

Introduction to the Aron Regimen™ for the treatment of atopic eczema

PREPARED BY A GROUP OF PATIENTS (AND PARENTS OF)
OF DR RICHARD ARON, CONSULTANT DERMATOLOGIST
AUGUST 2019

Who is Dr Richard Aron

- Health Professions Council of South Africa (HPCSA) as a specialist in Dermatology, registration number MP 0110817
- M.B. Ch.B. M.Med. (Derm) U.C.T.
- Practising Consultant Dermatologist for over 40 years
- Current clinic: South Africa: Christiaan Barnard Memorial Hospital, Cape Town 8001
- Online consultation service commenced in 2008; over 10,000 patients treated to date
- More information on the online service can be found at www.draron.com
- The map shows just some of Dr Aron's patients, there are currently almost 100 patients in New Zealand



Fundamentals of the Aron Regimen

Extract from Dr Aron's website www.draron.com:

“I believe that the single most important factor causing the inflammation in Atopic Eczema and contributing to flares is the presence of bacterial infection (Staphylococcus Aureus) in a large percentage of cases.

A common flaw in conventional therapy is the use of potent steroids in short bursts followed by so called steroid holidays.

This results in eczema rebound on a regular basis. The Aron Regimen uses significantly diluted steroids for longer periods. The steroid dilution allows for more frequent mixture application with reductions when control is achieved. This reduces the potential for rebound.”

Reference: NATURE 2013 Nov 21; 503:397 Blaming the staph – the role of delta toxin in Atopic Dermatitis – Nakamura Y et al.

Case Series Study of the Efficacy of Compounded Antibacterial, Steroid, and Moisturizer in Atopic Dermatitis

Fatima Lakhani , B.S., Kachiu Lee, M.D., M.P.H.,† and Peter A. Lio, M.D

“Our findings suggest that CASM (compounded antibacterial, steroid, and moisturizer [CASM]) is an effective therapy in treating patients with AD, including those previously using medium-potency or stronger corticosteroids or systemic agents. The reduction in eczema severity and extent in these patients suggests that CASM may be more effective than some conventional approaches.

CASM contains mupirocin, a moisturizer, and a medium-potency corticosteroid, resulting in significantly lower corticosteroid potency. Despite this lower potency, almost 70% of the patients previously taking medium-potency steroids or stronger responded to CASM. Although there are many unknowns, it is possible that this approach could have a lower risk of corticosteroid side effects.”

ACKNOWLEDGMENTS

We are indebted to Dr. Richard Aron for stimulating
the idea for this report.

PEDIATRIC DERMATOLOGY VOL. 34 NO. 3 322–325, 2017

The Aron Regimen in practice

- For most patients, the treatment will involve applying a compound cream combining a topical steroid, antibiotic and moisturiser.
- The components and concentrations will be tailored to each patient but typically the amount of moisturiser will be 9-12 times the amount of steroid in the compound cream.
- The cream is typically applied 4-6 times per day in the first week, with the number of applications quickly tapering down over time.
- The speed of the tapering down will depend on the severity of the eczema and how the eczema responds to the Aron Regimen.
- For example, after 6 months some patients have been able to stop regular use of the cream completely and others are able to maintain control of the eczema on a single application of the cream daily, every second day or 2 to 3 times weekly.
- The antibiotic element is essential in the first phase of treatment but it may be possible to remove the antibiotic from the mix at a future point.

Patient case studies

There are over **50 CASE STUDIES**. To view visit <http://eczemasense.org/pdf/dr-aron-case-studies.pdf>

CASE STUDY 1

Case study 1 (Dec 2014) Female, aged 20 months when started on Aron Regimen

Prior to commencing Aron Regimen	Age when diagnosed with atopic eczema	8 months
	Under treatment of GP or Dermatologist prior to commencing Aron Regimen	GP
	Most recent treatment prior to commencing Aron Regimen (immunosuppressants: any time; rest: previous year)	Topical steroids: Bethovate, Eumovate, Hydrocortisone 1% Oral steroids: No Topical immunosuppressants: No Oral immunosuppressants: No Antihistamines: No
	Any hospital emergency or elective admissions related to atopic eczema since diagnosis? If yes, how many?	No
	Any absences from school due to eczema (other than clinic appointments)?	N/A
Since commencing Aron Regimen	Date started the Aron Regimen	Feb 2014
	Current treatment	September 2017: Crooks of elbows/behind knees and on fingers, used random and infrequent September 2016: A few fingers only now, 2-3 x per week February 2016: Hands 2-3 x per week, nowhere else. Treat flares as necessary. July 2015: Only only small areas (hands/wrists, left ankle, right knee) every 3 days Feb 2015: Antibiotic removed from the mix Dec 2014: Applied once every 3 days Mix of steroid, antibiotic and moisturiser creams
	Any hospital emergency or elective admissions related to atopic eczema since commencing Aron Regimen?	No
	Any absences from school due to eczema (other than clinic appointments or initial week of Aron Regimen)?	N/A

Case study 1 – female, aged 20 months Photos before commencing Aron regime



Note from parents:

She was covered head to ankle and could not sleep more than 2 hours at a time. We were all miserable.

Case study 1 – female, aged 20 months Photos after commencing Aron regime



Note from parents:

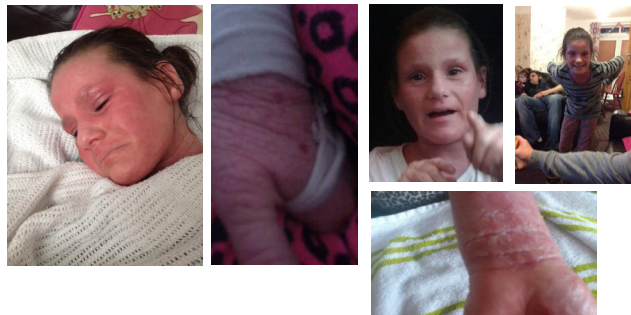
She sleeps all night, every night. Flares are manageable and she is happy.

CASE STUDY 2

Case study 2 (Dec 2014) Female, aged 12 when started on Aron Regimen

Prior to commencing Aron Regimen	Age when diagnosed with atopic eczema	3 months
	Under treatment of GP or Dermatologist prior to commencing Aron Regimen	Dermatologist
	Most recent treatment prior to commencing Aron Regimen (immunosuppressants: any time; rest: previous year)	Topical steroids: Elocon Oral steroids: Prednisone Topical immunosuppressants: Protopic Oral immunosuppressants: No Antihistamines: Yes
	Any hospital emergency or elective admissions related to atopic eczema since diagnosis? If yes, how many?	Yes, 8 admissions
	Any absences from school due to eczema (other than clinic appointments)?	Yes
Since commencing Aron Regimen	Date started the Aron Regimen	Jan 2014
	Current treatment	September 2017: 1 app per day legs/arms and face September 2016: 1 app per day over summer due to allergens February 2016: Just used for flares now July 2015: Applied twice per week all over body Feb 2015: No. of applications reduced to twice a week on legs/lower body and 3 times a week on top half/face Dec 2014: Applied twice a day to body and once every 2 days to face Mix of steroid, antibiotic and moisturiser creams
	Any hospital emergency or elective admissions related to atopic eczema since commencing Aron Regimen?	No
	Any absences from school due to eczema (other than clinic appointments or initial week of Aron Regimen)?	No

Case study 2 – female, aged 12 Photos before commencing Aron regime



Note from parents:

Constantly flared skin. Constant itch. No sleep. Unable to attend school. Massive impact on family. No quality of life.

Case study 2 – female, aged 12 Photos after commencing Aron regime

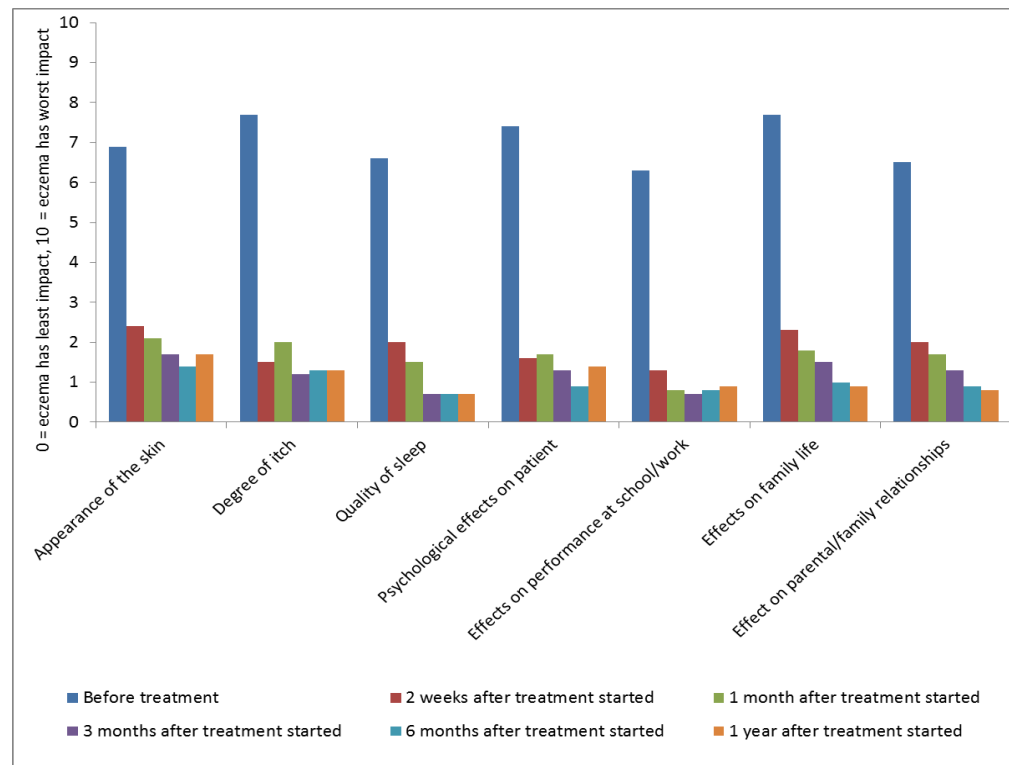


Note from parents:

No itch. Normal family life. Normal sleep. Back to school full time. Normal quality of life.

Patient feedback

- Between 2014 and 2016, Dr. Aron gathered patient feedback via anonymous online forms which asked the patient (or their parent) how things were immediately before treatment on the Aron Regimen began and 2 weeks, 1 month, 3 months, 6 months and 1 year after treatment began.
- The patient (or their parent) was asked to rate 8 factors (appearance of the skin, degree of itch, quality of sleep etc) from 0 to 10, with 0 being the least troublesome and 10 the most troublesome.
- Responses from over 900 patients were received to date. The graph opposite gives a high level summary of the results.
- To read further information regarding the graph: <http://eczemasense.org/pdf/ar-feedback-summary-to-1-year.pdf>



Timeline

SEPTEMBER 2015

**CHICAGO INTEGRATIVE
ECZEMA CENTER**

Dr Aron presented a session on "The Aron Regime". The session was hosted by Dr Peter Lio, MD, co-founder and co-director. Dr Lio now has scores of patients on the Aron Regimen. Here is an article written by Dr Lio about the Aron Regimen:
<https://nationaleczema.org/innovations-in-eczema-care-the-aron-regime/>

AUGUST 2016

**ANNUAL CONGRESS OF THE
SOUTH AFRICAN DERMATOLOGY
SOCIETY**

Dr Aron gave a presentation on Cyber Medicine – Evolution of the concept of using the internet as a vehicle in the treatment of Atopic Eczema; and the Aron Regimen

JUNE 2017

**NATIONAL ECZEMA
ASSOCIATION INTERVIEW
DR RICHARD ARON**
<https://nationaleczema.org/old-treatment-approach-offers-new-option-eczema-patients/>

DECEMBER 2017

**TRIAL: RED CROSS HOSPITAL
IN CAPE TOWN (ONGOING)**

The trial, called "Efficacy of combining topical antibiotic/steroid/moisturiser in treating atopic dermatitis", is a major stepping stone in investigating the place of staph aureus bacteria in activating and maintaining atopic eczema. If successful, the trial will be a crucial addition to the research available to support the Aron Regimen

SEPTEMBER 2019

**ANNUAL CONGRESS OF
THE SOUTH AFRICAN
DERMATOLOGY SOCIETY**
Dr Aron will be giving a presentation on CASM - combining topical antibiotic/steroid/moisturiser

JULY 2019

**DR ARON PRESENTED AT
THE NATIONAL ECZEMA
ASSOCIATION
ECZEMA EXPO '19**

AUGUST 2015

**ANNUAL CONGRESS OF
THE SOUTH AFRICAN
DERMATOLOGY SOCIETY**

Dr Aron gave a presentation on "Tele-Dermatology – the management of Atopic Eczema via the Internet"

FEBRUARY/MARCH 2016

**NATIONAL ECZEMA ASSOCIATION
FOCUS ON THE ARON REGIMEN**

The Aron Regimen was the lead feature in the NEA's February newsletter (eInsights) and also shared on their facebook page. As a result, over 100 patient testimonies were received:

<http://eczemasense.org/recognition-in-the-medical-community/>

MAY 2017

**CASE SERIES STUDY OF THE
EFFICACY OF COMPOUNDED
ANTIBACTERIAL, STEROID, AND
MOISTURIZER IN
ATOPIC DERMATITIS**

Fatima Lakhani, B.S.,*
Kachiu Lee, M.D., M.P.H.,† and
Peter A. Lio, M.D.*,‡,
Pediatric Dermatology Vol. 34 No. 3
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MAY 2018

Now over 40 medical professionals WORLDWIDE practising the ARON REGIMEN directly

JUNE 2018

**DR ARON PRESENTED AT
THE NATIONAL ECZEMA
ASSOCIATION
ECZEMA EXPO '18**

More information

If you are a medical professional and have questions or would like more information then you can contact Dr Aron via aronregimen@gmail.com.

Website: www.draron.com

Facebook (patient-run):

Information page: <https://www.facebook.com/draronpage>

Support group: <https://www.facebook.com/groups/draron/>