**Characterizing Chronic Pruritus and Disease Burden in the Georgia Patient Population: An Initiative to Standardize Data Collection in the Clinical Setting**

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**Background**: Chronic pruritus—itch lasting longer than six weeks—affects approximately one in four individuals over their lifetime and carries a burden comparable to chronic pain, with profound effects on sleep, concentration, and mental health. It is increasingly recognized as a disease entity encompassing symptom burden, itch characteristics, and impacts on quality of life (QoL). While European multicenter initiatives have characterized itch severity and QoL burden, comparable studies within the United States remain sparse. As targeted therapies for pruritic conditions are being approved at an unprecedented pace, population-specific data are increasingly important to inform tailored management approaches. Georgia offers a compelling setting for this study because of its diverse demographic composition and high presence of pruritic conditions. Approximately one-third of Georgia residents are Black/African American, a population disproportionately impacted by chronic pruritus in both prevalence and burden. Despite the substantial prevalence of pruritus in Georgia, itch characteristics and burden are not captured in a standardized manner during routine clinical care.

**Objectives:** To implement a standardized system for electronic health record-based data collection from patients presenting to Grady Dermatology Clinic with pruritus and expand data collection to include more comprehensive, validated measures of itch severity and QoL impact.

**Study Design:** This prospective survey study will evaluate chronic pruritus among patients receiving routine care at the Grady Dermatology Clinic. Patients will be screened for pruritus lasting at least six weeks and complete an itch screening, designed to integrate with the clinic visit, containing questions pertaining to itch characteristics, severity, and QoL burden. It will use prompts developed by the study team and validated measures, including the worst-itch numeric rating scale (NRS), average itch NRS, and the Standard Dermatology Outcome Measures. Eligible patients who complete the screening will be invited to enroll and complete additional questionnaires addressing demographics, medical and dermatologic history, medication use, the 5-D Itch Scale, and ItchyQoL. Participants will repeat assessments at a 3-6 month follow-up visit after standard-of-care treatment. Over 12 months, we aim to screen 200 patients and enroll 100.

**Results Analysis:** Data from the itch screening will be analyzed using descriptive and correlational statistics to assess relationships among demographics, diagnoses, and itch characteristics. Data from the enrolled study will be evaluated using multivariable linear regression to examine associations between demographic and socioeconomic factors and itch severity, QoL, and treatment-related changes. Changes will be summarized using means, standard deviations, and paired t-tests when appropriate. As a pilot study, analyses may be

underpowered; however, findings will generate preliminary data and identify trends to inform future adequately powered studies.

**Future Directions:** Preliminary findings will establish a baseline of the burden of chronic pruritus and its impact on the quality of life among adults in the Atlanta area, informing more personalized approaches to management. Successful implementation of an itch screening tool in routine dermatologic care may facilitate broader integration across the city and nationally. Future efforts aim to expand this initiative to include pediatric populations, further characterizing the burden of chronic pruritus, and identifying opportunities to improve patient-centered care.