

This is a repository copy of *Treatment of severe*, *chronic hand eczema*. *Results from a UK-wide survey*.

White Rose Research Online URL for this paper: http://eprints.whiterose.ac.uk/104211/

Version: Accepted Version

Article:

Smith, IL, Brown, S orcid.org/0000-0002-1840-3786, Nixon, J orcid.org/0000-0003-1705-7698 et al. (11 more authors) (2017) Treatment of severe, chronic hand eczema. Results from a UK-wide survey. Clinical and Experimental Dermatology, 42 (2). pp. 185-188. ISSN 0307-6938

https://doi.org/10.1111/ced.13015

© 2016 British Association of Dermatologists. This is the peer reviewed version of the following article: "Smith, I. L., Brown, S., Nixon, J., Cowdell, F. C., Ersser, S., Fernandez, C., Goodfield, M., Green, C. M., Hampton, P., Lear, J. T., Smith, C. H., Sunderland, L., Tubeuf, S. and Wittmann, M. (2017), Treatment of severe, chronic hand eczema: results from a UK-wide survey. Clin Exp Dermatol, 42: 185–188. doi:10.1111/ced.13015" which has been published in final form at https://doi.org/10.1111/ced.13015. This article may be used for non-commercial purposes in accordance with Wiley Terms and Conditions for Self-Archiving.

Reuse

Unless indicated otherwise, fulltext items are protected by copyright with all rights reserved. The copyright exception in section 29 of the Copyright, Designs and Patents Act 1988 allows the making of a single copy solely for the purpose of non-commercial research or private study within the limits of fair dealing. The publisher or other rights-holder may allow further reproduction and re-use of this version - refer to the White Rose Research Online record for this item. Where records identify the publisher as the copyright holder, users can verify any specific terms of use on the publisher's website.

Takedown

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.



Supplementary Table S1

Survey Questions

Question	Answer choices
Q1 Which of the following therapeutic options do you frequently use in your practise for the treatment of severe HYERKERATOTIC hand eczema (e.g. resistant to > 4 weeks of topical treatment with steroids, exclusion/elimination of contact allergens and irritants). In which "order" would you normally use these therapeutic options? (please rank)	 PUVA Narrowband UVB Cyclosporine Oral Steroids Methotrexate Azathioprine Mycophenolate Mofetil Alitretinoin Acitretin
Q2 Which of the following therapeutic options do you frequently use in your practise for the treatment of severe VESICULAR subtypes of hand eczema (e.g. resistant to > 4 weeks of topical treatment with steroids, exclusion/elimination of contact allergens and irritants). In which "order" would you normally use these therapeutic opitons? (Please rank)	as for Q1
Q3 Based on your overall experience of hand eczema - which therapeutic strategy would you consider as most efficient with regard to LONG TERM OUTCOME (e.g. stable 3-6 months after cessation of the therapy)? If you find different therapies equally efficient you can tick several boxes.	 PUVA Narrowband UVB Cyclosporine Oral Steroids Methotrexate Azathioprine Mycophenolate Mofetil Alitretinoin Acitretin Don't know
Q4 Are you concerned about potential side effects of long term (e.g. longer than 3 months) or repeated use of the following therapeutic options?	as for Q1
Q5 If using any of the mentioned therapeutic strategies, do you recommend to the patient to continue using topical steroids?	as for Q1
Q6 If yes, which is your "first choice" steroid?	"comment field"
Q7 Which moisturiser(s) do you prefer in chronic, severe hand eczema?	"comment field"
Q8 Please provide any additional comments you would like to add regarding the treatment of chronic, severe hand eczema.	"comment field"