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Randomized, Double-Blind, Split-Side, Comparison Study of Moisturizer Containing Licochalcone A and 1% Hydrocortisone in the Treatment of Childhood Atopic Dermatitis

Siriwan Wananakul, Susheera Chatproedprai, Amornsri Chunharas, Wanida Limpongsanuruk, Srisupalak Singalavanja, Rattanawalai Nitayarom, Wanee Wisuthsarewong

Abstract

Background: Atopic dermatitis (AD) is a common chronic inflammatory skin lesion in children. Topical corticosteroid is the mainstay of treatment.

Objective: To compare the efficacy of moisturizer containing licochalcone A (Lic A) and 1% hydrocortisone for the treatment of mild to moderate childhood AD.

Material and Method: This was a multicenter, randomized, prospective, split-side, double-blind study in 55 children between the age of three months and 14 years. Patients with AD were treated twice daily, simultaneously with either Lic A or 1% hydrocortisone on opposite sides of the lesion. The SCORAD and transepidermal water loss (TEWL) were performed at the baseline, 2-week, and 4-week visits. Lic A was used on both sides of the body for another four weeks to see the effects and TEWL.

Results: In a randomized period, both products were equally effective in the treatment. SCORAD decreased significantly from baseline for both treatments throughout the first four weeks ($p < 0.001$). There was no statistically significant difference in SCORAD between both treatments ($p = 0.321$ and $p = 0.146$ at week 2 and 4, respectively). Lic A had statistically significant decrease in TEWL ($p = 0.027$ and $p = 0.03$ at weeks 2 and 4, respectively). One patient had infection on skin lesions of both sides of the body. Forty-three patients continued to the period of using Lic A on both sides of the body. SCORAD and TEWL were comparable to the end of the randomized period and significantly lower from baseline ($p < 0.001$). Skin lesions flared up in three patients (7.5%).

Conclusion: Lic A had a similar result in terms of SCORAD compared to 1% hydrocortisone for the treatment of mild and moderate AD. TEWL was significantly lower than baseline on the side that used Lic A. Continuing use of Lic A for four weeks can maintain clinical and barrier improvement.

Keywords: Atopic dermatitis, Licochalcone A, Transepidermal water loss

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The Medical Association of Thailand

Address: 4th Floor, Royal Golden Jubilee Building, 2 Soi Soonvijai, New Petchburi Road, Bangkok 10310, Thailand

Telephone: 0-2716-6102, 0-2716-6962 press 0 Fax: 0-2314-6305

E-mail: jmedassocthai@yahoo.com, math@loxinfo.co.th