

SUPPLEMENTARY TABLES

Supplementary Table 1: Reports demonstrating the efficacy of dupilumab in prurigo nodularis.

S. No.	Authors/Year	Type of study	Patient details	History of atopy	Prior treatments	Latency period till improvement
1.	Chiricozzi <i>et al.</i> , ^[17] /2020	Retrospective multicentre trial on 27 patients.	<ul style="list-style-type: none"> • M:F=11:16. • Age range: 23–83 years. 	Yes (18) No (9)	<ul style="list-style-type: none"> • Systemic CS. • Cyclosporine. • Phototherapy. • Methotrexate. • Azathioprine. 	4 weeks for both itch and nodules.
2.	Calugareanu <i>et al.</i> , ^[16] /2020	Retrospective study on 16 patients.	<ul style="list-style-type: none"> • M:F=7:9 • Age: 56 years (median) 	Yes (7) No (9)	<ul style="list-style-type: none"> • TCS. • Phototherapy. • Methotrexate. • Cyclosporine. • Thalidomide. • Antihistamines. • Dapsone. • Retinoids. • MMF. • Azathioprine. • Nemolizumab. • Anti-IL-17 and TNFα agents. 	3 months for both itch and nodules.
3.	Ferrucci <i>et al.</i> , ^[18] /2021	Retrospective observational cohort study on 11 patients.	<ul style="list-style-type: none"> • M:F=6:5 • Age Range: 19–88 years. 	Yes	<ul style="list-style-type: none"> • TCS. • Topical Calcineurin antagonists. • Antihistamines. • Systemic CS. • Cyclosporine. • Methotrexate. 	4 weeks for both itch and nodules.
4.	Tilotta <i>et al.</i> , ^[19] /2021	Case series of 11 patients.	<ul style="list-style-type: none"> • M:F=7:4. • Age range: 62–78 years. 	Yes	<ul style="list-style-type: none"> • TCS. • Antihistamines. • Systemic CS. • Cyclosporine. 	4 weeks for both itch and nodules.
5.	Napolitano <i>et al.</i> , ^[20] /2020	Case series of 9 patients.	<ul style="list-style-type: none"> • 9 males. • Age range: 31–63 years. 	Yes	<ul style="list-style-type: none"> • TCS. • Antihistamines. • Phototherapy. • Cyclosporine. • Methotrexate. 	16 weeks for both itch and nodules.
6.	Tavecchio <i>et al.</i> , ^[21] /2020	Case series of 18 patients.	Age and gender not specified.	Yes	<ul style="list-style-type: none"> • TCS. • Topical Calcineurin antagonists. • Systemic CS. • Cyclosporine. • Azathioprine. • Methotrexate 	4 weeks for both itch and nodules.
7.	Reynolds <i>et al.</i> , ^[22] /2020	Case series of 4 patients.	<ul style="list-style-type: none"> • M:F=1:3. • Age range: 17–71 years. 	Not specified.	<ul style="list-style-type: none"> • Topical/intralesional steroids. • Topical calcineurin blockers. • Topical crisaborole. • Systemic CS. • Antihistamines. • Doxycycline. • Methotrexate. • Gabapentin. 	4 weeks for both itch and nodules.

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Supplementary Table 1: (Continued).

S. No.	Authors/Year	Type of study	Patient details	History of atopy	Prior treatments	Latency period till improvement
8.	Beck <i>et al.</i> , ^[23] /2019	Case series of 3 patients.	<ul style="list-style-type: none"> • M:F=2:1. • Age range: 50–70 years. 	Not specified.	<ul style="list-style-type: none"> • Systemic CS. • Antihistamines. • Doxepin. • Gabapentin. • Phototherapy. • Cryotherapy. • Mupirocin. • Cyclosporine. • Dronabinol. 	4–12 weeks for both itch and nodules.
9.	Holm <i>et al.</i> , ^[24] /2020	Case series of 3 patients.	<ul style="list-style-type: none"> • Age range: 42–57 years. • All females. 	No	<ul style="list-style-type: none"> • TCS. • Topical calcineurin inhibitors. • Phototherapy. • Cannabinol. • Antihistamines. • Systemic CS. • Methotrexate. • Azathioprine. • Tetracycline. • Metronidazole. • Thalidomide. • TCS/intralesional steroids. • Topical calcineurin inhibitors. • Antihistamines. • Phototherapy. • Gabapentin. • Pregabalin. • Cyclosporine. 	Not specified.
10.	Almustafa <i>et al.</i> , ^[25] /2019	Case series of 3 patients.	<ul style="list-style-type: none"> • M:F=2:1. • Age range: 41–52 years. 	Yes	<ul style="list-style-type: none"> • Topical calcineurin inhibitors. • Antihistamines. • Phototherapy. • Gabapentin. • Pregabalin. • Cyclosporine. • TCS. • Cryotherapy. • Antihistamines. • Phototherapy. • Dapsone. • Methotrexate. • Thalidomide. • Cyclosporine. • TCS. • Phototherapy. • Antihistamines. • Systemic CS. • Cyclosporine. • TCS and systemic CS. 	2–8 weeks for itch followed by nodules.
11.	Calugareanu <i>et al.</i> , ^[26] /2019	Case report.	30-year-old female.	Yes	<ul style="list-style-type: none"> • Cyclosporine. • TCS. • Cryotherapy. • Antihistamines. • Phototherapy. • Dapsone. • Methotrexate. • Thalidomide. • Cyclosporine. • TCS. • Phototherapy. • Antihistamines. • Systemic CS. • Cyclosporine. 	3 months (itch and nodules).
12.	Mitsuyama and Higuchi ^[27] /2023	Case series of 4 patients.	<ul style="list-style-type: none"> • M:F=3:1. • Age range: 65–84 years. 	Yes	<ul style="list-style-type: none"> • Cyclosporine. • TCS. • Phototherapy. • Antihistamines. • Systemic CS. • Cyclosporine. 	2–4 weeks (itch) 4–8 weeks (nodules).
13.	Giura <i>et al.</i> , ^[28] /2020	Case report.	85-year-old female.	No	<ul style="list-style-type: none"> • TCS and systemic CS. 	1 week (itch) 4 weeks (nodules).
14.	Romano ^[29] /2021	Case report.	61-year-old female.	No	<ul style="list-style-type: none"> • Not specified. 	4 weeks for both itch and nodules.
15.	Bloomsteem and Hawkes ^[30] /2020	Case report.	76-year-old man.	Yes	<ul style="list-style-type: none"> • TCS. • Antihistamines. 	4 weeks for both itch and nodules.
16.	Criado <i>et al.</i> , ^[31] /2020	Case report.	87-year-old male.	Yes	<ul style="list-style-type: none"> • Systemic CS. • Antihistamines. • Cyclosporine. • Methotrexate. • Pregabalin. • Mirtazapine. 	4 weeks for itch and 16 weeks for nodules.

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Supplementary Table 1: (Continued).

S. No.	Authors/Year	Type of study	Patient details	History of atopy	Prior treatments	Latency period till improvement
17.	Tanis <i>et al.</i> ^[32] /2019	Case report.	43-year-old female.	Not specified.	<ul style="list-style-type: none"> • TCS. • Cyclosporine. • Phototherapy. • Methotrexate. 	8 weeks for both itch and nodules.
18.	Fachler <i>et al.</i> ^[33] /2020	Case report.	9-year-old female.	No	<ul style="list-style-type: none"> • TCS. • Antihistamines. • Phototherapy. • Cyclosporine. • Methotrexate. 	2 weeks for itch and 4 weeks for nodules.
19.	Liu <i>et al.</i> ^[34] /2021	Case report.	85-year-old man.	No	<ul style="list-style-type: none"> • TCS. • Gabapentin. • Thalidomide. • Ketotifen. • Cetirizine. 	12 weeks for both itch and nodules.
20.	Wieser <i>et al.</i> ^[35] /2020	Case series of 3 patients.	<ul style="list-style-type: none"> • M:F=1:2. • Age range: 65 and 66 years. 	No	<ul style="list-style-type: none"> • TCS/intralesional steroids. • Topical calcineurin inhibitors. • Systemic CS. • Methotrexate. • Antihistamines. • Gabapentin. • Phototherapy. 	4–28 weeks for both itch and nodules.
21.	Kovács <i>et al.</i> ^[36] /2020	Case report.	80-year-old female.	Yes	<ul style="list-style-type: none"> • TCS. • Topical calcineurin inhibitors. • Mirtazapine. • Methotrexate. • Antihistamines. • Gabapentin. • Phototherapy. • Paroxetine. • Cyclosporine. • Naloxone. • Naltrexone. 	2 weeks for itch and 10 weeks for nodules.

TCS: Topical corticosteroid, CS: Corticosteroids

Supplementary Table 2: Reports elucidating the efficacy of dupilumab in chronic hand eczema.

S. No.	Author/Year	Study type	Patient details	Hand eczema type/duration	History of Atopy	Prior treatment	Response to dupilumab	Adverse effects
1.	Weins <i>et al.</i> ^[41] /2019	Case report	12-year-old male	DE/6 months	Yes	<ul style="list-style-type: none"> • TCS. • Topical antimicrobials. • Phototherapy. • Systemic prednisolone, Mtx, CsA, antimicrobials. 	Complete stable remission in 4 months.	None
2.	Gan <i>et al.</i> ^[42] /2022	Case report	29-year-old female	Occupational CHE/5 years	No	<ul style="list-style-type: none"> • TCS • Pimecrolimus • Systemic H1 blockers. 	<ul style="list-style-type: none"> • Improved in 4 weeks. • Almost healed by 16 weeks. 	None

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Supplementary Table 2: (Continued).

S. No.	Author/Year	Study type	Patient details	Hand eczema type/duration	History of Atopy	Prior treatment	Response to dupilumab	Adverse effects
3.	Zhu <i>et al.</i> , ^[43] /2020	Case report	43-year-old male	Chronic irritant hand dermatitis >10 years	No	TCS and systemic CS.	Improved by 1 month and cleared by 5 years.	None
4.	Nanda <i>et al.</i> , ^[44] /2019	Case Report	44-year-old female	DE >2 years	Yes	Antibiotics and systemic CS.	Pain disappeared by 6 weeks and lesions cleared within 8 weeks.	<ul style="list-style-type: none"> • Injection site pain. • Pruritic conjunctivitis.
5.	Oosterhaven <i>et al.</i> , ^[45] /2018	Case Report	50-year-old female	Chronic atopic hand eczema for 9–≥35 years	Yes	<ul style="list-style-type: none"> • Emollients. • Potent TCS. • PUVA. • Alitretinoin. • CsA. • Azathioprine. • Mtx. • Systemic CS. • MPA. • Tacrolimus. 	Almost clear at 16 weeks.	None
6.	Halling <i>et al.</i> , ^[46] /2020	Case Report	67-year-old male	Vesicular hand eczema ≥2.5 years	No	<ul style="list-style-type: none"> • Potent TCS. • Coal tar. • Condy compresses. • NB-UVB. • Mtx. • Azathioprine. • CsA. • Systemic CS. 	Improved in 2 weeks and cleared by 4 weeks.	None
7.	Zirwas <i>et al.</i> , ^[47] /2018	Case series of 3 patients	2 females (65, 72 years) 1 male (48 years)	Hand eczema without atopic dermatitis	No	<ul style="list-style-type: none"> • Potent TCS and tacrolimus. • Systemic CS. • Thalidomide. • Mtx. • MMF. • CsA. • Apremilast. • Ustekinumab. 	Clearance observed by 6 weeks in 2 patients. In another patient, 80% improvement seen by 3 months.	None
8.	Gall <i>et al.</i> , ^[48] /2021	Case series of 2 patients	2 males of age 38 years.	DE for >5 years	No	<ul style="list-style-type: none"> • TCS. • Phototherapy. • Systemic CS. • Acitretin. • Apremilast. 	Improved by 1–6 weeks.	None
9.	Weston <i>et al.</i> , ^[49] /2018	Case series of 2 patients.	2 males of 37 years and 63 years.	<ul style="list-style-type: none"> • DE ≥11 years in one patient. • In the other details were not available. 	Yes	<ul style="list-style-type: none"> • Highly potent TCS. • Emollients. • NB-UVB. • PUVB. • Excimer lasers. • Systemic CS. • Apremilast. • Mtx. • Efalizumab. • Etanercept. • Adalimumab. • Ixekizumab. 	<ul style="list-style-type: none"> • Improved by 8 weeks. • Completely free of disease by 4 months. 	None

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Supplementary Table 2: (Continued).

S. No.	Author/Year	Study type	Patient details	Hand eczema type/duration	History of Atopy	Prior treatment	Response to dupilumab	Adverse effects
10.	Loman <i>et al.</i> , [50]/2021	Case series of 3 patients.	3 males of age ranging from 47–65 years.	Hyperkeratotic hand eczema	No	<ul style="list-style-type: none"> • Ultrapotent TCS. • Mtx. • Alitretinoin. • Acitretin. • CsA. • Azathioprine. 	<ul style="list-style-type: none"> • In 2 patients lesions cleared by 16 weeks. • In one patient minimal improvement at week 16. 	None
11.	Waldman <i>et al.</i> , ^[51] /2020	Case series of 15 patients	10 males and 5 females with mean age of 50 years. Range: 32–76 years.	DE.	No	<ul style="list-style-type: none"> • TCS. • Immunosuppressives. • Phototherapy. • Biologic drugs used in psoriasis. 	<ul style="list-style-type: none"> • In 40% of patients complete clearance. • Partial response in others. 	<ul style="list-style-type: none"> • Facial redness in 2 patients. • Ocular surface disease in 1 patient.
12.	Oosterhaven <i>et al.</i> , ^[52] /2019	Prospective observational study in 47 patients.	32 males/15 females Age range: 20–69 years.	<ul style="list-style-type: none"> • 35 patients had chronic fissured hand eczema and 12 patients had recurrent vesicular hand dermatitis. 	Yes	<ul style="list-style-type: none"> • Prednisolone. • CsA. • Mtx. • Azathioprine. • Alitretinoin • MMF. • MPA. • Tacrolimus. 	<ul style="list-style-type: none"> • At 16 weeks: HESCI 50: In 87% of patients; HECSI 75: In 60% of patients; and HECSI 90: In 32% of patients. 	None
13.	Voorberg <i>et al.</i> , ^[53] /2022	Prospective observational study on 72 patients.	48 males and 24 females. Mean age 45.2±13.0 years.	50 patients had chronic fissured hand eczema and 22 had recurrent vesicular hand disease.	Yes	<ul style="list-style-type: none"> • Prednisolone. • CsA. • Mtx. • Azathioprine. • Alitretinoin. • MPA. • MMF. • Tacrolimus. 	<ul style="list-style-type: none"> • At 52 weeks: HECSI 75: In 87.1% of patients and HECSI 90: In 62.9% of patients. 	Conjunctivitis, multiple filiform warts and blood eosinophilia.
14.	Lee <i>et al.</i> , ^[54] /2019	Retrospective review of 38 patients.	15 males and 23 females. Mean age: 42.2±18.4 years.	Presentations observed were DE and contact dermatitis	Yes	<ul style="list-style-type: none"> • Prednisolone. • CsA. • MMF. 	<ul style="list-style-type: none"> • At 4 months: Pruritus improved in 96.7% patients. • Pain improved in all patients. • Fissuring improved in 28.9% patients. 	None

TCS: Topical corticosteroid, CS: Corticosteroids, DE: Dyshidrotic eczema, Mtx: Methotrexate, CsA: Cyclosporine, MPA: Mycophenolic acid, MMF: Mycophenolate mofetil, NV-UVB: Narrow-band ultraviolet-B, HECSI: Hand eczema severity index

Supplementary Table 3: Summary of reports describing dupilumab's ability to remit and precipitate alopecia areata.

S. No.	Authors/Year	Type of study	Patient Details	Presence of coexistent atopic dermatitis	Previous treatments	Dupilumab therapy	Remarks
1.	Alotaibi <i>et al.</i> , ^[79] /2022	Case report	21-year-old female with AU	Yes	<ul style="list-style-type: none"> • UVB phototherapy. • Tofacitinib. 	300 mg SC given every 2 weeks (q2w)	<ul style="list-style-type: none"> • By 2 months hair regrowth was seen on the scalp, eyebrows and eye lashes. • Only one bald patch remained at 4 months.
2.	Kulkarni <i>et al.</i> , ^[73] /2022	Case report	16-year-old male with AT	Yes	NA	600 mg SC loading dose, followed by 300 mg q2w (label dosing)	Within 8 months of starting dupilumab, patient had almost complete hair regrowth.
3.	Szekely <i>et al.</i> , ^[80] /2021	Case report	30-year-old male with AT	Yes	<ul style="list-style-type: none"> • TCS/Systemic CS. • Phototherapy. • Mtx. • CsA. 	Label dosing	Complete re-growth of hair within 3 months.
4.	Babino <i>et al.</i> , ^[81] /2020	Case report	68-year-old female with AT	No	<ul style="list-style-type: none"> • TCS/Systemic CS. • Photodynamic therapy. • Squaric acid dibutyl ester. • CsA. 	Label dosing	Complete regrowth of hair within 3 months.
5.	Flanagan <i>et al.</i> , ^[82] /2022	Case report	28-year-old female with AT	Yes	<ul style="list-style-type: none"> • TCS. • Phototherapy. 	Label dosing	Nearly complete regrowth of hair at 2-3 months.
6.	Cho <i>et al.</i> , ^[83] /2021	Case series of 6 patients	3 males and 3 females with AA. Age range: 7-12 years.	Yes	<ul style="list-style-type: none"> • TCS/Systemic CS. • Topical/oral minoxidil. • Topical tacrolimus. 	Label dosing	<ul style="list-style-type: none"> • 4 patients had complete regrowth. • 1 patient had 73% improvement in the severity of alopecia tool score. • 1 patient did not have any hair growth despite being on dupilumab for 16 months.
7.	Fukuyama <i>et al.</i> , ^[75] /2023	Case series of 4 patients	<ul style="list-style-type: none"> • 4 females • Age range (40-54 years) • 3 had patchy alopecic lesions. • Fourth patient had no alopecia. 	Yes	<ul style="list-style-type: none"> • Intralesional CS (with minimal response). 	Label dosing	<ul style="list-style-type: none"> • The 3 patients with alopecia demonstrated full hair growth within 3 months of dupilumab therapy. • In patient 4, within 8 months of dupilumab therapy, acute and diffuse hair loss was seen that progressed to total hair loss.

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Supplementary Table 3: (Continued).

S. No.	Authors/Year	Type of study	Patient Details	Presence of coexistent atopic dermatitis	Previous treatments	Dupilumab therapy	Remarks
8.	Ludriksone <i>et al.</i> , ^[84] /2019	Case series of 2 patients	2 males of ages 38 and 32 years, with AA.	Yes	<ul style="list-style-type: none"> • Phototherapy. • Azathioprine. • CsA. 	Label Dosing	<ul style="list-style-type: none"> • Complete hair regrowth at week 21 and 22.
9.	Harada <i>et al.</i> , ^[85] /2020	Case series of 7 patients	5 males and 2 females. Age range: 33-52 years.	Yes	<ul style="list-style-type: none"> • TCS/Systemic CS. • Diphenylcyclopropenone. • Squaric acid dibutylester. • Phototherapy. 	Label dosing	<ul style="list-style-type: none"> • Complete regrowth in 2 patients. • Partial response in 4 patients. • No response in 1 patient.
10.	Ständer <i>et al.</i> , ^[78] /2020	Case report	53-year of male with recurrent AD.	-	-	Label dosing	<ul style="list-style-type: none"> • After 1 year of treatment with dupilumab AA developed.
11.	Kanda <i>et al.</i> , ^[86] /2019	Case report	35-year-old male with AD	-	-	Label dosing	<ul style="list-style-type: none"> • Development of AA following 6 weeks of dupilumab therapy involving 23% of whole scalp. • Methylprednisolone pulse was simultaneously instituted with 78% reduction of AA after 4 months.
12.	Flanagan <i>et al.</i> , ^[76] /2019	Case report	27-year-old male with AD	-	-	Label dosing	<ul style="list-style-type: none"> • Ill-defined areas of non-scarring alopecia was seen over the scalp after 18 weeks of dupilumab therapy. • This was reversed 8 weeks after discontinuation of dupilumab.
13.	Gallo <i>et al.</i> , ^[87] /2020	Case report	24-year-old male with AD	-	-	Label dosing	<ul style="list-style-type: none"> • After 8 weeks of starting dupilumab, abrupt shedding of scalp hair was noted with a SALT score of 71.6. • Following 3 months of dupilumab discontinuation, hair regrowth was complete.

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Supplementary Table 3: (Continued).

S. No.	Authors/Year	Type of study	Patient Details	Presence of coexistent atopic dermatitis	Previous treatments	Dupilumab therapy	Remarks
14.	Mitchell and Levit ^[88] /2018	Case report	29-year-old male with AD	-	-	Label dosing	<ul style="list-style-type: none"> • Development of AA on the posterior scalp 5 weeks after starting dupilumab. • Dupilumab was not discontinued. • Intralesional triamcinolone acetonide (5mg/ml) was administered every 4 weekly with gradual improvement of AA.
15.	Barroso-García <i>et al.</i> , ^[89] /2018	Case report	31-year-old male with severe AD	-	-	Label dosing	<ul style="list-style-type: none"> • Patches of hair loss involving the anterior scalp 6 weeks after initiation of dupilumab therapy was seen. • Dupilumab was continued along with intralesional triamcinolone acetonide on the alopecic patches. • Results of amelioration of AA with intralesional steroids was not reported.
16.	Guttman-Yassky <i>et al.</i> , ^[90] /2022	Randomized placebo-controlled trial	<ul style="list-style-type: none"> • Dupilumab group (40 patients) • Placebo group (20 patients). 	In 42.5% of the study subjects.	-	Label dosing	<ul style="list-style-type: none"> • 30% improvement in SALT score at week 48 in 32.5% vs. 20%. ($P=0.067$). • 50% improvement in SALT score at week 48 in 22.5% vs. 15%. ($P=0.02$).

AU: Alopecia universalis, AT: Alopecia totalis, AD: Atopic dermatitis, UVB: Ultraviolet-B, NA: Not available, CsA: Cyclosporine, TCS: Topical corticosteroid, CS: Corticosteroids, SALT: Severity of alopecia tool

Supplementary Table 4: Reports outlining the utility of dupilumab in chronic urticaria.

S. No.	Authors/Year	Type of study	Study details	Remarks
1.	Ferrucci <i>et al.</i> , ^[93] /2020	Case report.	<ul style="list-style-type: none"> • 28-year-old man with chronic cold urticaria who also had AD from infancy. • Prior failed treatments included prednisolone, cyclosporine and omalizumab. • Dupilumab (label dosing) started. 	<ul style="list-style-type: none"> • Within 1 month of therapy • EASI score reduced by 85%. • DLQI plummeted to 0 from 12. • Ice cube test became negative. • Besides, prolonged exposure to low temperatures did not cause any problems.
2.	Sun <i>et al.</i> , ^[94] /2022	Case report.	<ul style="list-style-type: none"> • 44-year-old male with chronic urticaria and angioedema unresponsive to anti-histamines, cyclosporine omalizumab and phototherapy. • Dupilumab (label dosing) started. 	<ul style="list-style-type: none"> • After the first dose of dupilumab the UAS7 score reduced to 0 from 42. • On subsequent laboratory investigation IgE levels normalised. • His condition remained stable for the next 24 months while on dupilumab maintenance therapy.
3.	Goodman and Jariwala ^[95] /2021	Case report.	<ul style="list-style-type: none"> • 18-year-old man with adrenergic urticaria with associated postural orthostatic tachycardia syndrome. • Lesions were triggered by heat, stress and exercise. • Lesions were refractory to antihistamines, leukotriene antagonists, dapsone and omalizumab. • Dupilumab (300 mg) monthly injections were started, along with propranolol 20mg twice daily and an antihistaminic. 	<ul style="list-style-type: none"> • Patient had good control of symptoms initially. • However, during summer, lesions exacerbated, that was controlled with dupilumab and escalated dosing propranolol (60 mg twice daily).
4.	Zhu <i>et al.</i> , ^[96] /2023	Case report.	<ul style="list-style-type: none"> • A 31-year-old male with 3-year history of CSU with no angioedema or systemic symptoms. • Patient was unresponsive to antihistaminics and omalizumab. • Dupilumab 600mg (first dose) followed by 300mg at weeks 3, 6, 10, 16 and 24 was given. 	<ul style="list-style-type: none"> • Within 2 weeks of dupilumab therapy, his wheals and pruritus significantly improved and after 4 months lesions had completely disappeared. • Owing to eosinophilia following dupilumab, it was stopped and prednisolone 60 mg/day with gradual taper began. • Even 16 weeks after stopping dupilumab, remission was maintained.
5.	Sirifo <i>et al.</i> , ^[97] /2022	Case report.	<ul style="list-style-type: none"> • A 26-year-old male with cholinergic urticaria for 3 years and no history of atopy. • Lesions unresponsive to antihistamines, prednisolone, leukotriene antagonists and omalizumab. • Dupilumab (label dosing) initiated along with rupatadine 10 mg (Q6H) that was tapered and discontinued after 2 months of treatment. 	<ul style="list-style-type: none"> • After 2 doses of dupilumab, patient ceased to have episodes of cholinergic urticaria and there was marked improvement in patient's quality of life.
6.	Puxkandl <i>et al.</i> , ^[98] /2023	Case report.	<ul style="list-style-type: none"> • 68-year-old woman with CSU and angioedema unresponsive to antihistamines, prednisolone and omalizumab. • Dupilumab (label dosing) along with antihistamines. 	<ul style="list-style-type: none"> • After the third injection of dupilumab, patient was symptom free.

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Supplementary Table 4: (Continued).

S. No.	Authors/Year	Type of study	Study details	Remarks
7.	Lee and Simpson ^[101] /2019	Case series of 6 patients.	<ul style="list-style-type: none"> • 3 males and 3 females (average age of 36 years) refractory to antihistamines and omalizumab (300–600 mg monthly). • Dupilumab (label dosing) started. 	<ul style="list-style-type: none"> • Of the 6 patients: • 5 responded to dupilumab monotherapy within 3 months. • One responded with combination of dupilumab and omalizumab. • Of the responders, in 4 the UAS7 remained 0 at 14–22 months of follow up since treatment discontinuation.
8.	Marchal and Reguiat ^[102] /2023	Case report.	<ul style="list-style-type: none"> • A 38-year-old woman with refractory cold urticaria evolving since 12 years and lack of therapeutic response with antihistamines and omalizumab (with even 300 mg fortnightly dosage.) • Dupilumab (label dosing) given for uncontrolled symptoms. 	<ul style="list-style-type: none"> • Rapid complete disappearance of her symptoms following dupilumab treatment without any flare up during cold exposure. • Even after 18 months with dupilumab maintenance, patient was in complete remission. • No side effects were encountered.

EASI: Eczema area severity index, AD: Atopic dermatitis, DLQI: Dermatology life quality index, IgE: Immunoglobulin E, CSU: Chronic spontaneous urticarial, UAS7: Urticaria activity score over 7 days