

reduced Evenness, which was in turn mainly driven by *S. aureus* relative abundance, rather than to a reduced microbiome Richness. Finding associations between AD severity, the skin microbiome and patient's cofactors is a key aspect in developing new personalized AD treatments, particularly those targeting the AD microbiome.

11 | Skin microbiome and its association with host cofactors in determining atopic dermatitis severity

L. Rauer^{1,2,3,4}, M. Reiger^{1,2,3}, M. Bhattacharyya^{1,2}, P. M. Brunner^{5,6}, J. G. Krueger⁵, E. Guttman-Yassky^{5,7}, C. Traidl-Hoffmann^{1,2,3,8,9}, A. U. Neumann^{1,3,8}

¹Department of Environmental Medicine, Faculty of Medicine, University of Augsburg, Augsburg, Germany

²Chair of Environmental Medicine, Technical University Munich, Munich, Germany

³Institute of Environmental Medicine, Helmholtz Zentrum Munich, Augsburg, Germany

⁴Institute for Medical Information Processing, Biometry and Epidemiology (IBE), LMU Munich, Munich, Germany

⁵Laboratory for Investigative Dermatology, The Rockefeller University, New York, USA

⁶Department of Dermatology, Medical University of Vienna, Vienna, Austria

⁷Department of Dermatology, Icahn School of Medicine at Mount Sinai, New York, USA

⁸CK-CARE Center for Allergy Research and Education, Davos, Switzerland

⁹ZIEL - Institute for Food & Health, Technical University of Munich, Freising-Weihenstephan, Germany

Atopic dermatitis (AD) is a heterogeneous, chronic inflammatory skin disease linked to skin microbiome dysbiosis with reduced bacterial diversity and elevated relative abundance of *Staphylococcus aureus* (*S.aureus*). We aimed to characterize the yet-incompletely understood association between the skin microbiome and patients' demographic and clinical cofactors in relation to AD severity. The skin microbiome in 48 adult moderate-to-severe AD patients was investigated using next-generation deep sequencing (16S rRNA V1-V3) followed by denoising to obtain amplicon sequence variant (ASV) composition. AD severity was associated with *S.aureus* relative abundance ($rS = 0.53$, $p < 0.001$) and slightly better with the microbiome diversity measure Evenness ($rS = -0.58$, $p < 0.001$) in lesion. Multiple regression confirmed the association of AD severity with microbiome diversity, including Shannon (lesion, $p < 0.001$), Evenness (non-lesion, $p = 0.015$), or *S. aureus* relative abundance (<0.012), and with patient's IgE levels ($p < 0.001$), race ($p < 0.032$), age ($p < 0.034$) and sex ($p = 0.012$). Our results specify the frequently reported "reduced diversity" of the AD-related skin microbiome to