

NEURODERMATITIS

Neurodermatitis (synonyms: atopic eczema, atopic dermatitis) is a chronic inflammatory skin disease that occurs in episodes. It often manifests itself on the scalp, face and hands and is characterised by excruciating itching. In industrialised countries, around 15-30% of children suffer from atopic dermatitis. Adults are affected in 10% of cases.

MAIN SYMPTOMS

- **dry, red, cracked, and itchy skin, especially on flexor surfaces**
- **sometimes with weeping blisters, lumps, and scales**
- **In adults:**
 - bending folds on the back of the knees and elbows,
 - face, neck,
 - wrists and hands
- **In children:**
 - bending folds of the back of the knees and elbows,
 - wrists
 - back of thighs, buttocks
 - possible eczema around the mouth
 - frequently dry skin with scaling
- **In infants:**
 - milk crust (yellowish-white crusts), cheeks, scalp, outer sides of arms and legs
 - weeping, blurred, itchy skin changes

CAUSES AND PATHOGENESIS

- **causes largely unknown, multifactorial**
- **relapsing course, possible initiated by trigger factors such as food, psychological stress, infections, weather conditions, contact with irritating substances**
- **often accompanied by allergies or pseudo-allergies → histamine release leads to (additional) itching and skin irritation**
- **genetic defects presumably lead to impaired skin barrier**
- **immunological dysregulation of the TH1/TH2/TH17-controlled immune system**
- **mis-colonisation of skin and mucous membranes, often increased *Staphylococcus aureus* and *Candida albicans***

THERAPY

- **bowel therapy**
- **probiotics (recording to the report, histamine lowering and blocking probiotics if necessary)**
 - prebiotics (acacia fibers, 2'FL, scFOS/scGOS)
 - inflammation inhibition (phosphatidylcholine, glutamine)
 - mucosa and milieu stabilizing interventions (humic acids, zeolite)
 - for excess histamine, see HIT overview
- **regulate tryptophan and catecholamine metabolism (depending on the report)**
 - Trp, griffonia
 - curcumin, quercetin, indole-3-carbinol
- **compensating for nutrient deficiencies**
 - vitamin B3, B6, B12, D
 - selenium, zinc
- **eliminate inflammations and ROS**
 - omega-3 fatty acids, vitamin C, E
- **additional measures**
 - eat a balanced diet rich in fibre
 - avoid triggering foods
 - adequate intake of good oils with a high PUFA content
 - avoid alcohol and nicotine
 - reduce/avoid stress
 - avoid excessive skin cleansing

DIAGNOSTICS

HAVE THE
FOLLOWING
EXAMINED

SA740A NEURODERMITIS BASIC PROFILE

Material: Fe, OS, S

Microbiome changes

- Microbiome analysis Mini incl. Candida

Inflammation, Low-grade Inflammation (Leaky gut)

- α 1-antitrypsin, calprotectin
- zonulin

Food incompatibilities

- Pre-Screen B

SA740C NEURODERMITIS COMPLETE PROFILE

Material: 2Fe, OS, EDTA, 2 Hep 🕒, S 🕒, T909, T928

In addition to the Midi Profile:

Microbiome changes

- Microbiome analysis Midi incl. parasites

Maldigestion

- pancreatic elastase, bile acids in the stool

Anti-inflammatory factors

- fatty acid status (omega-3, omega-6 fatty acids)

SA740B NEURODERMITIS MIDI PROFILE

Material: 2Fe, OS, Hep, S 🕒, T909, T928

In addition to the Basic Profile:

Tryptophan metabolism

- Trp, serotonin, metabolites

Relevant cofactors

- vitamin B3, B6 (cystathionine),
vitamin B12 (MMA)

Nitrosative stress

- citrulline, MMA

Immune activation/inflammation

- neopterin

Intestinal influencing factors

- TMA, TMAO
- bacterial uraemic metabolites

Essential minerals

- zink
- selenium

Digestive residues

Mucosal immunity

- sIgA

Food incompatibilities

- histamine in the stool

ADDITIONS

In s/o intolerance to food additives or preservatives

- C560 CAST / Pseudoallergy Screening Profile

In s/o carbohydrate intolerances

- B120 fructose malabsorption - Breath Test
- B110 lactose Intolerance - Breath Test
- B130 sorbitol malabsorption - Breath Test