

Randomised controlled trial of silk therapeutic clothing for the long-term management of atopic eczema in children

The CLOTHES Trial



Thomas et al (2017) Silk garments plus standard care compared with standard care for treating eczema in children: A randomised, controlled, observer-blind, pragmatic trial (CLOTHES Trial) PLOS Medicine 14(4): e1002280.

<https://doi.org/10.1371/journal.pmed.1002280>

❑ Disclaimer

- Trial was funded by UK National Institute for Health Research Health Technology Assessment Programme
- Garments were provided free for use in the trial:
 - Dermasilk™** (Espere Healthcare Ltd, UK and AlPre Tec, Italy)
 - Dreamskin™** (Dreamskin Health Ltd, UK)
- No other conflicts of interest



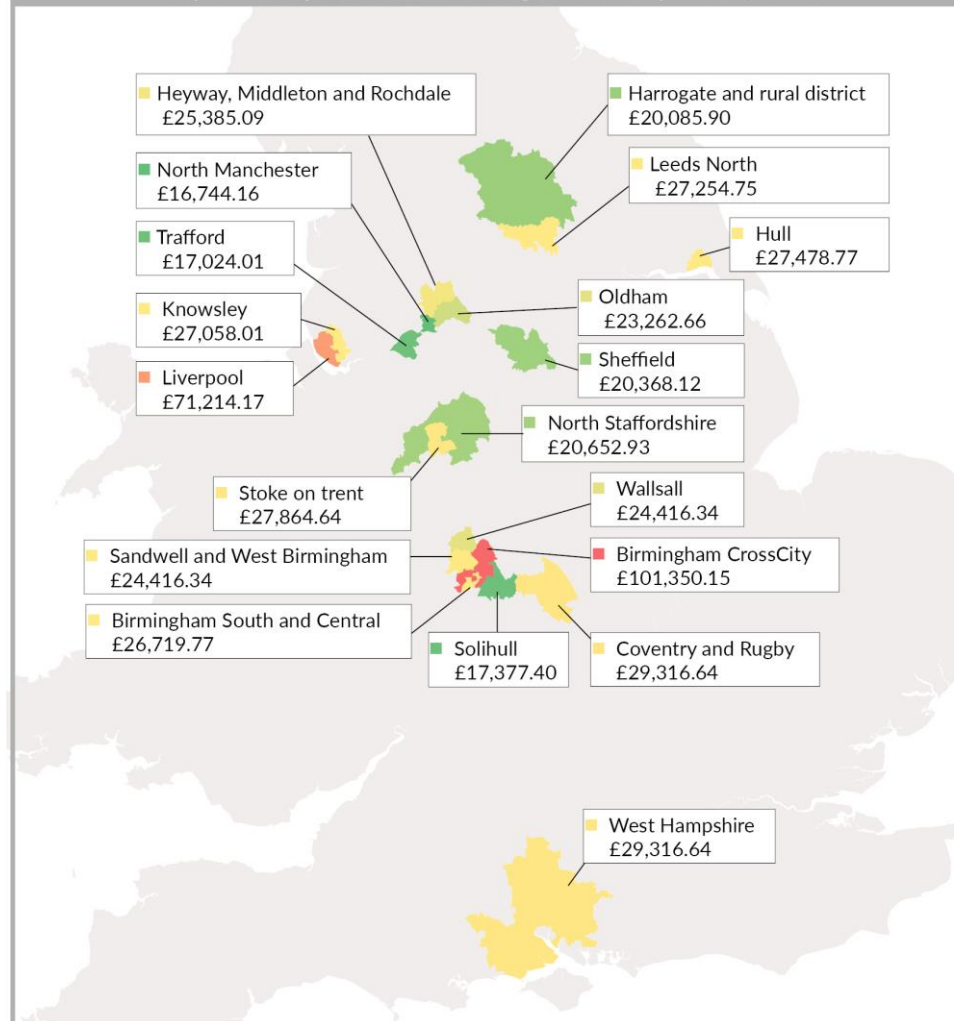
- Silk clothing (CE approved medical device) available on prescription in the UK
- Currently NHS spends approx. £2 million per year (cost of single set £66 to £155 depending on the size of the child).
- Increasingly popular with patients
- Limited evidence of effectiveness (3 small RCTs: 79 participants in total)



Mechanism of action:

Soft, smooth fibres next to the skin, temperature regulation, possibly antimicrobial effects

Top 20 - Expenditure on silk garments by CCG (2015)



To assess whether silk therapeutic clothing, when used in addition to standard eczema care, reduces atopic eczema severity in children over six months.





- 300 children (1 to 15 years)
- Eczema (UK Diagnostic Criteria for Atopic Eczema)
- Moderate to severe (Nottingham Eczema Severity Scale¹)
- Secondary and primary care, plus self-referral

¹

Emerson RM *et al Br J Dermatol.* 2000 Feb;142(2):288-97

Trial design: Observer-blind, parallel group, pragmatic RCT (6 months)

Intervention: Standard care plus 100% sericin-free knitted silk garments (x3 sets per participant)
[DermaSilk & DreamSkin]

Control: standard care





- Nottingham (lead site),
Royal Free London, Cambridge,
Portsmouth,
Isle of Wight



Primary outcome:

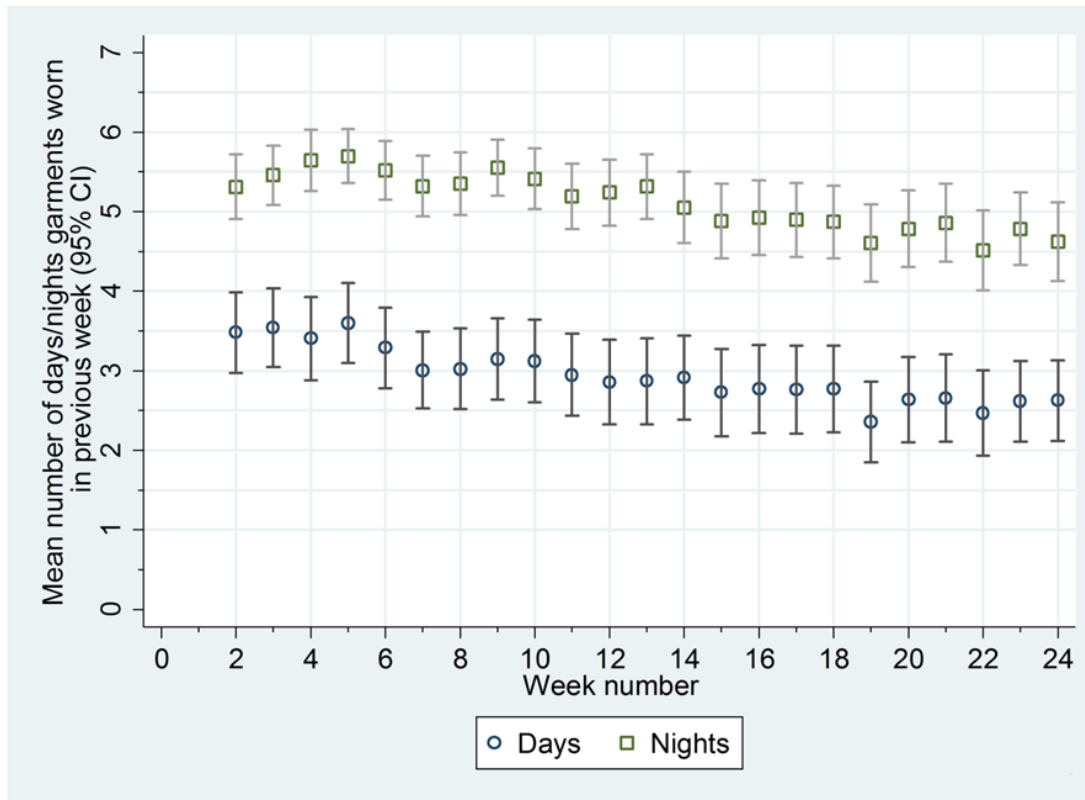
Eczema severity: Eczema Area and Severity Index (EASI):
Baseline 2, 4 and 6 months (blinded).

Secondary outcomes:

- Investigator and Patient Global Assessment
- Three Item Severity scale (TIS)
- Use of topical treatments for eczema
- POEM – patient-reported symptoms
- Quality of Life
- Adverse events: skin infections, hospitalisation for eczema
- Cost-effectiveness



- Mean age: 5.1 years, 58% boys, 79% white European
- Eczema severity in last 12 months (NESS):
moderate (19%); severe (81%)
- Eczema severity at baseline visit (IGA):
mild (28%); moderate (48%); severe (24%)
- Follow-up: 5% loss-to follow-up over 6 months.

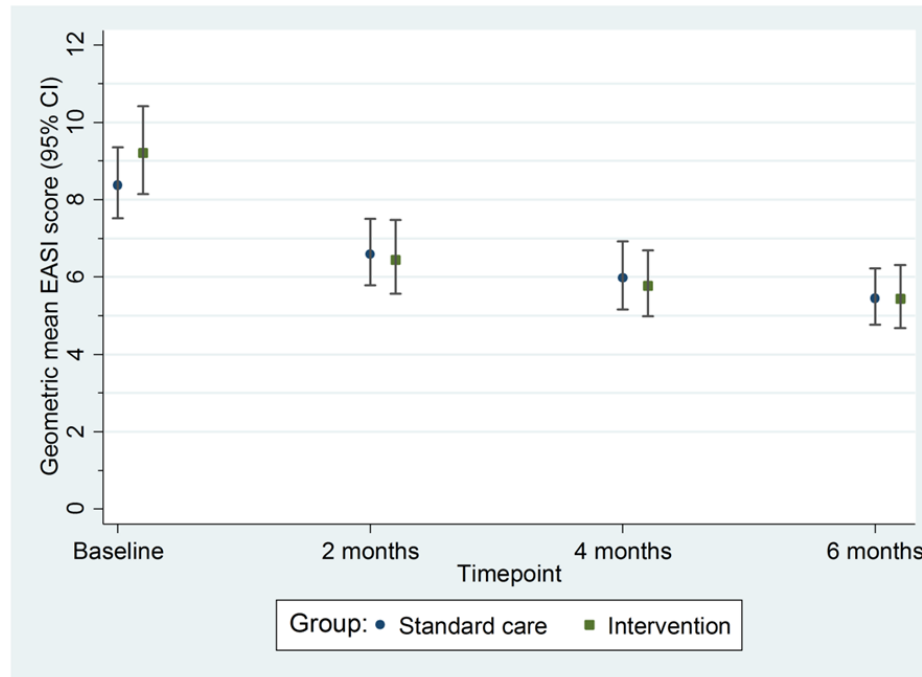




Remember:

- Children and parents new their treatment allocation
- Expectation of benefit from the silk clothing was high
- Risk of bias – for participant-reported outcomes

EASI over time



- Ratio of geometric means: 0.95, 95% (95% CI 0.85 to 1.07).

EASI score was log transformed, analysis adjusted for baseline EASI score, age and recruiting site

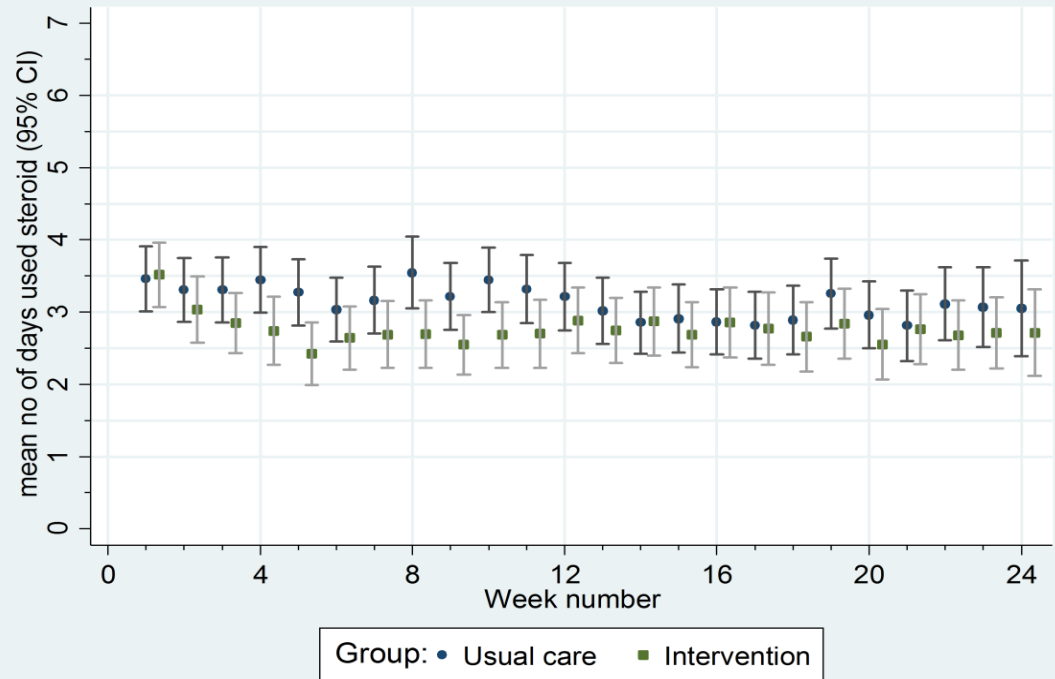
- No difference between the groups
- 95% confident that the true difference lies between -1.5 points (favouring silk) and 0.5 points (favouring standard care) in the original EASI scale
- Sensitivity analysis (adherence, missing data), and sub-group analysis (*filaggrin status*, *eczema severity*) were all supportive of the primary result

Secondary outcomes – topical steroid use



Difference in means -3.7 % days
topical steroid used
(95% CI -9.6, 2.3)

Equivalent to a difference of 6
days over the 24 weeks
(16 days less to 4 days more)



Objective secondary outcomes

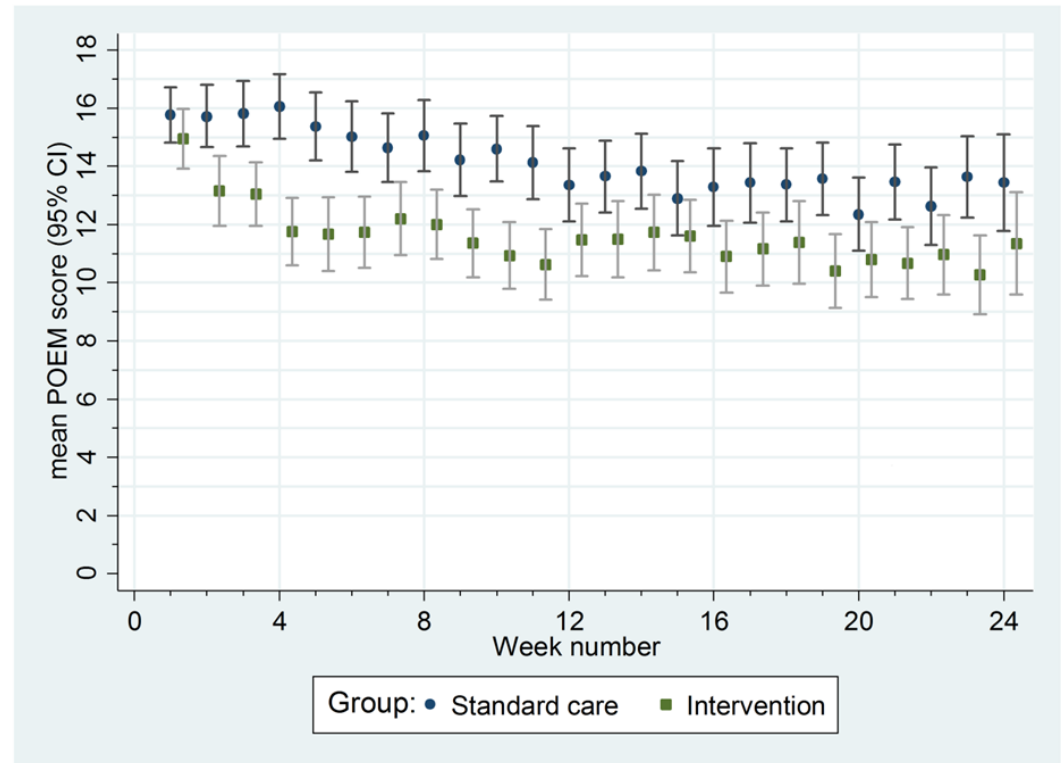


Measure	Difference between 2 groups
Investigator Global Assessment	x
Three Item Severity scale (TIS)	x
Use of topical treatments for eczema (including topical steroids)	x
Safety (skin infections, hospitalisations for eczema)	x
Other healthcare resource use	x

Measure	Difference between 2 groups
Patient Global Assessment	✓.
POEM – patient reported symptoms	✓.
Quality of Life: Patient (ADQoL)	x
Quality of Life: Parent (EQ-5D-3L)	x
Quality of Life: Family (DFI)	x

Weekly POEM scores

Difference in means -2.8
(95% CI -3.9, -1.8)



- NHS perspective ($n = 273$, 91%)
- Mean set of garments per participant = 4.15
- Mean cost £318.52
- No reduction in other healthcare costs (healthcare visits, prescriptions)
- Incremental cost per quality-adjusted life year was £56,811
- At a willingness to pay of £30,000 per QALY, the probability of silk garments being cost-effective was 12%

- Pragmatic design, reflects normal practice
 - Adherence in wearing the silk garments
 - Recruited children with moderate to severe eczema, but trial participants may have had milder disease than patients for whom silk garments are currently prescribed in the NHS
- Not able to comment on effectiveness if worn 100% of the time or in more severe patients
- Not able to comment on other forms of clothing / garments e.g tubifast, viscose garments

- This is the first independent RCT of silk clothing
- It was adequately powered with high follow-up rates and good adherence with the intervention
- CLOTHES trial found no evidence of clinical or economic benefit from silk clothing

www.nottingham.ac.uk/CLOTHES

Team:

- The CLOTHES trial team
- Recruiting centres (Nottingham, Royal Free London, Cambridge, Portsmouth, and Isle of Wight)
- The parents and children who took part
- Nottingham Clinical Trials Unit
- UK Dermatology Clinical Trials Network
- UK Clinical Research Network
- University of Nottingham, University of East Anglia, University of Portsmouth, University of Dundee
- Espère Healthcare Ltd. (UK and Ireland distributor for DermaSilk™, AlPreTec SrL. Italy) and DreamSkin Health Ltd. donated the garments.

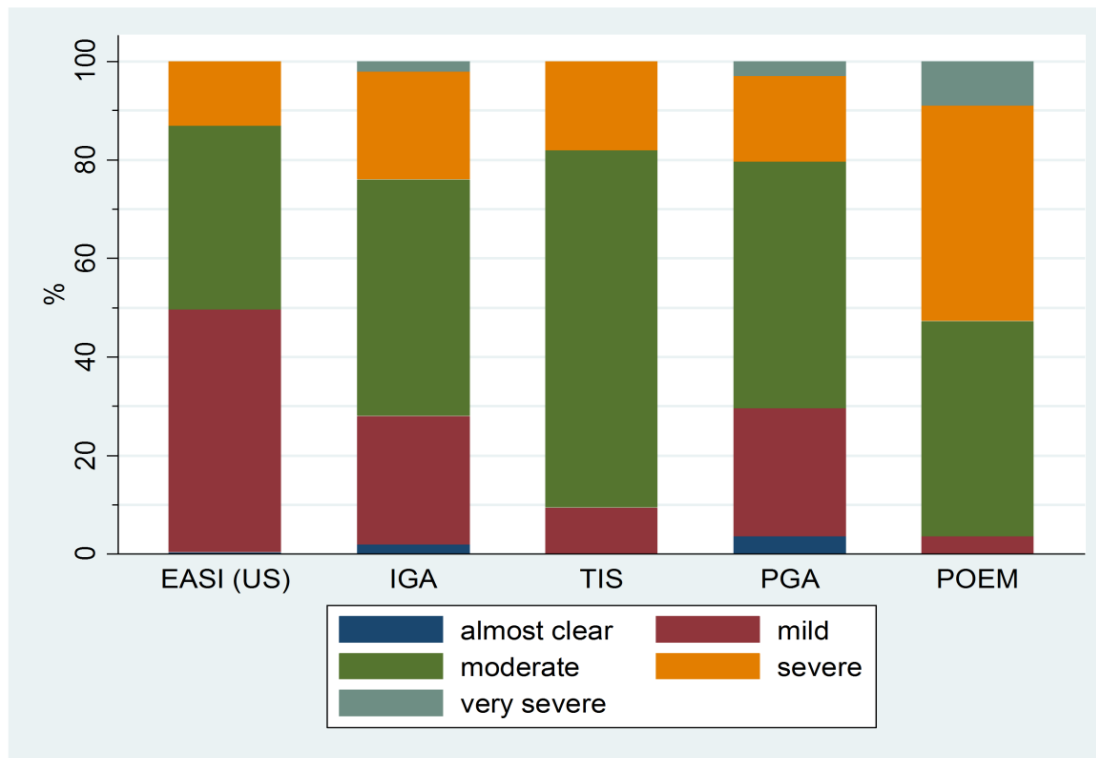
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- The views and opinions expressed therein are those of the authors and do not necessarily reflect those of the Health Technology Assessment programme, NIHR, NHS or the Department of Health.



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- *FLG* status:
32% had at
least one null
mutation

