

## Supplemental materials

Supplementary Table S1. Summary of indoor and outdoor environments\*

		Total
Indoor	Temperature (°C)	25.5 ± 2.6
	RH (%)	47.2 ± 12.5
	Formaldehyde (ppb)	13.6 ± 20.1
Outdoor	Temperature (°C)	14.0 ± 9.5
	RH (%)	67.9 ± 15.8
	PM <sub>2.5</sub> (µg/m <sup>3</sup> )	20.0 ± 11.8

\*Data are expressed as mean ± standard deviation; PM<sub>2.5</sub>, particulate matter with an aerodiameter less than 2.5 µm; RH, relative humidity

Supplementary Table S2. Percent changes of atopic dermatitis symptoms caused by PM<sub>2.5</sub> exposure

Classification	Subgroup	% change (95% confidence interval) †
<b>All</b>		0.86 (-2.14, 3.96)
<b>Season</b>	Spring	16.52 (6.48, 27.51)*
	Summer	-3.70 (-13.34, 7.02)
	Fall	-7.13 (-14.25, 0.58)
	Winter	12.60 (4.32, 21.53)*
<b>Indoor RH</b>	<40%	1.65 (-3.86, 7.47)
	40-60%	-0.18 (-4.49, 4.32)
	≥60%	6.99 (-5.2, 20.76)
<b>Indoor temperature</b>	<25.5°C	6.70 (2.33, 11.25)*
	≥25.5°C	-0.22 (-5.57, 5.44)
<b>Air purifier</b>	(-)	14.94 (3.46, 27.70)*
	(+)	-0.20 (-3.34, 3.03)

†% change in AD symptoms per 10 µg/m<sup>3</sup> of PM<sub>2.5</sub> exposure; \*statistically significant with 95% confidence interval; RH, relative humidity.

Supplementary Table S3. Percent changes of atopic dermatitis symptoms caused by PM<sub>2.5</sub> exposure

Classification	Subgroup	% change (95% confidence interval) †
<b>All</b>		0.86 (-2.14, 3.96)
<b>Sex</b>	Boys	4.91 (1.36, 8.59)*
	Girls	-12.36 (-18.05, -6.28)*
<b>Age</b>	<6 yrs	-2.71 (-6.08, 0.78)
	≥6 yrs	11.96 (5.28, 19.05)*
<b>Family history of allergic diseases</b>	(-)	-2.16 (-6.68, 2.57)
	(+)	3.58 (-0.48, 7.82)
<b>Inhalant allergen sensitization</b>	(-)	-7.23 (-11.70, -2.54)
	(+)	6.96 (1.88, 12.31)*
<b>SCORAD at enrollment</b>	<30.7 (median)	1.73 (-2.33, 5.96)
	30.7-40.9	-0.80 (-7.30, 6.16)
	≥40.9 (Q3)	4.16 (-2.45, 11.23)
<b>Inhalant allergen sensitization(+) PLUS SCORAD</b>	<30.7 (median)	4.37 (-1.63, 10.74)
	≥30.7 (median)	15.68 (4.50, 28.06)*
<b>Air purifier</b>	(-)	14.94 (3.46, 27.70)*
	(+)	-0.20 (-3.34, 3.03)

†% change in AD symptoms per 10 µg/m<sup>3</sup> of PM<sub>2.5</sub> exposure; \*statistically significant with 95% confidence interval; SCORAD, SCORing Atopic Dermatitis.

Supplementary Table S4. Indoor and outdoor PM<sub>2.5</sub> levels by season during study period

	<b>Indoor*</b>	<b>Outdoor*</b>	<b>Correlation coefficient</b>	<b><i>P</i> value *</b>
<b>Spring</b>	28.0 ± 24.8	21.9 ± 10.4	0.22	-
<b>Summer</b>	20.8 ± 15.0	17.1 ± 9.1	0.47	<.0001
<b>Fall</b>	22.9 ± 19.3	10.0 ± 16.0	0.42	<.0001
<b>Winter</b>	47.1 ± 29.6	27.8 ± 14.6	0.32	<.0001

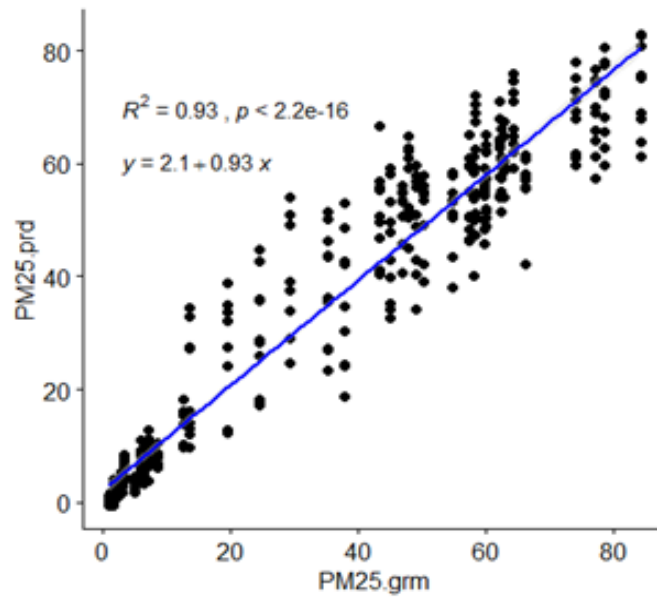
\* Mean ± SD

Supplementary Table S5. Characteristics of AD patients and indoor environments by age group

	< 6 yrs (47 patients)	≥ 6 yrs (17 patients)	P-value
SCORAD at enrollment	33.6 ± 14.1	34.3 ± 12.8	0.6147
Inhalant allergen sensitization	41.9%	71.4%	0.2952
BMI	16.7 ± 2.0	18.3 ± 3.2	0.0651
PM <sub>2.5</sub> (µg/m <sup>3</sup> )	28.6 ± 24.4	29.1 ± 23.9	0.4362
Indoor temperature (°C)	25.5 ± 2.7	25.3 ± 2.3	< .0001
Indoor RH (%)	47.3 ± 1.9	46.9 ± 14.0	0.2148

SCORAD, SCORing Atopic Dermatitis; BMI, body mass index

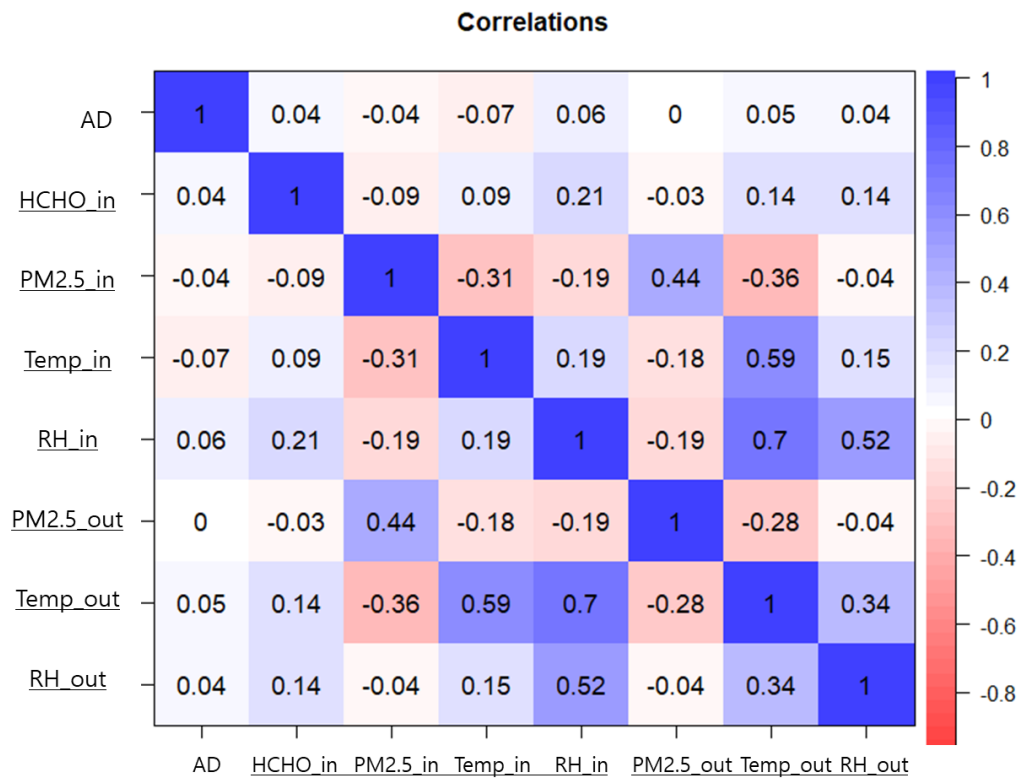
Supplementary Fig. S1. Comparison of the PM<sub>2.5</sub> concentrations measured by SSP100 with those by Grimm PAS (PM<sub>2.5</sub>.prd indicates calibrated SSP100-PM<sub>2.5</sub> and PM<sub>2.5</sub>.grm Grimm PAS- PM<sub>2.5</sub>)



To assess indoor exposure to PM<sub>2.5</sub>, a laser-based light scattering sensor, SSP100 (SENKO, Osan, Korea), was used. To calibrate the SSP100-PM<sub>2.5</sub>, the assessment of the PM<sub>2.5</sub> sensor was performed in a room chamber with the size of 18 m<sup>3</sup> by comparing with Grimm portable aerosol spectrometer (PAS) 1.108 (Grimm Aerosol Technik GmbH & Co. KG, Ainring, Germany) which is widely used to assess the exposure to PM<sub>2.5</sub>. Ten SSP100-PM<sub>2.5</sub> sensors and a Grimm PAS were placed into the room chamber and a certain amount of aerosol was generated by an aerosol generator, PARTICLE GENERATOR 8026 (TSI, Shoreview, USA). After conducting the test for continuous two days, we collected 10-minute data from the 10 sensors and averaged them to an hour PM<sub>2.5</sub>. The hourly SSP100-PM<sub>2.5</sub> data were matched with the Grimm PAS-PM<sub>2.5</sub> and were stratified into four groups by concentration, 0~10, 10~20, 30~40, and > 40 µg/m<sup>3</sup> of PM<sub>2.5</sub>. The regression parameters between the SSP100-PM<sub>2.5</sub> and

Grimm PAS-PM<sub>2.5</sub> were obtained based on linear regression models for each group. Fig. S1 shows that the measured values by SSP100-PM<sub>2.5</sub> were very consistent with the reading value of Grimm PAS-PM<sub>2.5</sub>. The coefficient of determination ( $R^2$ ) between two measured values was validated higher than 0.93. We then calibrated all the real-time SSP100-PM<sub>2.5</sub> measured at households applying the four parameters for PM<sub>2.5</sub> level.

Supplementary Fig. S2. Correlations between atopic dermatitis (AD) symptoms and environmental variables.



(AD: atopic dermatitis (AD) symptoms; HCHO\_in: indoor formaldehyde; PM2.5\_in: indoor PM<sub>2.5</sub>; Temp\_in: indoor temperature; RH\_in: indoor relative humidity; PM2.5\_out: outdoor PM<sub>2.5</sub>; Temp\_out: outdoor temperature; RH\_out: outdoor relative humidity)