

To: 25th Expert Committee on Selection and Use of Essential Medicines
World Health Organization
emlsecretariat@who.int

Mexico City, 17 April 2025

Subject: Letter of Support for Application A-30: Inclusion of Urea- and Glycerol-Based Topical Moisturizers for Atopic Dermatitis on the WHO Essential Medicines List

Dear Members of the Expert Committee,

My name is Dr. Martha Alejandra Morales Sánchez. I am a board-certified dermatologist at the Centro Dermatológico Pascua of IMSS-Bienestar in Mexico City and a National Researcher in Dermatology within Mexico's National System of Researchers (SNI). At Centro Dermatológico Pascua, atopic dermatitis represents the second most prevalent dermatosis we address, highlighting its substantial clinical burden and the pressing need for accessible, cost-effective skin-barrier therapies.

I am writing to express my unequivocal support for Application A-30, which advocates for the inclusion of topical moisturizers containing 5% urea and 15–20% glycerol in the WHO Model List of Essential Medicines (EML) for the treatment of atopic dermatitis. International guidelines consistently recognize emollient therapy as the primary management strategy for this condition, as it is essential for restoring the compromised epidermal barrier and reducing dependence on anti-inflammatory medications.

Substantial evidence, including randomized controlled trials and high-quality systematic reviews, indicates that formulations containing 5% urea or 15–20% glycerol significantly enhance skin hydration, reduce transepidermal water loss, and decrease the frequency of flare-ups. These formulations are well tolerated by patients, thereby improving adherence and clinical outcomes. Furthermore, they are cost-effective to produce, remain stable under standard storage conditions for a minimum of two years, and offer a highly economical intervention compared to the

direct and indirect healthcare costs associated with inadequately managed disease exacerbations.

In my clinical practice, I have observed families compelled to sacrifice basic necessities to afford daily emollient therapy. The inclusion of these moisturizers in the Essential Medicines List (EML) will enable preferential pricing, encourage local manufacturing and importation under favorable conditions, and underscore that essential skin care is not merely a cosmetic luxury, but a fundamental component of universal health coverage.

I respectfully urge the Committee to approve Application A-30 and incorporate topical moisturizers containing 5% urea and 15–20% glycerol into the 2025 Model List of Essential Medicines. This initiative will promote therapeutic equity and substantially enhance the quality of life for millions of individuals affected by atopic dermatitis globally.

Thank you for your consideration.

Yours faithfully,

Dr. Martha Alejandra Morales Sánchez

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