

Impact of dupilumab on mental health service utilization in patients with atopic dermatitis in a Colombian health insurance provider: an observational real-world practice study

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INTRODUCTION

Atopic dermatitis (AD) increases mental-health service utilization, yet real-world evidence of dupilumab's impact on mental healthcare resource consumption in Colombia and Latin America is limited.

OBJECTIVE

To evaluate the impact of dupilumab on the use of mental health services in patients with AD.

METHODS

This retrospective cohort study analyzed electronic health records of Colombian AD patients receiving dupilumab through a health insurance provider (2018-2023), focusing on mental health service utilization. Clinical and sociodemographic data were collected from electronic medical records. Emergency Department (ED) visits for mood, anxiety, or stress-related disorders, psychiatric visits, and psychological consultations were compared 52 weeks before (baseline) and after (follow-up) dupilumab treatment initiation using the McNemar's test (significance: $p < 0.05$).



POSTER HIGHLIGHT: Dupilumab treatment reduced mental health service use, with substantial discontinuation of psychiatric/psychological care observed in patients with baseline mental healthcare utilization.

Figure 1: Psychiatry consultations - baseline users

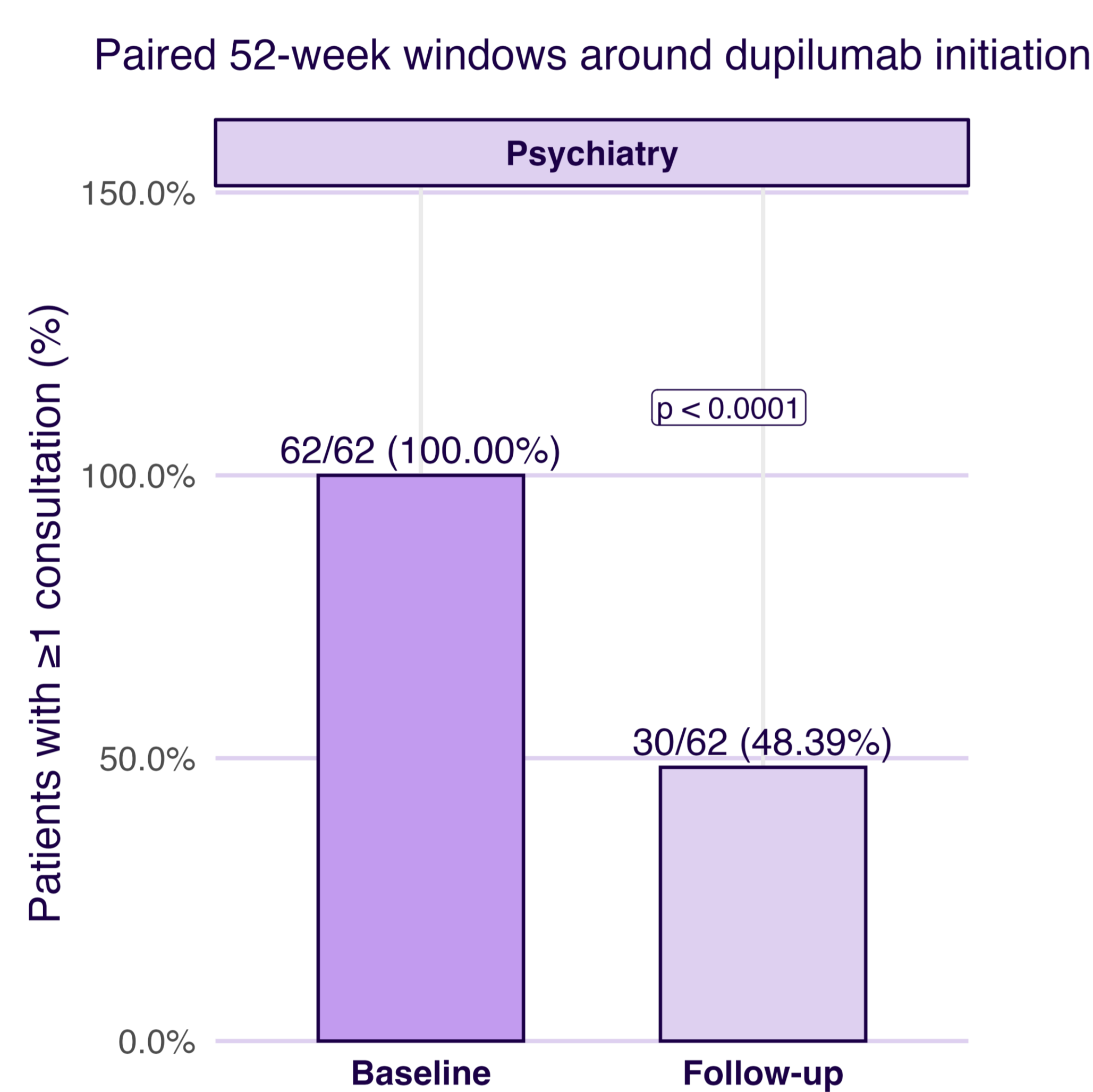
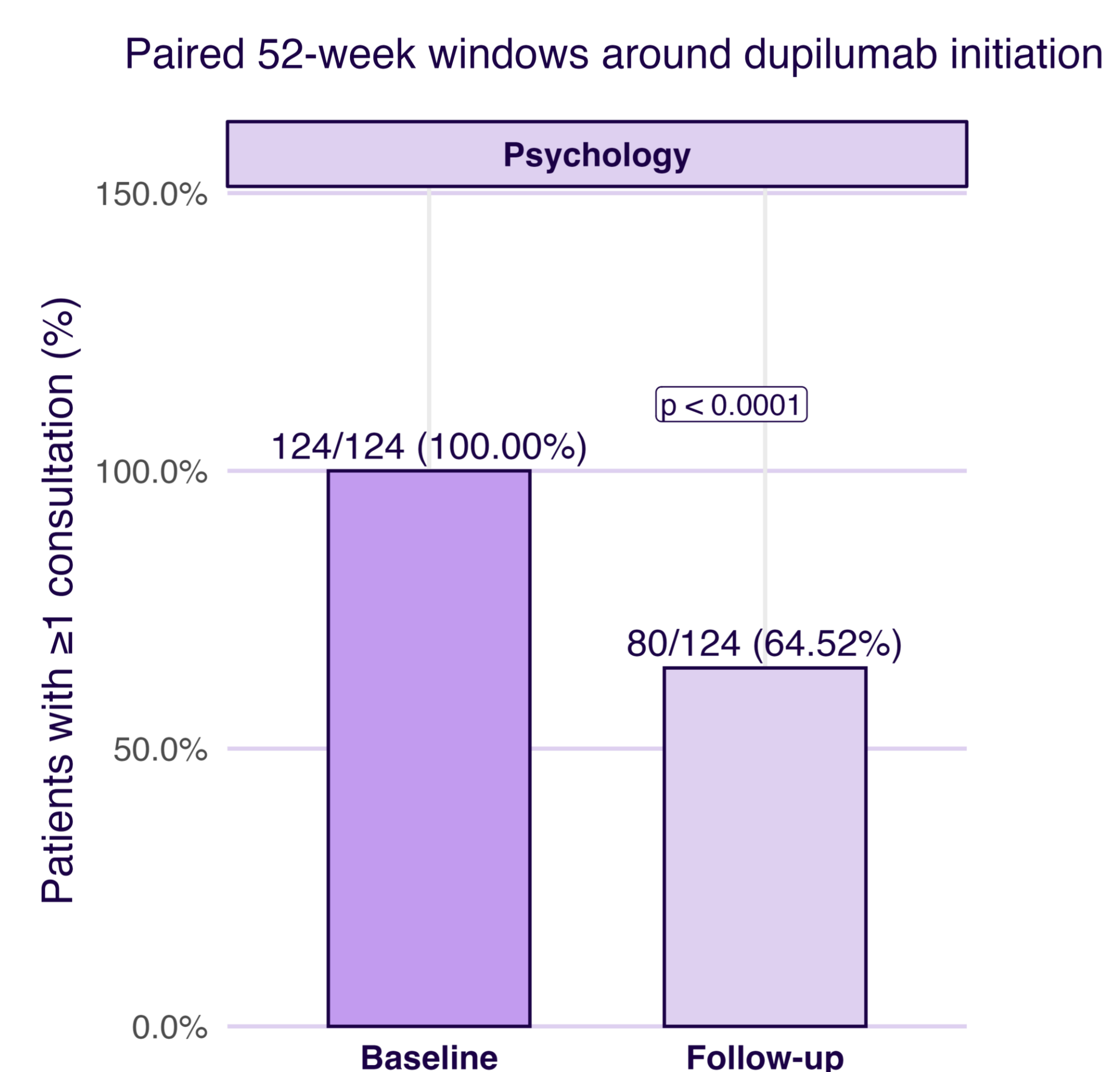


Figure 2: Psychology consultations - baseline users



RESULTS

- Patient Characteristics and Baseline Mental Health Utilization:** The study examined 547 patients (51.9% male; median age 23 years) with allergic rhinitis (38.9%) and asthma (19.2%) as the most common comorbidities. At baseline, mental health service utilization included psychiatric services (11.3%), psychological services (22.7%), and psychiatric emergency department visits (0.9%), indicating modest engagement with mental healthcare resources.
- Psychiatric Service Continuity:** Among patients with baseline psychiatric visits (n=62), approximately half (48.4%) maintained continuity of care (exact OR=8.18; $p < 0.0001$). Psychiatric emergency department utilization remained stable throughout the study period, suggesting that changes in outpatient psychiatric care did not impact acute service needs.
- Psychological Service Continuity:** For patients with baseline psychological visits (n=124), 64.5% continued treatment, though statistical analysis indicated significant discontinuation patterns (exact OR=11.43; $p < 0.0001$). This finding suggests that while a majority of patients maintained psychological care, about one-third discontinued services during the follow-up period.

CONCLUSIONS

- The implementation of dupilumab was associated with a favorable reduction in mental health service utilization, where 51.6% of psychiatric and 35.5% of psychology patients with baseline utilization no longer required continued care during follow-up.
- These findings suggest that treating the underlying condition with dupilumab may lead to improved mental health outcomes, reducing the need for psychological and psychiatric support in this population.

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