

## 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.<sup>86</sup> 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.<sup>86</sup> 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.<sup>87,88</sup>” 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.<sup>86</sup> 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).<sup>86</sup> 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.<sup>87,88</sup>”

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

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