



# **EZyma**<sup>™</sup> *Hydrogel*



# NON-STEROIDAL HYDROGEL FOR THE

EASY MANAGEMENT OF ECZEMA (DERMATITIS/ INFLAMED SKIN)



**82% USERS EXPERIENCE RAPID ITCH RELIEF BY DAY 3**1



# **WHAT IS ECZEMA?**



**Eczema** is the general terminology for rash-like skin conditions. Atopic dermatitis (AD), which is the most common type of eczema, is a chronic inflammatory skin disease characterized by the appearance of rashes, redness and itchiness of the skin<sup>2</sup>.

This chronic skin condition normally begins during infancy and continues through into childhood<sup>3</sup>. While some patients might outgrow the condition, others might continue to have it in adulthood<sup>4</sup>.

Eczema affects 15 - 20% of children and 2 - 10% of adults<sup>5</sup>. Breaching the skin barrier or a disruption in the stratum corneum, which subsequently affects the ability of the skin to retain moisture often leads to eczema.

## **SYMPTOMS**

- » Eczema may start out as dry and extremely itchy skin. Rashes on the skin may become very red, sore, swollen and tend to worsen upon scratching.
- » There might be leakage of clear fluid from the rashes and the rashes will eventually crust over and start to scale, conditions known as oozing and scarring, respectively.
- » The rashes are commonly found in the elbow creases, behind the knees, on the cheeks and on the buttocks.

### **CAUSES**

The specific cause of eczema remains unknown. However, a combination of genetic and environmental factors is presumed to be the cause of eczema.

# MANAGEMENT

According to **Malaysia CPG guidelines**, emollient/ moisturiser therapy is the mainstay of management in AD. Emollients improve the epidermal barrier function and dryness leading to reduction in itchiness.

They have steroid-sparing effect and decrease the usage of topical corticosteroids. Studies have shown that the skin in AD is heavily colonised with Staphylococcus aureus even when the skin is not clinically infected. The degree of S. aureus colonisation tends to increase the AD severity. As eczematous skin is prone to secondary infection, emollient with antimicrobial property like Dermacyn<sup>®</sup> EZyma™ Hydrogel is useful to prevent/ treat infections.

Side effects due to systemic absorption in large body surfaces

Acneiform eruptions and hypopigmentation

Increased risk of skin atrophy and striae

Use Steroid with caution to minimize side effects of steroids

Reduce steroids use with EZyma™

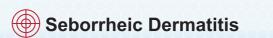


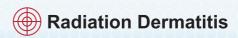
## **INDICATIONS**



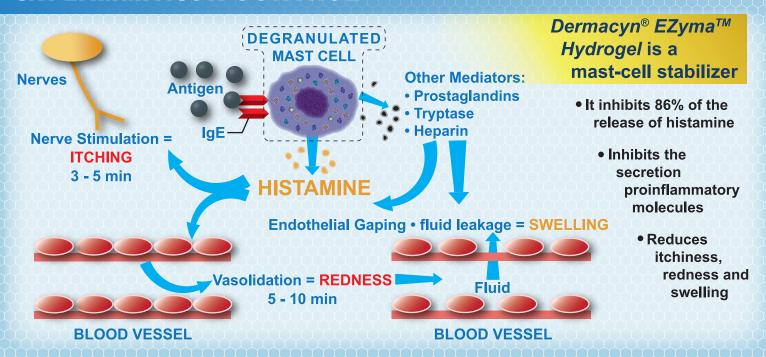








## **INFLAMMATION CONTROL**



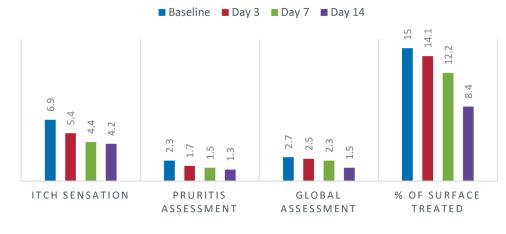
# **INSTRUCTION FOR USE**



- 1 Clean affected area with *Dermacyn*<sup>®</sup> *WoundCare Solution* (for optimum results)/ water before applying *Dermacyn*<sup>®</sup> *EZyma™ Hydrogel*
- 2 Allow the skin to dry (Do not use a towel to rub the affected area)
- 3 Shake the bottle well, then apply a thin layer of Dermacyn<sup>®</sup> EZyma™ Hydrogel on affected area
- 4 Use at least 3 times per day or when neccessary

### **GRAPH BY DR. DRAELOS**

A 14-day pilot study of 17 adults with mild to moderate Atopic Dermatitis with associated pruritus treated with Pediacyn™ (*Dermacyn*® *EZyma™ Hydrogel*).



- 82% of study subjects reported itch relief by day 3
- 76% experienced improvement by day 14

RD047-26 Antipruritic Hydrogel for the Treatment of Atopic Dermatitis: An Open-Label Pilot Study

Dr. Draelos, MD Dermatology Consulting Services, High Point, NC, USA

### **CASE STUDIES**

#### STUDY 1



The skin is thickened with creases, very dry, presence of a lot of crusts, and patient complained very itchy which disturbed sleep at night. Since introduction of Dermacyn® EZyma™ Hydrogel, in spite of period of inadequate usage, the affected area had marked improvement in terms of reduction of thickening and skin crusts, as well as relief from itchiness.

#### STUDY 2



A gentleman diagnosed with seborrheic dermatitis apply a thin layer of Dermacyn® EZyma™ Hydrogel on the affected area 3 times Since introduction of *Dermacyn*® EZyma™ Hydrogel, the affected area had marked improvement in terms of reduction of skin crusts, as well as relief from itchiness.

#### STUDY 3



Patient C is a 7-year-old girl with chronic eczema complaining of pain and itchiness, with serious discharge, worsened after was given steroidal cream. The steroid cream was stopped immediately and changed with Gentamycin cream and *Dermacyn*® *EZyma™* Hydrogel. Symptoms subsided after 5 weeks of Dermacyn<sup>®</sup> EZyma™ Hydrogel use with POEM score from 28 to 4.

#### STUDY 4



A 26-year-old male with known case of eczema was on topical steroid for months. He complained that itchiness was not resolved, and his skin was dry, scaly and thickened. After introducing *Dermacyn*<sup>®</sup> *EZyma*<sup>™</sup> *Hydrogel* into his regular treatment, his itchiness was significantly reduced. On day 37, the itchiness subsided and the skin showed marked improvement with minimal scaly skin.

#### REFERENCES

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