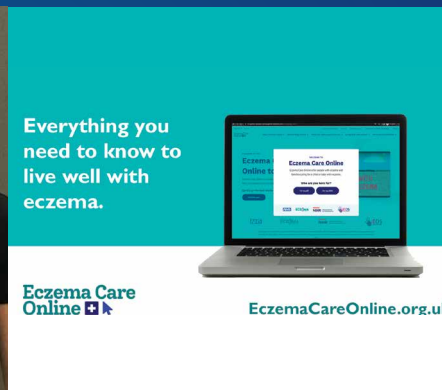
# Highlights 2022



The UK Dermatology Clinical Trials Network is 20 years old – celebrations include review publications, a blog series and inaugural lifetime membership awards.



Success for early career researchers: medical student Kate Lomas (left) awarded best poster presentation at the BSSVD annual meeting; dermatology registrar Amy Cunliffe awarded the Royal Society of Medicine Hugh Wallace Prize for her systematic review.

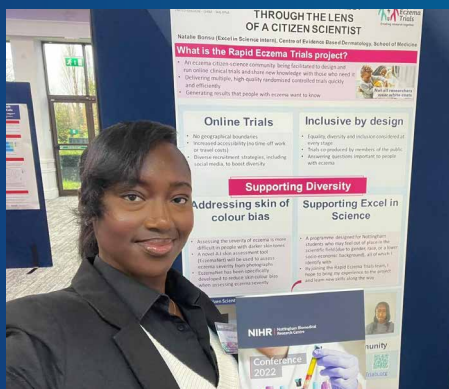


Everything you need to know to live well with eczema.

Eczema Care Online

[EczemaCareOnline.org.uk](https://EczemaCareOnline.org.uk)

Launch of the Eczema Care Online toolkit – an independent, evidence-based web resource that has been proven to help support the self-management of eczema.



Excel in Science intern Natalie Bonsu joins CEBD to support the launch of the Rapid Eczema Trials research programme.



VROOM study results are published in Lancet Respiratory Medicine and show that interrupting methotrexate treatment in psoriasis and rheumatoid arthritis patients for two weeks after a COVID-19 booster vaccination doubles antibody response to the jab.



CEBD PhD student Arabella Baker is awarded best student presentation at the International Clinical Trials Methodology Conference in Harrogate for her work on the Eczema Monitoring Online (EMO) study.



# Celebrating 20 Years of the UK Dermatology Clinical Trials Network

Instigated by CEBD Co-Director Prof Hywel Williams, the UK Dermatology Clinical Trials Network (UK DCTN) was formed in 2002 with the aim of supporting the development of high quality independent, multi-centre clinical trials to provide a better evidence base for the treatment of those affected by skin disease.



From an initial meeting of just 20 interested individuals two decades ago, the UK DCTN has developed and grown to a vibrant, multi-disciplinary network of over 1,000 individuals including dermatology consultants, trainees, nurses, general practitioners, methodologists and patients. In addition to our core research activities, education and research capacity building has become an important function of the network.

## What has the UK DCTN achieved over the past 20 years?

Over the past 20 years the UK DCTN has:

- Supported the development of 20 funded studies with twelve national clinical trials completed, involving the recruitment of over 5,000 participants.
- Helped raise almost £20 million in funding from organisations such as the National Institute for Health Research (NIHR) to support independent dermatology research led by investigators from across the UK.
- Delivered impactful research to support better dermatology patient care including the [PATCH](#) cellulitis studies, [BLISTER](#) (doxycycline for bullous pemphigoid), the [STOP-GAP](#) study on pyoderma gangrenosum, the [BEE](#) best emollient for eczema trial and [APRICOT](#) (anakinra for palmo-plantar pustulosis).
- Made nineteen small grant awards via our Annual Themed Research Call to pump-prime previously under-researched areas.
- Been involved in nine [priority setting partnerships](#) covering topics including vitiligo, hidradenitis suppurativa, acne and skin surgery to help ensure research questions are relevant to all stakeholders and evidenced as a priority to funders.
- Championed research capacity development in dermatology with the establishment and award of over 72 UK DCTN Fellowships supporting trainee dermatologists, staff and associate specialty clinicians, GPs and nurses to become future research leaders.
- Encouraged more dermatology trainees to become actively involved in the development of research studies by founding the UK DCTN Trainee Group scheme which has supported over 80 trainees to date.

The 20th anniversary has been a time to reflect and celebrate with activities over the past 12 months including:

- A [20 at 20](#) blog series highlighting different perspectives and experiences of the UK DCTN.
- The publication of two reviews in Clinical and Experimental Dermatology to illustrate key network achievements over the past two decades .
- The launch of our '[Honorary Lifetime Membership Awards](#)' to recognise those who have made a sustained and significant contribution to the efforts of the UK DCTN. Inaugural awards were made at the 2022 AGM to Dr Ibrahim Nasr (posthumous), Mrs Maxine Whitton and Prof Shernaz Walton.



UK DCTN meeting 2002

## What's happening now?

Ongoing and newly funded studies demonstrate a diverse range of topic areas including acne, eczema, cellulitis and lichen sclerosus with different research approaches and methodologies also coming into focus.

The [BEACON](#) trial seeks to compare several systemics in atopic eczema and is the first platform study of its kind in dermatology while ACO (acne care online) is developing and testing an online intervention to better support acne self-management. The [RAPID Eczema Trials](#) programme is undertaking a citizen science approach to co-produce eczema trials with patients and the [TIGER study](#) is exploring the role of food allergy testing in infants with early onset eczema.

## What's next?

The UK DCTN has a substantial pipeline of trials in development including studies on skin cancer, acne, cellulitis and vitiligo and will continue to support diverse areas of dermatology with the 2023 themed call being on skin of colour.

The UK DCTN is proud of its first 20 years of collaborative work and aims to maintain its position as a world leader in developing and delivering independent, pragmatic, dermatology clinical trials for patient benefit as well as expanding into areas including diagnostics, AI, efficient studies and innovative designs.

## How can I find out more and get involved?

The UK DCTN is open to anyone with an interest in research into skin disease. The level to which you get involved in Network activities is entirely up to - you can join a study or just be kept informed of our activities. Membership of the UK DCTN is free and you can join via our website: [www.ukdctn.org](http://www.ukdctn.org). Follow us on Twitter [@uk\\_dctn](https://twitter.com/uk_dctn) to stay up to date with the latest news and developments.

*The UK DCTN is grateful to the British Association of Dermatologists and the University of Nottingham for financial support of the Network.*

“I really want to thank you all again for your support. I am a junior researcher (and not a dermatologist) and the support from the UK DCTN has been amazing in getting this off the ground ”

Dr Fergus Hamilton, A&E Clinician Bristol, Lead Investigator Dexacell cellulitis study.

“It's great to see such collaboration going on and to be involved. It is so important that research is directly relevant to patients in the real world and the fact that the members are from differing backgrounds helps achieve this. Credit to the UK DCTN for ensuring that the 'patient voice' is heard loud and clear. ”

Tim Burton, UK DCTN Patient Representative

“Thanks to the UK DCTN we have a robust platform of questions to inform our thinking when it comes to selecting research questions about acne. What a difference the generous contribution from the UK DCTN has made in the last 10 years - a big thank you on behalf of all acne enthusiasts and I know there are many people with acne who would say the same! ”

Prof Alison Layton, Consultant Dermatologist Harrogate

“Not only has the UK DCTN increased good quality independent clinical trials it has also developed researchers for the future. Its clinical fellowships have encouraged and enhanced understanding of clinical research. Many past fellows are now research leads in their respective departments and leading their own research teams. This has greatly contributed to dermatology research being undertaken across all of the U.K. and encouraged many departments to take part in clinical studies. ”

Dr Tanya Bleiker, Consultant Dermatologist Derby and recent past President of the BAD.



# Helping people to self-manage their eczema more effectively

Eczema is a common condition that causes the skin to become very itchy and sore. People often struggle to know how best to manage eczema and find treatment schedules confusing. To help support people with eczema management, we have developed and tested a new website ([EczemaCareOnline.org.uk](http://EczemaCareOnline.org.uk)) which provides accessible information about how to live well with eczema. The website has been designed in partnership with people with eczema, and parents/carers of children with eczema, as well as experts in the field, using techniques to help people change the way they manage their eczema and incorporates the best available evidence.

## How we developed Eczema Care Online

We talked to over 150 people with eczema whilst developing and testing the Eczema Care Online website, including children, young people, and parents/carers of children with eczema. These conversations helped us to understand what information people with eczema would like to know about managing their disease, and how best to share these key messages. We developed the website content and shared it with people so that they could help us improve it. We then tested the website in two large randomised controlled trials.

Eczema Care Online is useful for anyone with eczema but has been specifically designed to support parents of children who have recently been diagnosed with eczema, and for young people who are just starting to care for their own eczema. It contains information about:

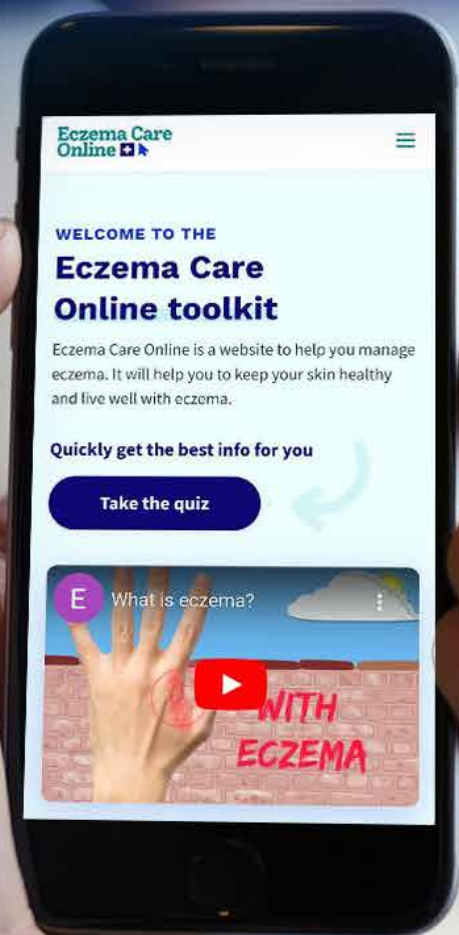
- Improved use of flare control creams to get control of the eczema
- Regular use of moisturisers (emollients) to prevent flare-ups
- Avoidance of irritants and triggers
- Minimising scratching
- Emotional management and daily living

“I like that Eczema Care Online is not just about the medical treatments. It has a wealth of information on all aspects of living with eczema, such as how to cope with sleep and managing stress. It was nice to have an acknowledgment that eczema can be stressful.”

Eczema Care Online trial participant

“I’ve been dealing with eczema for years and thought I knew it all, and was really surprised by the helpful new tips I found.”

Eczema Care Online trial participant



## Eczema Care Online improve eczema symptoms

We tested the website in two clinical trials, one that recruited parents of children with eczema and one that recruited young people with eczema. Both trials tested whether using the website was able to improve eczema symptoms and followed people for up to a year.

These two trials both found that the group of people who had been given access to Eczema Care Online had improved eczema symptoms and were better able to understand and cope with their disease. The results of these trials have been published in the British Medical Journal.

### Using Eczema Care Online

We hope that Eczema Care Online will be used widely and will be useful for anyone with eczema. We are working with eczema charities to share and promote the website, and are encouraging health care professionals (including GPs, dermatologists, pharmacists, nurses and health visitors) to signpost to the website during their eczema consultations. In so doing, they will help to ensure that all people with eczema receive simple, consistent messages about how to manage their eczema.

“Very helpful resources indeed. Since it has become available, I have tried to include it in every Advice & Guidance that I do!”

Dr Kyle Tang, Dermatologist, Nottingham

“Congrats on the ECO paper in the BMJ this week – it looks wonderful and I have been disseminating around my clinical networks as this will be a really useful, national, harmonised resource for people affected by eczema.”

Dr Robert Boyle, Paediatric Allergist, London



### Two treatments used well

To aid dissemination of Eczema Care Online, we created a document that presents a summary of all the online information in a visually pleasing, easy-read document.



# Impact by numbers

**163**

Peer-reviewed publications  
2021-2022

Pages 16-17



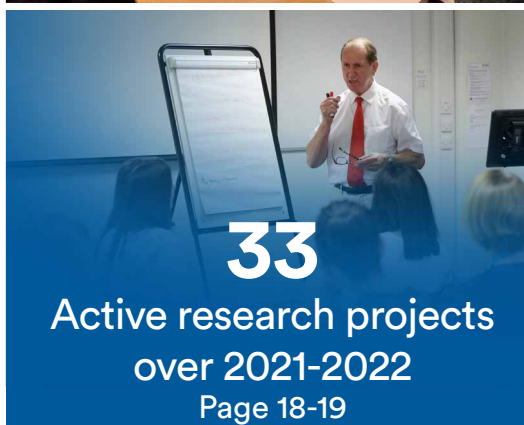
**35**

CEBD  
Patient Panel  
members

**£20** million

in funding raised to  
support independent  
dermatology research  
with the help of the  
UK DCTN

Pages 7-8



**33**

Active research projects  
over 2021-2022

Page 18-19

**103**

signed up to rapid  
eczema trials in first  
3 months

Page 4



**6,248**

Unique Eczema Care  
Online website visits  
from 79 countries

Pages 9-10



**21**

Core Outcome Sets  
for Dermatology

Pages 12-13

**20**-year  
anniversary  
of UK DCTN

Pages 7-8



**72**

UK DCTN Fellowships  
awarded, supporting  
the development of  
future research leaders

Pages 7-8





# A busy time for dermatology core outcome sets

Developing core outcome sets for use in clinical trials of skin diseases is just one way that researchers at the Centre of Evidence Based Dermatology are tackling research waste.

A core outcome set is an internationally agreed set of outcomes that should be collected in all future clinical trials of treatments for a given disease. Whilst this may sound like a simple ambition, we know that this is not at all simple and involves a lot of hard work, good will, collaboration and compromise from people all around the world.

Dermatology has been at the forefront of core outcome set development for the last decade and researchers from the Centre of Evidence Based Dermatology have been helping to drive much of this work. There are now core outcome sets in development for 21 different skin conditions ranging from common skin conditions, such as eczema, to rare skin diseases, such as pyoderma gangrenosum. Some core outcome sets are complete, and now concentrating on encouraging uptake of the core set, and others are just starting on this journey.

## CHORD-COUSIN Collaboration (C3)

We are fortunate in the field of dermatology to have support organisations that have been specifically established to support research teams in developing and achieving consensus over their core sets. This work started with the Cochrane Skin Core Outcome Set Initiative (CS-COUSIN), which aimed to provide methodological standards and support for core outcome set developers, and has now been taken up through the merging of two separate organisations to form the CHORD-COUSIN Collaboration.

Members of the Centre of Evidence Based Dermatology have driven the development of both organisations and continue to provide methodological support. We also support colleagues in other disease areas who are interested in developing core outcome sets of their own, such as the COST-CF project in cystic fibrosis that is developing an umbrella core set for use in all cystic fibrosis trials regardless of the organ targeted by a specific treatment.

## Why core outcome sets make a difference

Clinical trials of treatments for skin disease are conducted all around the world and often test treatments in different ways and using different outcomes. If different outcomes are measured, or the same outcomes are measured but in different ways, this makes it very hard to combine the results of different studies and to get a proper sense of whether a treatment is beneficial or not.

Continuing to spend time, money and the good will of patients without considering the possibility of developing a standardised approach is wasteful and inefficient.

By working together to improve the design of clinical trials around the world, we hope to improve patients' lives and contribute to a world where every clinical trial can have a second life by contributing to meta-analysis in systematic reviews.



Initiative	Disease area	Stage of the Core Set	Members of CEBD involved
<a href="#">HOME</a>	Eczema	Core outcome set agreed, working on implementation and tracking uptake	Hywel Williams Kim Thomas Joanne Chalmers Laura Howells Arabella Baker
<a href="#">Corals</a>	Lichen sclerosus	Core outcome domains agreed, working on defining outcome instruments	Rosalind Simpson Kim Thomas
<a href="#">UPGRADE</a>	Pyoderma Gangrenosum	Core outcome domains being agreed	Kim Thomas
<a href="#">C3 (previously CS-COUSIN)</a>	All skin conditions	Providing methodological support and networking opportunities for core outcome set developers	Hywel Williams Laura Howells Kim Thomas Joanne Chalmers

Table 1: Core Outcome Set initiatives led by members of CEBD

Outcome instrument	Disease area	Link to Core Set	Members of CEBD involved
<a href="#">POEM</a>	Eczema	Developed to measure eczema symptoms as part of the HOME core set	Hywel Williams
<a href="#">RECAP</a>	Eczema	Developed to measure eczema control as part of the HOME core set	Laura Howells Kim Thomas Joanne Chalmers Sonia Gran
<a href="#">VNS</a>	Vitiligo	Developed to measure noticeability of vitiligo, potential candidate instrument for VOICE core set	Kim Thomas Jonathan Batchelor

Table 2: Outcome instruments developed by members of CEBD



The HOME Core Outcome Set was finalised at the HOME VII meeting in Tokyo, Japan (left) and later celebrated by members of CEBD (right).

# Focusing on women's health

CEBD has developed a research interest in skin issues that impact women and girls. Led by Dr Rosalind Simpson, Associate Professor and Consultant Dermatologist, our research has focused on conditions which affect the vulval area. Vulval skin conditions are relatively common but poorly understood and remain a taboo subject in many cultures. The [CEBD Vulval and Genital Disease hub](#) aims to raise awareness, generate high quality evidence on priority topics and build international collaborations to stop this from being a neglected area of health.

## Lichen sclerosis

Lichen sclerosis (LS) is a long-term condition that mainly affects genital skin in adult females. The itching and discomfort, which arise from skin inflammation, can greatly impact on daily activity and sexual function. Left untreated, scarring can cause narrowing of the vaginal opening. Impacting at least 1% of women, LS increases the risk of vulvar cancer by 3-5%.

LS is often not recognised by healthcare professionals. The diagnostic delay can be detrimental as over time the condition can become more advanced. Even when diagnosed, there is also a lack of high-quality studies to inform treatment decisions. Despite this, use of strong topical steroids is accepted practice, and effective in getting LS under control in around 70% of women.

In 2018, we published results from the [Lichen Sclerosis Priority Setting Partnership](#) which identified the 'Top 10' future research priorities in this area. The [Vulval and Genital Disease hub](#) has addressed, or has funding to address, several of these priority areas.

**Diagnostic criteria work:** The NIHR have funded a program of work to develop diagnostic criteria for LS to help non-experts and patients to recognise the condition. The aim is that the final diagnostic tool can be implemented into daily practice e.g. cervical smear and maternity appointments, as well as during routine GP visits for vulval symptoms, to pick up LS earlier and get patients on the correct treatment pathway sooner.

**Proactive against reactive therapy for the prevention of lichen sclerosis exacerbation and progression of disease (PEARLS)** is a major trial [funded by the NIHR](#). This pragmatic, parallel group randomised controlled trial comparing topical steroid twice weekly (proactive) versus as required treatment (reactive) will commence in 2023 and will provide evidence for the long-term management of people with well controlled LS.

[Core Outcomes for Research in Lichen Sclerosis \(CORALS\)](#) is a major international initiative to agree core outcomes for all future clinical trials in LS. Major collaborators include the International Society for the Study of Vulvovaginal Disease (ISSVD) and British Society for the Study of Vulval Disease (BSSVD).

**LS and urinary incontinence:** Chronic exposure to urine is a trigger factors for LS in men. Dr Lisa Kirby was awarded a [British Skin Foundation Award](#) to investigate the link in women. Her work has shown women with LS are 2.5 times more likely to have urinary incontinence compared to women with other vulval conditions. Studies are now needed to understand which comes first, incontinence or LS. The results were presented at the ISSVD meeting in Dublin in 2022.

**Laser (fractional CO<sub>2</sub>) therapy for LS** is not routine clinical practice in the UK but is being used in the private sector as well as overseas for a variety of vulvovaginal diseases. Dr Fiona Tasker led a [systematic review of current evidence for laser use in LS](#). Perceptions around laser therapy were evaluated in an online survey conducted by BMedSci students Divya Prabhu and Mischa Mortleman in collaboration with BSSVD. Dr Lisa Kirby further explored the views of patients on laser therapy as part of a BSSVD research grant. The findings are being analysed and will be used to help design future studies.





*The XXVI World Congress of the international Society for the Study of Vulvovaginal Disease, Dublin, Ireland, 2022*

## **Other vulval conditions/areas of women's health:**

### **Vulval Crohn disease**

Vulval Crohn disease (VCD) is a rare yet distressing manifestation of Crohn disease. The presenting features include swelling, redness and ulceration, often mimicking other diseases, making diagnosis challenging. Current treatments are mostly based on gastrointestinal Crohn disease and no vulval treatment guidelines exist; metronidazole is frequently used in clinical practice. BMedSci student Nina Simon led a systematic review to evaluate the evidence for Metronidazole in VCD. Results suggest that metronidazole is useful in managing VCD, however, the quality of evidence was low and randomised controlled trials are needed. Nina's work was presented at the BSSVD 2022 annual meeting in Glasgow.

### **Vulval database**

In collaboration with the BSSVD, BMedSci student Kate Lomas carried out a Delphi survey of UK expert clinicians to identify which items should be included in a national vulval disease database. The work was presented at the BSSVD 2022 annual meeting in Glasgow where Kate won the prize for 'best poster presentation'.


UK DCTN Fellow, Dr Marianne De Brito, is analysing a single centre database with over 400 patients (developed and used in Blackburn) to understand the breadth of conditions seen in a district general vulval clinic. The ultimate aim of this work is to develop a national database for vulval conditions.

## **Collaborations**

Dr Rosalind Simpson is research lead for the BSSVD and has an active role on the BSSVD Council. She has collaborated to involve the ISSVD in research projects and she has also set up a partnership research grant in conjunction with the Wellbeing of Women/BSSVD to support early career researchers to deliver projects in this area of women's health.

# Top publications

Over the last two years, we have published over 160 publications,. Here we provide a spotlight on some of our most influential publications that have changed clinical practice, informed guidelines and improved the lives of people with skin disease.




Eczema Care Online behavioural interventions to support self-care for children and young people: two independent, pragmatic, randomised controlled trials. [BMJ 2022; 379; e072007](#)

**KEY FINDINGS:** The Eczema Care Online website improves eczema severity when used alongside standard care



Emollients for prevention of atopic dermatitis: 5-year findings from the BEEP randomized trial. [Allergy. 2022;00:1–12.](#)



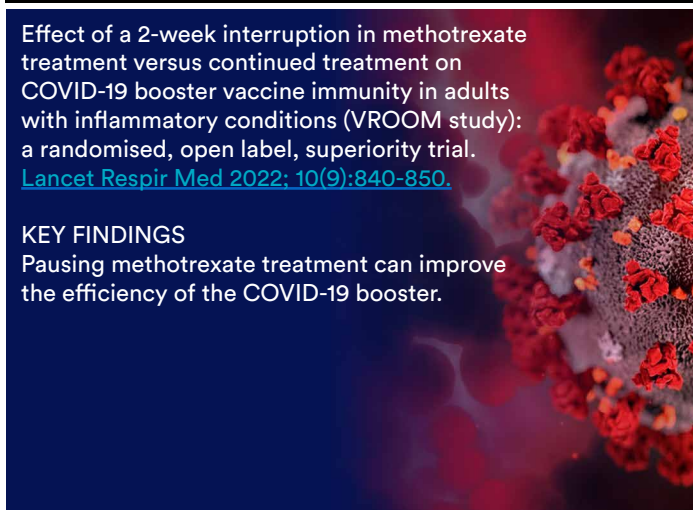
Strategies for using topical corticosteroids in children and adults with eczema [Cochrane Database Syst Rev. 2022; 3; CD013356](#)

**KEY FINDINGS:** In the event of a flare of moderate to severe eczema, once daily topical steroid use is probably enough. When experiencing regular flares, weekend (proactive) therapy can be used.

Identifying the best predictive diagnostic criteria for psoriasis in children (< 18 years): a UK multicentre case-control diagnostic accuracy study (DIPSOC study) [Br J Dermatol 2022; 186\(2\):341-351](#)

**KEY FINDINGS:** This study evaluated a list of consensus-based diagnostic criteria and found which were most helpful for identifying psoriasis in children and young people.

**KEY FINDINGS:** Daily emollient application during the first year of life does not prevent atopic dermatitis, food allergy, asthma or hay fever.



Effect of a 2-week interruption in methotrexate treatment versus continued treatment on COVID-19 booster vaccine immunity in adults with inflammatory conditions (VROOM study): a randomised, open label, superiority trial. [Lancet Respir Med 2022; 10\(9\):840-850.](#)

**KEY FINDINGS**  
Pausing methotrexate treatment can improve the efficiency of the COVID-19 booster.



Incidence, prevalence and mortality of bullous pemphigoid in England 1998-2017: a population-based cohort study [Br J Dermatol 2021; 184\(1\):68-77.](#)

**KEY FINDINGS**  
Bullous pemphigoid should no longer be considered a “rare disease” in older people and is associated with high mortality in the first 2 years after diagnosis.

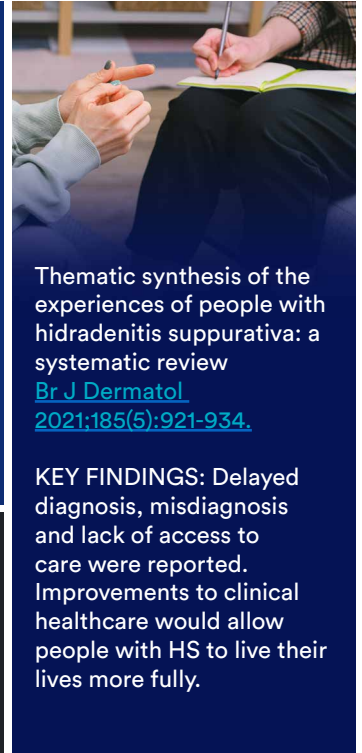


# Top publications



The HOME Core outcome set for clinical trials of atopic dermatitis  
[J Allergy Clin Immunol 2022 Jun;149\(6\):1899-1911.](#)

**KEY FINDINGS:** This paper provides an overview of the HOME core outcome set for eczema clinical trials. It covers key activities over the last decade.

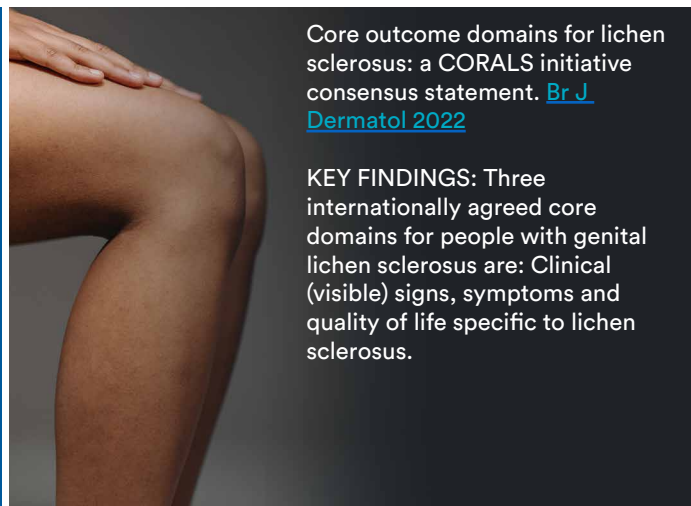
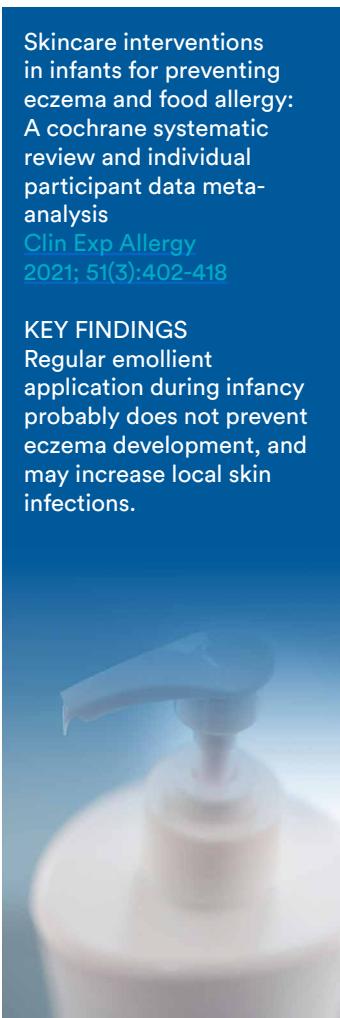


Thematic synthesis of the experiences of people with hidradenitis suppurativa: a systematic review  
[Br J Dermatol 2021;185\(5\):921-934.](#)

**KEY FINDINGS:** Delayed diagnosis, misdiagnosis and lack of access to care were reported. Improvements to clinical healthcare would allow people with HS to live their lives more fully.

Skincare interventions in infants for preventing eczema and food allergy: A cochrane systematic review and individual participant data meta-analysis  
[Clin Exp Allergy 2021; 51\(3\):402-418](#)

**KEY FINDINGS**  
Regular emollient application during infancy probably does not prevent eczema development, and may increase local skin infections.



Core outcome domains for lichen sclerosus: a CORALS initiative consensus statement. [Br J Dermatol 2022](#)

**KEY FINDINGS:** Three internationally agreed core domains for people with genital lichen sclerosus are: Clinical (visible) signs, symptoms and quality of life specific to lichen sclerosus.

Using the Vitiligo Noticeability Scale in clinical trials: construct validity, interpretability, reliability and acceptability. [Br J Dermatol 2022; 187\(4\):548-556](#)

**KEY FINDINGS:** The Vitiligo Noticeability Scale can be used to assess acceptability of repigmentation of vitiligo patches.



Effectiveness and safety of lotion, cream, gel, and ointment emollients for childhood eczema: a pragmatic, randomised, phase 4, superiority trial.  
[Lancet Child Adolesc Health 2022; 6\(8\):522-532](#)

**KEY FINDINGS:** There was no difference in effectiveness of the four types of moisturiser used in the study suggesting that patients can safely choose the moisturiser that best suits them.



# Our research

## Summary of recently completed and ongoing research

Project	Research Type	Funded by	Duration (status)
<b>Eczema</b>			
RAPID Eczema Trials	Programme Grant	NIHR PGfAR	2022 – 2027 (ongoing)
BEACON: Best systemic treatments for adults with atopic eczema over the long term	Platform RCT	NIHR HTA	2022 – 2026 (in set-up)
Dragon in my Skin	Public engagement, knowledge mobilisation	NIHR Knowledge Mobilisation Research Fellowship (Fiona Cowdell PI)	2020 – 2021 (complete)
Topical treatments for eczema: a network meta-analysis	Systematic review	NIHR RfPB	2021 – 2023 (ongoing)
BEE: Best Emollient for Eczema study	RCT	NIHR HTA	2017 – 2020 (complete)
BEEP: Barrier Enhancement for Eczema Prevention study	RCT	NIHR HTA	2014 – 2022 (complete)
ECO: Eczema Care Online study	Programme Grant	NIHR PGfAR	2017 – 2023 (ongoing)
Strategies for using topical corticosteroids: Cochrane systematic review	Systematic review	NIHR PGfAR	2018 – 2021 (complete)
Long-term safety of topical corticosteroids: a systematic review	Systematic review	NIHR PGfAR	2020 to 2022 (complete)
Phototherapy for Atopic Dermatitis	Systematic Review	American Academy of Dermatology	2020-2021 (complete)
EMO: Eczema monitoring Online	RCT	None	2020 – 2022 (complete)
TIGER: Trial of food allergy (IgE) tests for eczema relief	RCT	NIHR HTA	2022 – 2025 (ongoing)
Navigating primary care with Topical Corticosteroid Withdrawal (TSW)	Qualitative study	NIHR SPfCR	2023-2024 (in set-up)
HOME Harmonizing Outcome Measures for Eczema initiative	Outcome research	None	2008 – present (ongoing)
<b>Women's health</b>			
CORALS: Core Outcomes for Research in Lichen Sclerosus	Outcome research	UK DCTN Themed Call award	2018 – present (ongoing)
Is urinary incontinence associated with lichen sclerosus in females? A systematic review and cross-sectional study	Systematic review, cross-sectional study	BSF and British Association of Dermatologists	2019 – 2021 (complete)
The patient perspective: treatments for vulval lichen sclerosus and the potential use of laser	Patient interview study	British Society for the Study of Vulval Disease	2021 – 2023 (ongoing)
Addressing a neglected area of women's health: developing diagnostic criteria for vulval lichen sclerosus	Diagnostics	NIHR Advanced Fellowship	2021 – 2027 (ongoing)
PEARLS: Proactive against reactive treatment for lichen sclerosus	RCT	NIHR HTA	2023 – 2028 (ongoing)

<b>Vaccine</b>			
<b>VROOM trial</b>	RCT	NIHR HTA	2021 – 2022 (complete)
<b>The association between medicines/ vaccines commonly prescribed to older people and bullous pemphigoid: a UK population-based study</b>	Database study	NIHR HTA	2022 – 2023 (ongoing)
<b>Acne</b>			
<b>ACO: Developing and testing an online intervention to support self-management, improve outcomes and reduce antibiotic use in acne</b>	Programme Grant	NIHR PGfAR	2022 – 2027 (ongoing)
<b>SAFA: Spironolactone for Adult Female Acne study</b>	RCT	NIHR HTA	2018 – 2021 (complete)
<b>Acne-ID: Investigating the benefits and harms of reduced daily dose oral isotretinoin in the treatment of acne</b>	RCT	NIHR HTA	2023 – 2028 (ongoing)
<b>Cancer</b>			
<b>Assessing the feasibility of implementing the Fast Raman device for testing tumour clearance during Mohs micrographic surgery of basal cell carcinoma</b>	Diagnostics	NIHR RfPB	2018 – 2023 (ongoing)
<b>UK Keratinocyte Cancer Collaborative: cutaneous SCC Atlas and Biorepository</b>	Database study	BSF	2022 – 2025 (ongoing)
<b>Raman spectral imaging of surgical margins of cutaneous squamous cell carcinoma (cSCC) treated by Mohs micrographic surgery</b>	Diagnostics	BSF PhD	2022 – 2025 (ongoing)
<b>Rare Diseases</b>			
<b>UPGRADE: Developing a Core Outcome Set for pyoderma gangrenosum</b>	Outcome research	No funding	2018 - present (ongoing)
<b>Informing the development of clinical trials in autoimmune blistering skin diseases</b>	Database study	NIHR RfPB	2019 – 2020 (complete)
<b>PEM PSP: Pemphigus and pemphigoid Priority Setting</b>	Priority Setting Partnership	Nottingham Hospitals Charity	2018 – 2022 (complete)
<b>THESEUS: Treatment of Hidradenitis Suppurativa Evaluation Study</b>	Cohort study	NIHR HTA	2019 – 2022 (complete)
<b>Other areas</b>			
<b>DIPSOC: Developing diagnostic criteria for psoriasis in children</b>	Diagnostics	NIHR DRF	2016 – 2020 (complete)
<b>Vitiligo Noticeability Scale validation study</b>	Outcome research	NIHR RfPB	2019 – 2021 (complete)
<b>Community pharmacy skin research priority setting partnership</b>	Priority Setting Partnership	NIHR School of Primary Care Research	2021 – 2022 (complete)
<b>COAT: Cellulitis Optimal Antibiotic Treatment</b>	RCT	NIHR HTA	2022 – 2025 (ongoing)

We also work collaboratively on projects outside of dermatology when our methodological expertise is relevant. Current projects include supporting the development of Core Outcome Sets and diagnostic tools in other disease areas, supporting initiatives to improve diversity in research (e.g. Trial Forge Include framework), realist evaluation of healthcare in different settings, and supporting regional partnerships in strategic areas of strength such as liver disease and inflammatory conditions.

# Meet the team



Row 1: Prof Hywel Williams, Prof Kim Thomas, Dr Emma Axon, Arabella Baker, Michael Birchall, Bridget Candy  
Row 2: Dr Bob Boyle, Dr Esther Burden-Teh, Dr Jo Chalmers, Liz Doney, Dr Sonia Gran, Dr Karen Harmen  
Row 3: Dr Jane Harvey, Dr Laura Howells, Dr Lisa Kirby, Dr Stephanie Lax, Dr Carron Layfield, Dr Paul Leighton  
Row 4: Jo Llewellyn, Barbara Maston, Maggie McPhee, Dr Ruth Murphy, Laura Prescott, Dr Jane Ravenscroft  
Row 5: Amanda Roberts, Helen Scott, Dr Maulina Sharma, Dr Rosalind Simpson, Mikolaj Swiderski, Dr Sandeep Varma  
Not pictured: Linda Pycroft, Dr Natasha Rogers





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