# Dupilumab Treatment Improves Health-Related Quality of Life in Children Aged ≥6 to <12 Years With Severe Atopic Dermatitis

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**Background:** The Children's Dermatology Life Quality Index (CDLQI, scores ranging 0–30) is a 10-item questionnaire assessing patient/caregiver-reported impact of atopic dermatitis (AD) on health-related quality of life (HRQoL), which is severely impacted in young AD patients. We report the effect of 16-week treatment with dupilumab and concomitant topical corticosteroids (TCS) on CDLQI scores in children with severe AD.

**Methods:** In LIBERTY AD PEDS (NCT03345914), a multicenter, phase 3 trial, 367 patients aged ≥ 6 to < 12 years were randomized 1:1:1 to receive subcutaneous dupilumab every 2 (q2w) or 4 weeks (q4w), or placebo, all with concomitant medium-potency TCS. We report baseline CDLQI ± standard deviation (SD) and least squares mean change from baseline in total CDLQI ± SD for FDA-approved doses only (300 mg q4w [300q4w] + 600 mg loading dose if baseline weight < 30kg; 200 mg q2w [200q2w] + 400 mg loading dose if ≥ 30kg, n=61/59) and weight-matched placebo (n=61/62) with nominal P values (*P<0.05; ***P<0.001; ****P<0.0001) vs corresponding placebo. A within-person change of ≥6-points in CDLQI is considered clinically meaningful.

**Results:** At baseline, mean CDQLI scores suggested a "very large effect" of AD on patients' lives (300q4w+TCS:16.9±8.1; placebo+TCS<30kg: 16.1±6.9; 200q2w+TCS: 13.0±6.3; placebo+TCS≥30kg: 13.2±7.7). Dupilumab+TCS significantly improved total CDLQI scores by Week 2 (300q4w+TCS: –6.9±0.6***, placebo+TCS<30kg: –3.7±0.6; 200q2w+TCS: –5.9±0.6*, placebo+TCS≥30kg: –3.9±0.6) and improved further at Week 16 (300q4w+TCS: –10.7±0.7****, placebo+TCS<30kg: –6.3±0.7; 200q2w+TCS: –10.5±0.7****, placebo+TCS≥30kg: –6.4±0.7). The safety profile in this study was consistent with the known dupilumab safety profile.

**Conclusions:** Dupilumab with concomitant TCS significantly improved HRQoL measured by CDLQI in children with severe AD compared to placebo+TCS.