



The Impact of Psychological Therapy on Pediatric Atopic Dermatitis Outcomes: A Literature Review

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Background

In 2021, atopic dermatitis (AD) affected approximately 3.3 million pediatric patients in the U.S, primarily children aged 5-9 and girls. While topical medications can alleviate certain physiological symptoms of AD, psychological factors such as **stress and maladaptive scratching behaviors can trigger and prolong flares**. In adults, cognitive behavior therapy (**CBT**), habit reversal training (**HRT**), and mind-body therapies such as mindfulness-based stress reduction (**MBSR**) have been shown to improve AD outcomes in several studies and systematic reviews.

Purpose

Studies investigating the effects of psychotherapeutic treatments on pediatric patients with AD are limited. This narrative review examines current literature focusing on HRT, CBT, and MBSR for pediatric AD treatment.

Methods

A literature review was conducted using **PubMed, Google Scholar, PsycINFO, Scopus, and Web of Science**. Key terms included “pediatric”, “children”, “atopic dermatitis”, “eczema”, “psychotherapy”, “therapy”, “habit reversal”, “CBT”, “mindfulness”, and “multidisciplinary”.

Key Studies

AUTHOR	STUDY DETAILS	INTERVENTION GROUP (IG)	CONTROL GROUP (CG)	OUTCOME
Norén et al. (2018)	•RCT •39 pediatric patients	3-week treatment period of HRT + corticosteroids	Corticosteroid alone	The decrease in mean SCORAD was significantly higher in IG at the end of the treatment period (0.027) and after the 8-week follow up (0.0038) compared to the CG
Paller et al. (2023)	•RCT •20 pediatric patients with moderate to severe AD	CBT	Standard AD treatment	Results Pending
Weber et al. (2008)	•RCT •36 pediatric patients with moderate to severe AD that did not respond to conventional treatment	Relaxational, educational, and playful activities (MBSR). 90-minute sessions for 6 months in an AD support group	Waitlisted for the treatment	Daily to weekly pruritus improvement (p=0.023), mood improvement (p=0.03), and CDLQI improvement (p<0.01) for the IG compared to the CG

Conclusion

Multidisciplinary approaches that integrate standard medical treatment and psychotherapy including HRT and MBSR may improve pediatric AD outcomes and may provide better results compared to standard medication alone, especially in patients with concomitant psychosocial impairments. Interdisciplinary collaboration between dermatologists and mental health providers may further enhance pediatric AD outcomes.

Limitations of this study include a limited number of pediatric-focused studies, variability in psychotherapeutic approaches, heterogeneity in study designs and outcome measures, and incomplete results.

Next Steps

Future research should prioritize RCTs and cohort studies comparing AD outcomes in pediatric patients receiving combined psychotherapy and standard medication versus standard medication alone.

References

