

# Treatment of Severe Atopic Eczema

23 April 2008

## **(1) First Trial:**

A report in the British Journal of Dermatology (1) reveals that Traditional Chinese Herbal Medicine has been shown to be extremely effective in the treatment of severe cases of atopic eczema.

A controlled study carried out at the Department of Dermatology, Great Ormond Street Hospital for Sick Children, U.K. proves what has been known for a long time by practitioners of Chinese medicine: Chinese herbal medicine has a major role to play in treating moderate and severe cases of atopic eczema (the most common form of eczema to afflict children and adults).

The researchers acknowledged that severe and widespread atopic eczema often fails to respond adequately to conventional treatments and, after observing substantial benefit in patients receiving daily decoctions of traditional Chinese medicinal plants, they decided to undertake a placebo-controlled double-blind trial.

A specific prescription of Chinese herbs was specially formulated for widespread non-exudative atopic eczema. Forty seven children were randomly selected to receive the Chinese herbal formula or a placebo (medicine that has no effect on the disease) for 8 weeks, with an intervening 4-week wash-out period.

Thirty-seven children completed the treatment. The response to the treatment was significantly greater than the response to placebo, and was judged by the researchers to be clinically valuable. There was no evidence of haematological, renal or hepatic toxicity in any of the children who participated in the study and the researchers predicted that there would be considerable therapeutic potential for traditional Chinese medicinal plants, not only in the treatment of eczema, but also for other skin diseases.

The same researchers were so impressed with the results of the 8 week study that they went on to do a longer term investigation, analysing the results of 37 children who were suffering from severe atopic eczema. This study conducted over a one year period found that 49% of the children experienced at least 90% reduction in the severity of their eczema. The study was repeated this time on adults with severe atopic eczema (2) when equally impressive results were achieved.

These studies demonstrated that Chinese medicine is a valid therapeutic option available in the treatment of childhood and adult eczema. But until earlier this year, researchers were still unsure how or why the treatment worked. Scientists at the Department of Immunology, UCL Medical School, London discovered that selected Chinese herbs have a significant effect on the production of white blood cells and thereby affect the immune system, reducing allergic responses and alleviating inflammation.

1. *British Journal of Dermatology* (1992) 126 179-184 2. *The Lancet* Vol 340: July, 1992.

## **(2) Second Trial.**

Doctors at the Royal Free Hospital in London have completed an evaluation of an ancient Chinese remedy for dermatitis. The combination used consisted of a mixture of 10 herbs and was first described in the Inner Classic of the Yellow Emperor written over 2000 years ago. 40 adult patients with longstanding, widespread, atopic (genetically predisposed) dermatitis participated in the trial which lasted 5 months. Each patient was randomly allocated to receive either the herbal remedy or a placebo of similar taste and texture for an 8- week period. Followed by a 4-week wash-out period, the group originally receiving the herbal remedy received the placebo for 8 weeks and vice versa. The active herbs (and the placebo herbs) were prepared as a decoction each day and 200 ml of it consumed while still warm. 31 of the patients completed the study. Both groups showed a rapid and continued improvement in the extent of erythema (redness of the skin) and surface damage during the time they consumed the Chinese herbal remedy. The authors of the study conclude that the remedy is effective in treating adult atopic dermatitis, but warns that further experiments are needed to ensure its safety especially in patients suffering from liver or kidney complications.

*The Lancet*, July 4, 1992, pp. 13-17.

## **(3) Follow Up Treatment**

A study has followed up a group of 31 patients with severe atopic eczema who initially took part in a double-blind placebo-controlled crossover trial of a specific formulation of Chinese herbal therapy (see above). All were offered continued therapy for one year after the trial was completed. Of 17 patients who took up the offer, 12 had a greater than 90% reduction of symptoms and the other 5 had a greater than 60% reduction. 11 patients who decided not to continue treatment reported a gradual deterioration of symptoms, resulting in a significant difference (both erythema and surface damage) between the two groups. Toxicology screening revealed no abnormalities in either full blood counts or biochemical parameters in any patient on continued treatment. Improvement in disease was not associated with any significant change in serum IgE level or peripheral blood lymphocyte subsets

*(Clinical & Experimental Dermatology. 1995 ;20(2):136-40)*

#### **(4) New Study demonstrates effectiveness of Herbs**

It is reported in an article published in the August, 2007 issue of the British Journal of Dermatology, that doctors at the Chinese University of Hong Kong conducted a double blind placebo controlled trial to established whether Chinese medicine has a beneficial effect in treating atopic eczema. Between February 2004 and July 2005, 85 children suffering with moderate to severe forms of this common childhood eczema were recruited for the trial. 42 children were given a mixture of five traditional Chinese herbs, which have long been used to treat eczema. According to Chinese medicine these herbs, when combined in exact proportions have the effect of “clearing heat, draining dampness and resolving fire toxin” (a metaphorical but precise description for reducing inflammation, alleviating itching and controlling allergic response). The herbs were administered twice daily for 12 weeks. To ascertain their effectiveness, the remaining 43 children were given placebos (ingredients that have no medicinal effect, but are used as a control to establish if the active herbs do indeed make a difference) for the same duration of time.

Despite the shortcomings of the trial (according to Chinese medicine typically a specific and varied group of herbs are prescribed individually to suit the characteristics of each patient, rather than one fixed formula that is used for all cases), by the end of the study, the conditions of the children who were given the herbs "significantly improved" and their use of corticosteroid creams and ointments was also "significantly reduced by one third". "Adverse events, tolerability, haematological and biochemical parameters were monitored during the study, and no serious adverse effects were observed between the groups".

*The British Journal of Dermatology, Volume 157 Issue 2. Pages 357–363*