ing 3 months without an increase in infections, such as pneumonia, herpetic eczema, or herpes zoster. In a phase 3 randomized clinical trial, abrocitinib was efficacious and well tolerated in individuals with moderate-to-severe atopic dermatitis. In contrast to secukinumab and dupilumab, solely suppressing the Th2 or Th17 pathway, the putative action of abrocitinib on refractory NS, may involve blocking the Th2 and Th17 pathways, suggesting that abrocitinib may be another option for patients who are not responding to more conventional therapies, such as corticosteroids and biologics. Netherton syndrome is a genodermatosis. Abrocitinib is approved by the US Food and Drug Administration only for adults, so its use in pediatric patients will be limited until appropriate studies are completed for this age group. More studies are required to assess the long-term benefit of this prospective therapeutic option.

Additional Information: Drs Zheng and Chen contributed equally to this work.


CORRECTION

Error in Figure 1: In the Special Communication titled “The Skin of Color Society’s Meeting the Challenge Summit, 2022: Diversity in Dermatology Clinical Trials Proceedings,” published online May 24, 2023, an incorrect version of Figure 1 was included. This article has been corrected.


Error in Author Surname in Byline: In the Original Investigation titled “Development of a Skin-Directed Scoring System for Stevens-Johnson Syndrome and Epidermal Necrolysis: A Delphi Consensus Exercise,” published online on May 31, 2023, the surname of the contributing author, Michael Ardern-Jones, DPhil, was misspelled. The article was corrected online.


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