Clinical, Cosmetic and Investigational Dermatology

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CORRIGENDUM

Treatment Resistant Atopic Dermatitis: Challenges and Solutions [Corrigendum]

Johnson BB, Franco AI, Beck LA, Prezzano JC. *Clin Cosmet Investig Dermatol*. 2019; 12:181–192.

On page 189, Ustekinumab section, "Ustekinumab is a human monoclonal antibody that binds to the shared p40 protein subunit of human IL-12 and IL-23, thereby preventing interaction with their shared receptor.[86] It is currently approved for Crohn's disease, plaque psoriasis, and psoriatic arthritis. In a systematic review of ustekinumab in the treatment of AD including eight cases and two RCTs (n=107), a total of 58% of patients showed improvement in their AD.[86] While ustekinumab was well tolerated, it is likely that it may only be effective for a subset of AD patients such as those with early-onset AD and possibly AD subjects of Asian descent.[87,88]" should read "Ustekinumab is a human monoclonal antibody that binds to the shared p40 protein subunit of human IL-12 and IL-23, thereby preventing interaction with their shared receptor.[86] It is currently approved for Crohn's disease, plaque psoriasis, and psoriatic arthritis. In a systematic review of ustekinumab in the treatment of AD including eight cases and two RCTs (n=107), a total of 54% of patients showed improvement in their AD (not clinically significant).[86] While ustekinumab was well tolerated, it is likely that it may only be effective for a subset of AD patients such as those with early-onset AD and possibly AD subjects of Asian descent, though there is little current evidence to support its use.[87,88]"

Following feedback from a reader, we have clarified that the use of ustekinumab in the Pan et al study[86] was not clinically significant. The authors apologize for this omission.