Newborn Skin Health Research

Implications for Care Across Conditions



Welcome and Introductions

Professor Dame Tina Lavender, PhD Centre for Childbirth, Women's and Newborn Health (CWNH) Liverpool School of Tropical Medicine



| Welcome & Introduction | Tina Lavender, PhD |
|---|---------------------------------|
| The Science of Infant Skin | M. Catherine Mack, PhD |
| Infant Skin Microbiome | Georgios Stamatas, PhD |
| Panel Discussion Question and Answers Session | Moderator Tina Lavender, PhD |
| Closing Remarks Session Evaluation and Adjournment | Tina Lavender, PhD |

Learning Objectives - Enhance your Understanding of...

- 1. The unique differences of infant skin vs. adult skin, its maturation, and how these differences inform infant skincare
- 2. The skin microbiome, its role, and how it works in combination with the skin as a "first line of defense"
- 3. The importance of skin care management to prevent barrier disruption



- The opinions expressed by the speakers are their own and not that of their employers or the program sponsor
- Dr. Mack and Dr. Stamatas work in Research & Development as employees of Johnson & Johnson Consumer Health operating companies
- Dr. Lavender has received research and educational grants from Johnson & Johnson Consumer Inc. in the past
- This presentation and speakers are sponsored by the Research & Development group at Johnson & Johnson Consumer Inc.

Why is Understanding Infant Skin Important to Midwives?

- Newborn skin barrier remains immature for some time following birth; making it susceptible to infections and the penetration of allergens and irritants
- The microbiome works alongside the skin barrier to keep baby skin healthy
 - Newborn babies get their first microbiome from their mother during birth
- Early microbiome development is critical, having long term impact
 - Gut health, mental health, immune health
- How we care for newborn skin can disrupt the skin barrier and microbiome leading to harm. This is especially true for those infants genetically pre-disposed to atopic dermatitis.
- Any skin care practices should be based on rigorous evidence

Why is Understanding Infant Skin Important to Midwives?

- Midwives are the primary care givers for women in the immediate postnatal period
- The advice we give parents can have a long-term impact on the health of the baby
- It's always important to understand evidence-based skin care practices which, in turn, enables us to provide parents with choices based on best available research
- But as we will learn in this session, the importance of preventing skin barrier disruption through appropriate skin care management becomes even more important for compromised skin conditions, such as Atopic Dermatitis

The Science of Infant Skin How it Develops and Implications for Care

M. Catherine Mack, PhD Research Manager Translational Science Johnson & Johnson Consumer Inc., USA

The Human Skin – Our Outside Organ is Our Largest

- Rapid growth in skin surface area over the first years of life¹
- Baby ~ 3-5 square feet¹
- Adult ~ 20 Square feet ²



At birth, skin surface area grows at a rate of 75 cm²/week

Surface area growth rate decreases to about 10 cm²/week by 1 year



Skin Function

- Natural protective barrier from
 - Physical injury
 - Pathogenic microbes
 - Chemical agents
 - Extreme temperatures
- Starts process for making Vitamin D to help body absorb calcium and maintain phosphorous for healthy bones
- Sensory perception: temperature, pressure, touch, pain
- Temperature regulation of the body
- Helps to **restrict fluid** and water **loss**



Babies' Skin is Different: Structure, Composition, Function



| Structure | Composition | Function |
|--|--|---|
| Stratum corneum and epidermal thickness¹ | Water content² Natural moisturizing factor (NMF)² | Water handling properties² Barrier function² |
| Corneocyte size¹ Surface roughness Elasticity | Melanin³ Lipid content and organization | Skin reactivity Cell proliferation¹ |

| HEALTHY SKIN | S | KIN PARAMETER | ADULT | INFANT | |
|--------------|-------------------|--|----------------|---|--|
| | Surface | Microrelief Lines | Less Dense | More Dense An Annal State | |
| STRUCTURE | Thickness | Stratum Corneum (SC) | Thicker ~10 μm | Thinner ~7 μm ↑permeability | |
| | | Epidermis | Thicker | Thinner (~20% vs. Adult) | |
| | Water Content | Stratum Corneum (SC) | Lower | Higher (older infants, drier at birth) 个skin hydration | |
| COMPOSITION | NMF | Natural Moisturizing Factor Concentration | Higher | Lower 个dryness | |
| | Surface Lipids | Sebum | Higher | Lower (7-10 mo old) ↓hydro-lipid film | |
| ELINICTION | TEWL | Trans-epidermal water loss | Lower | Higher 个water evaporation | |
| FUNCTION | рН | Surface pH | Lower | More Alkaline (newborn) | |

1. L.S Telofski et al. Dermatology Research and Practice, vol 2012. 2. G.N. Stamatas et al. International Journal of Cosmetic Science, 2011, 33, 17-24

Infant Skin is Thinner than Adult Skin and has Smaller Corneocytes





Although more hydrated than adult skin it can lose water up to 2X as fast

Smaller cells and thinner skin results in shorter pathway from outside to inside

Across Geographic Regions & Skin Type, Infant Skin Barrier **Differs from Adult**

- Study performed in Beijing, China; Mumbai, India; and New Jersey, USA
- TEWL is higher in infants compared to adults in all three populations studied
- TEWL on exposed skin (dorsal forearm) approaches adult-like values faster than unexposed skin (upper inner arm)



Unexposed skin

Transepidermal Water Loss

Dorsal Forearm



Exposed skin

Maintaining Skin Barrier Integrity is Essential

- Can be measured by skin's ability to hold onto water TEWL*
- Skin hydration of the stratum corneum (SCH) also important (assessed with electrical measures)
- Is influenced by skin pH
- Immaturity, alterations in skin pH, injury or disease can result In impaired skin barrier function

pH - A Measure of Alkalinity or Acidity



The Acid Mantle Key to Maintaining the Integrity of the Skin Barrier

- What is it?
 - Protective, mildly acidic, skin "film" protects overall health of the skin
 - Allows resident skin flora to flourish
 - Inhibits growth of transient flora, such as, gram negative bacteria (E. coli, Pseudomonas); gram positive bacteria (Staphylococcus); fungal (C. albicans)
- What happens if it becomes more alkaline?
 - Interferes with protective barrier
 - Cell separation results in more water loss → dry skin, flaking, irritation, roughness
 - Skin vulnerable to bacterial invasion \rightarrow infection



What is the pH range of baby's skin?

- A. 2.0 3.9
- B. 5.0 5.9
- C. 7.0 7.9
- D. 10.0 10.9

pH - A Measure of Alkalinity or Acidity



Acid Mantle (Skin pH) is Protective - Inhibits Growth of Pathogens and Transient Flora and Favors Growth of Protective Resident Flora

| Skin Type | Skin pH (~) |
|--|---|
| Full Term Healthy ¹ | pH > 6.0 @ Birth Falls to pH <5.0 at Day 4 |
| Premature ² | pH 5.5 @ one week pH 5.1 @ one month |
| Adult ³ | pH 5.0 – 5.9 |
| Diapered Skin ⁴ | pH > 6.0 |
| Atopic Dermatitis Skin ⁵ | pH >6.0 |
| After Alkaline Soap Cleansing ⁶ | pH 9.5; increase can last over hours |

Behrendt & Green, 1971
 Fox, Nelson, & Wareham 1998

Braun et al, 1986
 Visscher, Chatterjee, Ebel, LaRuffa, & Hoath, 2002

5. Knor, et al, 2011 6. Braun et al, 1986

Infant Skin – Needs Protection from Sun Exposure

- Acute as well as cumulative sun damage can have serious consequences, including risk of skin cancer
- Pigmentation changes are an indicator of skin adaptation to sun exposure, and therefore can be used as a noninvasive surrogate marker for photodamage
- Sun induced pigmentation changes observable as early as the first summer of life
 - Increased melanin content in exposed skin areas
 - Freckling observed on the face

Visible Skin Changes Are Observed In Infants After Summer Season



Mack MC, et al. J Invest Dermatol. 2010;130:2235-2338. Mack MC, et al. 26th International Congress of Pediatrics, Johannesburg, South Africa. 2010.

Visible Skin Changes Are Observed In Infants After Summer Season – Freckles

| Before | e Summer | After Summer |
|--|---|-------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| Visible only Visible in N Visible only | y in May (<i>disappeared after sun expo</i> 1ay and September y in September (<i>appeared after sun e</i> | sure) xposure) |

Recommended UV Protection Strategies

- Protect skin daily
- Use shade, clothing, wide brimmed hats (protect scalp, face, ears, neck)
- Avoid peak daylight hours
- Appropriately formulated UV protection products
 - Read product label for age restrictions
 - Check with baby's healthcare provider
- Note, healthcare professionals additionally recommend appropriate UV blocking sunglasses to protect eyes

Babies' Skin is Uniquely Different; Still Developing

| Implications for Products |
|---|
| ed mild products with less ntial to alter skin barrier tion; less potential to irritate; r potential for allergy ed mild cleansers, moisturizers, sunscreens designed for baby's |
| |

1. Stamatas, G et al. Pediatric Dermatology 2009; 2. Nikolovski J, et al. J Invest Dermatol. 2008;128:1728-1736. 3. Larson A Current Opinion Pediatrics 2006;17:481-485.

- 1. Infant skin is different from adult skin in structure and composition and *continues to develop* over the first years of life
- 2. These differences lead to functional differences in skin barrier properties with implications for care and protection
- 3. Ensure baby skin care routines support infant's developing skin and that products are mild and specially formulated for baby's unique needs (cleansers, moisturizers, etc.)

Infant Skin Microbiome Research on the Development of Skin's Protective Layer and Connection with Care

Georgios Stamatas, PhD Research Associate Director & Fellow Johnson & Johnson Sante Beaute, France

Question

Which answer do you think is correct?

- **A. All** microbes are **harmful** to our health and should be removed from baby skin through rigorous cleansing
- **B.** Some microbes are harmful, while some are inoffensive; we should ensure that baby skin remains microbe free
- C. There are **some harmful and some beneficial** microbes, we should strive to enhance the beneficial ones while ensuring protection from the harmful ones

Skin-microbe Relationships

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The Skin Microbiome as a First Line of Defense

Healthy skin is inhabited by harmless microbes, which also help to keep harmful ones away

Grice, E., Segre, J. The skin microbiome. Nat Rev Microbiol 9, 244–253 (2011). https://doi.org/10.1038/nrmicro2537

The Skin Microbiome

A diverse community of microorganisms coexisting at the skin surface.¹

A Balanced Microbiome

The skin microbiome is a habitat of billions of beneficial and harmful bacteria. An imbalance of these bacteria can lead to a variety of skin conditions including acne, eczema, rosacea and ageing.¹

pH Balance

The skin microbiome prefers a relatively acidic environment (pH around 5.0) which also inhibits growth of pathogens.¹

Bacterial Diversity Differs by Body Zone Differences in skin temperature, texture, thickness, humidity and chemistry help determine which kinds of microbes live where on the skin.¹

1. EA Grice, JA Segre, Nat Rev Microbiol 2011: 9(4), 244-53.

2. EA Grice, HH Kong, G Renaud, AC Young, et al. Genome Res 2008: 18(7), 1043-50.

Question

Where is diversity important?

- A. In human societies as cultural diversity
- B. In natural ecosystems (lakes, forests, coral reefs, etc.)
- C. In microbial ecosystems (skin microbiome, gut microbiome, etc.)
- D. In long-term investment portfolios
- E. All of the above

Skin Microbiome at Birth

| <i>In utero</i> skin is in a sterile environment | | | The skin of vaginally-born babies is colonized by microbes from the mother's vagina ¹ | | | The skin of C-section babies is colonized by microbes from the mother's skin ¹ | |
|--|--|---|---|----------------------------|--|--|--|
| Baby skin micro community is c and becomes diverse as the grows ² | | crobiome s dynamic es more he baby s ² | Skin conta mother and feeding, ka wash, mass opportunity | acts ang age y fo | s between hild (breast- garoo care, e, etc.) is an or exchange | | |

of microbiome²

¹ MG Dominguez-Bello, EK Costello, M Contreras, M Nargris, G Hidalgo, N Fierer, R Knight, *PNAS* 107(26), 11971-5, 2010
 ² KA Capone, SE Dowd, GN Stamatas, J Nikolovski, *J Invest Dermatol* 2011: 131, 2026-2032
 ³ G Gaitanis, G Tsiouri, P Spyridonos, T Stefos, GN Stamatas, A Velegraki, ID Bassukas, *Pediatr Dermatol* 36, 460-465, 2019

Mode of Birth Influences Newborn Skin Microbiome Composition

Principal component analysis of microbiome data demonstrates grouping of:

- Vaginally-born babies' skin microbiome with mother's vaginal microbiome, dominated by Lactobacillus, Prevotella, or Sneathia spp.
- C-section babies' skin microbiome with mother's skin, dominated by Staphylococcus, Corynebacterium, and Propionibacterium spp.
- Both are distinct from oral microbiome

Baby Skin Microbiome Differs from Adult and Evolves with Baby Age

Infant Skin Microbiome differs from that of Adult Species diversity increases over the first year of life

KA Capone, SE Dowd, GN Stamatas, J Nikolovski, J Invest Dermatol 2011: 131, 2026-2032

Concordance with Mother's Skin Microbiome

Skin microbe concordance between the mother-infant dyad is particularly high early in life

The Skin Microbiome in Disease - Importance of Diversity

- The diversity of microbes within a given area of the body can be defined as the number and abundance of distinct types of organisms
- Diversity has been linked to several human diseases
 - C. difficile colitis lack of diversity, monocolonization in colon with C. difficile
 - Obesity and inflammatory bowel disease low diversity in the gut
 - Bacterial vaginosis high diversity in the vagina
 - Atopic dermatitis (AD) lesions increase in *S. aureus* and low diversity
 - Lesions of acne vulgaris patients lower diversity, and certain strains of Propionibacterium acnes
 - Changes in relative abundance lesional areas of psoriasis
- New research suggests that a diseased state may be achieved by the absence of commensal bacteria and not simply the presence of a pathogen

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The Skin Microbiome Diversity and Skin Barrier Function (meta-analysis of data from 3 studies)

(Johnson) Johnson Consumer INC.

Poster at the American Academy of Dermatology Annual Meeting: 1-5 March, 2018; Washington, DC, USA.
 Poster at the American Academy of Dermatology Annual Meeting: 16-20 February, 2018; San Diego, CA, USA.

Clinical Study – Wash Only vs. Wash + Lotion

Adding lotion to the daily cleansing routine accelerates increase in skin microbial richness

- 1. The skin and its microbiome continue to mature and develop long after birth, playing an important role as a first line of defense
- 2. Skin care routines should strive to maintain the integrity of the skin barrier *and also* to support the skin microbiome
- 3. In a clinical study, adding an application of lotion after bath, using mild products specifically formulated for baby's skin, was shown to accelerate increase in skin microbial richness

Are Skin Barrier Dysfunction and Skin Microbiome Imbalance Associated with Atopic Dermatitis (AD)?

Atopic Dermatitis (Eczema) Facts

- Up to 20% of children globally ¹
 - 1 in 5 children (UK)²
 - 10% of population (US) ³
 - ~10 Million Children
- All ethnicities ³
 - African American / Hispanic children have more severe AD
- 45% of all AD develops in first 6 months ³

- 2. https://www.eczema.org
- 3. <u>https://www.national</u>eczema.org/research/eczema-facts/

Asher MI, Montefort S, Bjorksten B, Lai CK, Strachan DP, Weiland SK, Williams H: Worldwide time trends in the prevalence of symptoms of asthma, allergic rhinoconjunctivitis, and eczema in childhood: ISAAC Phases One and Three repeat multicountry cross-sectional surveys. Lancet 2006;368:733-743

a. Hanifin JM, Reed ML, Eczema Prevalence and Impact Working Group. A population-based survey of eczema prevalence in the United States. *Dermatitis*. 2007;18(2):82-91. b. Silverberg JI, Hanifin JM. Adult eczema prevalence and associations with asthma and other health and demographic factors: a US population-based study. *J Allergy Clin Immunol*. 2013;132(5):1132-1138. c. Silverberg JI, Simpson EL. Associations of childhood eczema severity: a US population-based study. *Dermatitis*. 2014;25(3):107-114. d. Chung J, Simpson EL. The socioeconomics of atopic dermatitis. *Ann Allergy Asthma Immunol*. 2019;122(4):360-366. e.Bieber T. *N Eng J Med* 2008; 358: 1483–84

Clinical Manifestations (AD)

- Characteristic Locations
 - Infant & Child Face, Inside of elbows, behind the knees
 - Puberty Also hands and neck
- Itch Hallmark Sign
- Appearance of Lesional Skin
 - Redness on lighter skin tones
 - Darker than surrounding on darker skin tones

Skin Barrier Dysfunction (AD)

- Decreased epidermal lipids
- Impaired innate immunity
- Filaggrin mutations

Skin Microbiome: Dysbiosis with AD

Brandwein et al Biofilms & Microbiomes 2016

Kong, HH. et al. Genome Res. 2012 May;22(5):850-9 <u>"Microbial biofilms and the human skin microbiome"</u> by Michael Brandwein, Doron Steinberg, and Shiri Meshner is licensed under <u>CC BY 4.0</u>

Skin-Directed Care for AD

Factors of Prevention

- Avoidance of Irritants
- Environment
- Proper clothing choices
- Proper bathing

Skin Care

- Shorter bath, lukewarm temperature, mild non-drying cleanser, pat dry (no rubbing)
- Emollients after bath and during day; consider using 2x per day
- Physician may recommend medications like anti-inflammatories, antibiotics, other

* Use cleansers and emollients that are specially formulated and tested for babies and children with eczema.

Key Learnings

- Eczema (AD) signs and symptoms are real, significant, and impact the entire family (QoL)
- Eczema (AD) is characterized by a dysfunctional skin barrier and is associated with skin microbiome imbalance (dysbiosis)
- Daily skin care management is a critical strategy of daily care for those with eczema (AD)

• What is the most interesting thing you just learned about the infant skin microbiome?

Closing Remarks

Professor Dame Tina Lavender, PhD Centre for Childbirth, Women's and Newborn Health (CWNH) Liverpool School of Tropical Medicine Daily Skin Care Management is Essential to Help Maintain Skin Barrier Integrity and to Support the Skin Microbiome

Infant skin can lose water 2x as fast. Smaller cells and thinner skin - shorter pathway outside to inside. Mildly acidic skin pH is protective and supports healthy skin microbiome.

Balanced skin microbiome is protective. dysbiosis, or alterations in the skin microbiome, are associated with skin diseases like AD.

Atopic

Dermatitis is

a common and challenging

skin condition in children with significant QoL impact. Daily skin care management is essential for AD and to help prevent skin barrier disruption and skin microbiome dysbiosis which can be associated with compromised skin.

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