# Article information:

Atopic dermatitis: new insight into the etiology, pathogenesis, diagnosis and novel treatment strategies: Immunopharmacology and Immunotoxicology: Vol 43, No 2
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# Article summary:

1. Atopic dermatitis (AD) is a long-lasting chronic inflammatory skin condition caused by environmental factors, dry skin, pruritus, lichenification and frequent eczematous abrasions.

2. The complex pathological mechanism behind AD etiology includes epidermal barrier destruction resulting in the lack of filaggrin protein that can induce inflammation and T-cell infiltration.

3. Numerous beneficial topical and oral treatments have been available to patients for the treatment of AD, including topical moisturizers, corticosteroids, anti-inflammatory agents such as calcineurin inhibitors, phototherapy, cAMP-specific 3, 5 half-cyclic phosphodiesterase 4 inhibitors and systemic immunosuppressants.

# Article rating:

May be slightly imbalanced: The article presents the information in a generally reliable way, but there are minor points of consideration that could be explored further or claims that are not fully backed by appropriate evidence. Some perspectives may also be omitted, and you are encouraged to use the research topics section to explore the topic further.

# Article analysis:

The article provides an overview of atopic dermatitis (AD), its etiology, pathogenesis, diagnosis and novel treatment strategies. The article is well written and provides a comprehensive review of the current understanding of AD. It is clear that the authors have conducted extensive research into the topic and have provided a thorough overview of the current state of knowledge regarding AD.

However, there are some potential biases in the article which should be noted. Firstly, there is a lack of discussion about possible risks associated with certain treatments for AD such as topical steroids or oral antihistamines. Secondly, there is a lack of discussion about alternative treatments for AD such as herbal plants or their derived phytoconstituents which may provide more natural solutions to treating this condition without the risk associated with certain medications. Thirdly, there is also a lack of discussion about other factors which may contribute to AD such as lifestyle choices or dietary habits which could be explored further in future research.

In conclusion, while this article provides an informative overview of atopic dermatitis (AD), it does contain some potential biases which should be taken into consideration when assessing its trustworthiness and reliability.

# Topics for further research:

* Risks associated with topical steroids for atopic dermatitis
* Herbal plants for atopic dermatitis treatment
* Phytoconstituents for atopic dermatitis treatment
* Lifestyle choices and atopic dermatitis
* Dietary habits and atopic dermatitis
* Alternative treatments for atopic dermatitis

# Report location:

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