WHEN BEING A BUTTERFLY IS PAINFUL

Epidermolysis Bullosa (EB) UNCOVERED

FRAGILE
Makes the skin so fragile that children with it are referred to as “butterfly children.”

RARE
Passed on by parents who may not be aware they are carriers. It is estimated that 1 in 17,000 babies born will have some form of EB. Worldwide there are thought to be ~500,000 people living with EB. In the UK there are known to be 5,000 people who have the condition.

CAN BE DEVASTATING
Intensely painful, recurrent blistering and chronic wounds of the skin can result in limited mobility. Not only does EB affect the external skin, but also the lining of the mouth and throat, the eyes and digestive system, leading to malnutrition, anaemia, intolerable itch and pain.

NO CURE
Current treatment is focused on wound care which involves daily or regular dressing changes to protect, encourage healing and prevent infection. Depending on disease severity, dressing changes can take several hours each day and can be extremely painful, often requiring the use of prescription pain medication.

LIFE-LIMITING
People with the most severe forms often don’t survive past childhood.

References
1. Fine JD. Inherited epidermolysis bullosa Orphanet Journal of Rare Diseases 2010;5:12 http://www.orphanet-jrd.com/content/5/1/12.
THREE MAIN TYPES OF EB

SIMPLEX (EBS)

Although often life-altering, this is the most common subtype of EB, causing less troublesome disease compared to other types. With the exception of its most severe types, EB simplex only affects the skin; blistering is limited, sometimes just restricted to the hands and feet and where clothing causes friction. Heat and humidity can also cause the condition or make it worse.

DYSTROPHIC (DEB)

DEB is one of the major forms of epidermolysis bullosa. In mild cases, blistering may primarily affect the hands, feet, knees, and elbows. Severe cases involve widespread blistering and wounding that can lead to blindness, scarring and the deformity and rigidity of joints. In such cases, there is also a high chance of developing squamous cell carcinoma of the scalp before the age of 35.

JUNCTIONAL (JEB)

A rare form of EB. JEB has a broad spectrum of severity from milder forms to the lethal form of generalised severe JEB with most (87%) not surviving beyond the first year of life. In all forms of JEB, the most problematic wounds occur on the scalp and lower legs.

PSYCHOLOGICALLY CRUSHING

Not only do children live with significant physical pain and discomfort, but they also face deep social and psychological impacts. Many children are able to attend school, although they require extra care and are often not able to take part in all the same activities. However, some children are not able to attend school at all, which can have a huge impact on their social life and education. Carers are often parents who face the very real and unthinkable prospect of never being able to properly cuddle their children. They regularly find themselves as their child’s nurses, having to go through the difficult routine of changing bandages and dressing wounds while watching their child in pain.

INTO THE FUTURE

Children living with EB and their caregivers’ greatest need is for better ways to manage the daily consequences of their condition, especially their wounds, unbearable itch and pain. There is increasing focus on prevention and treatment of the aggressive skin cancers associated with EB. With the breadth of research on genetic therapies, there is great hope and expectation for a cure to be developed for each type or EB in the longer term.

References
3. Fine JD. Inherited epidermolysis bullosa Orphanet Journal of Rare Diseases 2010;5:12 http://www.ojrd.com/content/5/1/12.