

For EADV News and EADV website

Report on an EADV-funded project

EADV European Network on Assessment of Severity and Burden of Pruritus (PruNet)

Sonja Ständer, Martin Dugas

Center for Chronic Pruritus, University Hospital Münster, Germany

Pruritus is the most frequent symptom in dermatology occurring in a majority of dermatoses and in every age group. It results in a high burden and impaired quality of life for patients. The Global Burden of Disease 2010 project identified pruritus as one of the 50 most frequent, interdisciplinary diseases worldwide (1). One neglected but very important issue, from the patient's perspective, is the need to focus on the course of the pruritus during treatment (2). Accordingly, pruritus should be assessed during a dermatological therapy. Even today, there is no widely accepted and daily used method to assess pruritus. This serves to further highlight the urgent need to implement a standardized approach. A consequent assessment of pruritus allows for high quality treatment and medical care.

In 2014, the EADV funded the **European Network on Assessment of Severity and Burden of Pruritus (PruNet)**, which aims to harmonize the assessment of pruritus in Europe. PruNet consists of 33 experts from 17 countries who have initiated various related projects. In one project, an analysis of the current methods used for assessments in Europe was performed. The International Forum for the Study of Itch (IFSI) provided assessment recommendations for clinical trials (4). Based on the recommended information, a survey was adopted to investigate the use of the patient-reported outcome (PRO) tools in Europe and defined the most commonly used tools. A subsequent consensus conference among experts discussed the survey outcomes and prioritized PRO tools regarding their suitability for daily patient care and importance for making a reliable assessment of pruritus (5). With a Delphi process, the PruNet experts were able to decide on the

value, feasibility and validity of PRO measures for pruritus. A high level of consensus was achieved regarding the prioritization of tools. Furthermore, it was decided that questionnaires regarding patients' current pruritus intensity (87% consensus among participants) and quality of life (93% consensus among participants) are of high importance. In a subsequent project, the tools agreed upon by the experts were converted into a digital format and made available for tablet computers, and were validated for use in various languages. Tools such as intensity scales (VAS, NRS, VRS) and pruritus-specific quality of life instruments (ItchyQoL, 5PLQ) were provided to 552 patients with pruritic dermatoses across Europe. All tools demonstrated high values concerning concurrent validity and reliability and can now be used for dermatological care in all participating countries. With this, we have achieved one of our goals of using harmonized and valid pruritus assessment tools in dermatology in order to increase the quality of care for patients suffering from pruritic dermatoses. PruNet activities and projects are continued within the novel EADV Task Force Pruritus.

References

1. Hay RJ, Johns NE, Williams HC, et al.. The global burden of skin disease in 2010: an analysis of the prevalence and impact of skin conditions. *J Invest Dermatol* 2014; 134: 1527-3
2. Langenbruch A, Radtke M, Franzke N, et al.. Quality of health care of atopic eczema in Germany: results of the national health care study AtopicHealth. *J Eur Acad Dermatol Venereol.* 2014; 28: 719-26
3. Weisshaar E, Szepietowski JC, Darsow U, et al.. European guideline on chronic pruritus. *Acta Derm Venereol.* 2012; 92: 563-81
4. Ständer S, Augustin M, Reich A, et al.. Pruritus assessment in clinical trials: consensus recommendations from the International Forum for the Study of Itch (IFSI) Special Interest Group Scoring Itch in Clinical Trials. *Acta Derm Venereol* 2013; 93: 509-14
5. Ständer S, Zeidler C, Riepe C, et al... European EADV Network on Assessment of Severity and Burden of Pruritus (PruNet): First Meeting on Outcome Tools. *J Eur Acad Dermatol Venereol.* 2016;30:1144-7



Fig. 1. The PruNet group in front of the Department of Dermatology, University Hospital Münster, Germany