**WHAT IS CLAIMED IS:**

1. A method of selectively treating atopic dermatitis in a subject having one or more skin excoriations, the method comprising administering an effective amount of nemolizumab or an equivalent thereof to the subject.

2. The method of claim 1, wherein the skin excoriations are moderate to severe.

3. The method of claim 1 or 2, wherein the skin excoriations have been assigned a score of at least 2 on the SCORAD scale.

4. The method of any one of the previous claims, wherein the effective amount of nemolizumab or the equivalent thereof is about 0.01 mg/kg to about 0.1 mg/kg, about 0.1 mg/kg to about 0.5 mg/kg, about 0.5 mg/kg to about 1.5 mg/kg, about 1.5 mg/kg to about 2.5 mg/kg, or about 2.5 mg/kg to about 10 mg/kg.

5. The method of any one of the previous claims, wherein the nemolizumab or the equivalent thereof is administered by a topical or parenteral route.

6. The method of any one of the previous claims, wherein the nemolizumab or the equivalent thereof is administered subcutaneously.

7. The method of any one of the previous claims, wherein the nemolizumab or the equivalent thereof is administered once per week, once every two weeks, once every three weeks, once every four weeks, once every five weeks, once every six weeks, once every seven weeks, or once every eight weeks.

8. A pharmaceutical composition for use in the treatment of atopic dermatitis in a subject determined to have one or more skin excoriations, the composition comprising nemolizumab or an equivalent thereof.

9. The pharmaceutical composition of claim 8, wherein the skin excoriations are moderate to severe.

10. The pharmaceutical composition of claim 8 or 9, wherein the skin excoriations have been assigned a score of at least 2 on the SCORAD scale.

11. The pharmaceutical composition of any one of claims 8-10, further comprising a carrier.

12. The pharmaceutical composition of claim 8, wherein the carrier is a pharmaceutically acceptable carrier.

13. Use of nemolizumab or an equivalent thereof in the manufacture of a medicament for the treatment of atopic dermatitis in a subject having one or more skin excoriations.

14. The use of claim 13, wherein the skin excoriations are moderate to severe.

15. The use of claim 13 or 14, wherein the skin excoriations have been assigned a score of at least 2 on the SCORAD scale.

16. A method of identifying a subject having atopic dermatitis that is likely to respond to treatment with nemolizumab or an equivalent thereof, the method comprising detecting one or more excoriations of the subject's skin.

17. The method of claim 16, further comprising scoring the excoriations as mild, moderate, or severe.

18. The method of claim 16, further comprising scoring the excoriations as 1, 2, or 3 according to the SCORAD scale.

19. The method of claim 17, further comprising identifying the subject as likely to respond to treatment with nemolizumab or an equivalent thereof if one or more excoriations are detected that are moderate to severe.

20. The method of claim 18, further comprising identifying the subject as likely to respond to treatment with nemolizumab or an equivalent thereof if one or more excoriations are scored as a 2 or a 3 according to the SCORAD scale.

21. The method of claim 19, further comprising administering an effective amount of nemolizumab or an equivalent thereof to the subject identified as likely to respond to treatment with nemolizumab or an equivalent thereof.

22. The method of claim 21, wherein the effective amount of nemolizumab or the equivalent thereof is about 0.01 mg/kg to about 0.1 mg/kg, about 0.1 mg/kg to about 0.5 mg/kg, about 0.5 mg/kg to about 1.5 mg/kg, about 1.5 mg/kg to about 2.5 mg/kg, or about 2.5 mg/kg to about 10 mg/kg.

23. The method of claim 21 or 22, wherein the nemolizumab or the equivalent thereof is administered by a topical or parenteral route.

24. The method of any one of claims 21-23, wherein the nemolizumab or the equivalent thereof is administered subcutaneously.

25. The method of any one of claims 21-24, wherein the nemolizumab or the equivalent thereof is administered once per week, once every two weeks, once every three weeks, once every four weeks, once every five weeks, once every six weeks, once every seven weeks, or once every eight weeks.

26. A method for treating a patient having atopic dermatitis, the method comprising:

(a) screening the patient having atopic dermatitis for one or more skin excoriations; and

(b) treating the patient screened in step (a) by administering an effective amount of nemolizumab or an equivalent thereof.

27. The method of claim 26, wherein the skin excoriations are moderate to severe.

28. The method of claim 26, wherein the skin excoriations have been assigned a score of at least 2 on the SCORAD scale.

29. The method of any one of claims26-28, wherein the effective amount of nemolizumab or the equivalent thereof is about 0.01 mg/kg to about 0.1 mg/kg, about 0.1 mg/kg to about 0.5 mg/kg, about 0.5 mg/kg to about 1.5 mg/kg, about 1.5 mg/kg to about 2.5 mg/kg, or about 2.5 mg/kg to about 10 mg/kg.

30. The method of any one of claims 26-29, wherein the effective amount of nemolizumab or the equivalent thereof is administered by a topical or parenteral route.

31. The method of any one of claims 26-30, wherein the effective amount of nemolizumab or the equivalent thereof is administered subcutaneously.

32. The method of any one of claims 26-31, wherein the effective amount of nemolizumab or the equivalent thereof is administered once per week, once every two weeks, once every three weeks, once every four weeks, once every five weeks, once every six weeks, once every seven weeks, or once every eight weeks.

33. A method of improving sleep quality in a subject suffering from atopic dermatitis and having one or more skin excoriations, the method comprising administering an effective amount of nemolizumab or an equivalent thereof to the subject.

34. The method of claim 33, wherein the skin excoriations are moderate to severe.

35. The method of claim 33, wherein the skin excoriations have been assigned a score of at least 2 on the SCORAD scale.

36. The method of any one of claims 33 or 35, wherein the effective amount of nemolizumab or the equivalent thereof is about 0.01 mg/kg to about 0.1 mg/kg, about 0.1 mg/kg to about 0.5 mg/kg, about 0.5 mg/kg to about 1.5 mg/kg, about 1.5 mg/kg to about 2.5 mg/kg, or about 2.5 mg/kg to about 10 mg/kg.

37. The method of any one of claims 33-36, wherein the nemolizumab or the equivalent thereof is administered by a topical or parenteral route.

38. The method of any one of claims 33-37, wherein the nemolizumab or the equivalent thereof is administered subcutaneously.

39. The method of any one of claims 33-38, wherein the nemolizumab or the equivalent thereof is administered once per week, once every two weeks, once every three weeks, once every four weeks, once every five weeks, once every six weeks, once every seven weeks, or once every eight weeks.

40. The method of any one of claims 33-39, wherein an improvement of sleep quality is determined by detecting an improvement in one or more of: time of sleep onset latency, total sleep time, sleep efficiency, or time of waking after sleep onset.

**CLAIMS**

1. Use of nemolizumab in the preparation of a medicament for the treatment of atopic dermatitis in a subject having one or more moderate to severe skin excoriations.

2. Use according to Claim 1, in which the skin excoriations are moderate.

3. Use according to Claim 1, in which the skin excoriations are severe.

4. Use according to Claim 1, 2 or 3, in which the skin excoriations have been assigned a score of at least 2 on the SCORAD scale.

5. Use according to any preceding claim, in which the medicament comprises 0.01 mg/kg to 10 mg/kg of nemolizumab.

6. Use according to any preceding claim, in which the medicament is formulated for topical or parenteral administration.

7. Use according to any preceding claim, in which the medicament is formulated for subcutaneous administration.

8. Use according to any preceding claim, in which the medicament is to be administered once per week, once every two weeks, once every three weeks, once every four weeks, once every five weeks, once every six weeks, once every seven weeks, or once every eight weeks.

9. Use of nemolizumab in the preparation of a medicament for improving sleep quality in a subject suffering from atopic dermatitis and having one or more moderate to severe skin excoriations.

10. Use according to Claim 9, in which the skin excoriations are moderate.

11. Use according to Claim 9, in which the skin excoriations are severe.

12. Use according to Claim 9, 10 or 11, in which the skin excoriations have been assigned a score of at least 2 on the SCORAD scale.

13. Use according to any of Claims 9 to 12, in which the medicament comprises 0.01 mg/kg to 10 mg/kg of nemolizumab.

14. Use according to any of Claims 9 to 13, in which the medicament is formulated for topical or parenteral administration.

15. Use according to any of Claims 9 to 14, in which the medicament is formulated for subcutaneous administration.

16. Use according to any of Claims 9 to 15, in which the medicament is to be administered once per week, once every two weeks, once every three weeks, once every four weeks, once every five weeks, once every six weeks, once every seven weeks, or once every eight weeks.

17. Use according to any of Claims 9 to 16, in which an improvement of sleep quality is determined by detecting an improvement in one or more of: time of sleep onset latency, total sleep time, sleep efficiency, or time of waking after sleep onset.