



CALENDAR

HARTFORD PSORIASIS NETWORK MEETINGS, 7 PM

November 13

**First Church of Christ,
12 S. Main St. West Hartford
Hartford Psoriasis Network
860-521-5103**

hartford@support.psoriasis.org

UConn DERMATOLOGY GRAND ROUNDS, 8 AM WEDNESDAYS

November 5

**Dermatology Waiting Room
21 South Rd., 2nd Floor,
Farmington**

UConn DERMATOLOGY JOURNAL CLUB, 12:15 PM

November 19 and 21

**Dermatology Conference Room
21 South Rd., 2nd Floor,
Farmington**

WE UPDATE OUR CALENDAR AND EVENTS ON A REGULAR BASIS. TO SUBMIT AN EVENT OR FOR MORE INFORMATION, FEEL FREE TO CONTACT OUR MAIN LINE AT 860-679-4600.

Letter from our Chairman

*B*lind Luck

I recently read Charles Krauthammer's book *Things That Matter*. Essentially this is a collection of his newspaper columns and short magazine pieces that were published over the past three decades organized into four main topics: personal, political, historical, and global. Krauthammer is a leading thinker, writer, commentator, and physician. No matter what your political views, his writing is superb!

The best part of book for me was the introduction. In these first few pages the author reviews issues that matter to him, how and why he was transformed politically and became a newspaper and ultimately TV commentator as well as his personal life's journey. Krauthammer shares the "twists and turns" of his life and how his career was the result of "blind luck" and "serendipity". Although I cannot in any way compare myself to the brilliance of Krauthammer, we do have this in common!

As a child I shared a room and often a bed with my maternal grandmother. When I was about to turn nine years of age, she died of breast cancer and my decision to become a physician was sealed. Eleven years later, I entered the hospital in which she died as a medical student and have never looked back. My hope was to become an oncologist. In medical school, I fast tracked and in lieu of my fourth year of medical school, was allowed to begin training in pediatrics. After two years of pediatrics, I was about to start a pediatric oncology fellowship at Memorial Sloan Kettering when my husband (a classmate of mine in medical school, reflecting another bit of good luck) suggested I look into other fields. I was lucky enough to be accepted into a dermatology residency after a brief chat with the Chair of Dermatology at Cornell's New York Hospital. What luck! I am in the best specialty and can still pursue my dream of oncology as a dermato-oncologist! I allowed forces around me to shape my future. A series of opportunities turned my career around and I was smart enough to allow these opportunities to mold me.

My mother used to say, "People plan and God laughs." The longer I live the more I realize the wisdom of this statement. I have become skeptical about how much I am in control of my fate vocationally, personally, and ideologically. Fate has played a huge role in my career development, who I married, and who my children married. Career opportunities, the ability to take advantage of those opportunities, and the willingness to take risks has resulted in a great ride that sums up a life. My advice to our residents and students is to take chances and don't fight fate. I was born to be a dermatologist at UConn Health. Who knew?



- Jane Grant-Kels, MD



“DOCTOR, IS THIS CANCER?”

- SPHOORTHI JINNA, MD, PGY2

As dermatologists, we spend a majority of our day looking at “spots” on the skin, sorting out benign from malignant lesions. This has become increasingly important as the incidence of skin cancers is on the rise. Many times, however, you may hear, “this is completely normal.” Patients are often told, “not to worry” because a spot is not cancerous. However this leaves the patient to wonder, “If it’s not cancer, what is it?” Well here are a few of the ‘not cancers’ you may find growing on your skin.

Seborrheic keratoses are extremely common lesions to see on the skin, especially in the middle-aged to elderly population. They can be very worrisome as they frequently appear suddenly, enlarge rapidly, and become very dark. Despite all these features, however, seborrheic keratoses have no cancerous qualities and are only a concern cosmetically. These “wisdom spots” can appear anywhere on the skin, ranging in color from white to tan to brown, and generally have a “wart-like” appearance. Many have likened them to “barnacles on a ship.” Seborrheic keratoses generally don’t cause any symptoms, but can be irritated by clothing or jewelry. They can run in families, but are not contagious. Since they are not a health risk and are generally

asymptomatic, treatment is unnecessary. However, in the event of irritation, they may be removed with cryosurgery using liquid nitrogen or excision via a shave biopsy, both of which may leave a scar.

Dermatofibromas can present as pink, tan, or brown lesions that can look like moles. In reality, they are scar tissue, usually from an insect bite or pimple. In the majority of cases, people don’t remember having injured the area before this spot arises. Like other scars, they can feel firm to the touch and dimple when pinched. These spots are generally more common in females and traditionally found on the legs. They are usually asymptomatic, but can bleed if nicked by trauma (i.e. shaving). If they become troublesome, these lesions can be surgically removed, leaving a linear scar in its place.

Cherry angiomas are another very common non-cancerous growth. These lesions are caused by a proliferation of blood vessels which give it a brightly red or purple appearance. They can occur anywhere on the body, but are usually on the chest, abdomen, or back. They generally don’t cause any symptoms, but can bleed if they are traumatized. If removal is desired for comfort or cosmetic reasons, options include excision, electro-surgery (burning of the blood vessels), or laser surgery.

These lesions are just a few of the many “not

cancer spots” that can occur on the skin. Despite all the normal skin spots you may have, if you notice any spots that are changing in size and/or color or are causing symptoms such as itching or bleeding, please see a physician to have it evaluated. Skin cancers can appear in many different shapes and sizes, even resembling non-cancerous spots, and close attention to changes in your spots can offer the earliest detection!



Seborrheic keratoses



Cherry angioma

Clinical Trials

We have several active clinical trials here in the Department of Dermatology. Presently all are for moderate to severe plaque Psoriasis and are sponsored by pharmaceutical companies. If you have any questions about clinical research here, please contact Cheryl Martin, RN at 860-679-3475 or e-mail: cmartin@uchc.edu.

A clinical trial, (clinical research or a research trial), is a research study in human volunteers in order to answer specific health questions. Clinical trials can take place in a variety of locations, including hospitals, universities, doctors’ offices, freestanding research centers or community health clinics. All clinical trials are conducted according to strict scientific and ethical principles. Every clinical trial must have a protocol, or action plan that describes what will be done in the study, how it will be conducted, and why each part of the study is necessary. The protocol will have guidelines about who can participate in the research study. These guidelines are based on such factors as age, type of disease, medical history, and current medical condition. Some research studies seek volunteers with illnesses or conditions to be studied, while other trials need healthy volunteers. Clinical trials are sponsored by government agencies, private organizations, and individual researchers who are seeking ways to improve the health of people who may be living with diseases. Sponsors include:

- government agencies such as the National Institutes of Health (NIH), the Department of Defense (DOD), and the Department of Veteran’s Affairs (VA)
- pharmaceutical, biotechnology and medical device companies
- individual researchers

- health care institutions such as academic medical centers and health maintenance organizations (HMOs). Clinical trials are conducted in a series of steps, called phases - each phase is designed to answer a separate research question.
- Phase I: Researchers test a new drug or treatment in a small group of people for the first time to evaluate its safety, determine a safe dosage range, and identify side effects.
- Phase II: The drug or treatment is given to a larger group of people to see if it is effective and to further evaluate its safety.
- Phase III: The drug or treatment is given to large groups of people to confirm its effectiveness, monitor side effects, compare it to commonly used treatments, and collect information that will allow the drug or treatment to be used safely.
- Phase IV: Studies are done after the drug or treatment has been marketed to gather information on the drug’s effect in various populations and any side effects associated with long-term use.

Your participation in any clinical trial is voluntary. Before you volunteer to participate, you will receive an informed consent document that explains the details of the study, including the potential risks and benefits, as well as your rights and responsibilities. A member of the research team will discuss the study with you and answer your questions so you can make an informed decision about whether or not to participate. In addition, you have the right to ask questions throughout the course of the study and may withdraw consent (stop) at any time. This would not affect your regular care at the clinic or with your doctor. Since the decision to volunteer for a clinical trial is a personal one, you should decide by consulting with your health care provider, family members, and friends.



Are you my doctor?

- Michael Payette, MD, MBA



Do you remember P. D. Eastman's book, **Are You My Mother?** Published in 1960, **Are You My Mother?** is a children's book about a newly hatched baby bird in search of his mother, who flew off to find food while he was still an egg. When he hatches and he can't find his mother, he leaves the nest to look for her. On his journey, he asks a kitten, a hen, a dog, and a cow if they are his mother; they each say no. He also asks some less likely candidates, including a boat and a plane. Eventually, he finds a power shovel that lifts the hatchling up to return him to his nest and reunite him with his mother.

When I was growing up, I remember my mother reading me this book. I also remember playing the board game. The game was very simple, consisting of a hatchling with a magnet for a base. The hatchling would move along the path in search of the bird who was his mother. Potential candidates would be repelled away by their magnets. Only one bird would be attracted to the hatchling's magnet, and upon finding this bird, the two would snap together.

If you are familiar with the book or the board game, you may find going to the doctor (and figuring out who that person actually is) to be a similarly daunting and confusing experience. Any trip to the doctor's office involves meeting several people. Some are relatively universal at all offices, like the receptionist who checks you in and verifies your insurance information, or the medical assistant who brings you to the exam room and asks you some basic questions, or the nurse who may take your blood pressure or administer a medication. In offices with physician extenders, you may be evaluated by a PA (physician's assistant) or an APRN (advanced practice registered nurse) in lieu of the doctor. Both PA's and APRN's can function independently and prescribe medications.

At an academic medical center like the UConn Health, you may meet many other people as part of your medical visit. We have

medical students spanning all four years of medical school training. Some of these are UConn trained, others are rotating from other medical schools. We also have residents, who have graduated from medical school (and thus have an MD after their name) who are completing their postgraduate medical education, which is a requirement in the United States to become an independent physician. Like medical students, some of these residents are UConn trained while others are rotating from local hospitals including St. Francis, Hartford, Middlesex, and the Hospital of Central Connecticut. These residents are generally completing residencies in the primary care specialties such as internal medicine, family medicine, and pediatrics.

UConn also has its own dermatology residency training program. Individuals in this program are completing their three year postgraduate training in dermatology, upon completion of which they can either practice as independent dermatologists or pursue higher-level postgraduate training. These trainees are very knowledgeable in dermatology and very skilled at dermatologic surgery. As they near the end of their training, we educators often comment how we are no longer needed as these young, bright, and enthusiastic minds can function autonomously and know more than we do!

Some of our dermatology trainees may decide to pursue further training after completing their residencies. We call these individuals fellows, and we have two fellowship programs here in dermatology, one in procedural dermatology / Mohs surgery and one in clinical trials.

After being seen by a medical student, a resident, a fellow, or any combination of these people, you will eventually be seen by the attending physician, who is the doctor of record for your visit. This is the individual who is your doctor. He or she is ultimately responsible for your medical care. The attending physician is also responsible for teaching the medical students, residents, and fellows you may interact with, as well as supervising the care they provide to you.

We recognize that knowing who is who can be very confusing and can leave you feeling like asking everyone, are you my doctor? To help, we all wear identification badges with our names and level of training on them. We also encourage everyone to introduce themselves clearly, saying things like "Hi, I'm John and I'm a fourth year medical student working with Dr. Payette today..." or "Good morning, I'm Dr. Jane and I'm a third year dermatology resident working with Dr. Payette today..."

No matter who you encounter during your visit to the dermatologist, know that everyone has your best medical health in mind and that we all function as a team to provide you with optimal medical care. That's why we are all chose to pursue careers in medicine in the first place. But if you're not sure who is who or if you don't know what role anyone has in your medical care, please just ask us and we'll be happy to clarify.

Department News!!!

We welcome **Amy Chen, MD**, who has joined our UConn Dermatology practice. Dr. Chen is currently accepting new patients here in Farmington office.

Congratulations to **S. Brett Sloan, MD** on his recent faculty promotion to Associate Professor (Affiliated institution). Dr. Sloan is a practicing dermatologist at the Veterans Hospital in Newington and is also accepting new patients here in our Farmington office.

COMING SOON!!!

This March, 2015, our Canton office will open, offering general dermatology and Mohs surgery.

For more information or to schedule an appointment, please contact:

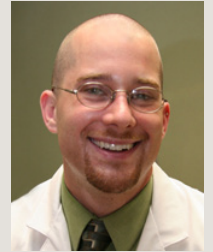
UConn Dermatology Associates
21 South Road, Second Floor
Farmington, CT 06030-6231

Main Line: 860-679-4600

Web: dermatology.uchc.edu

Michael Payette, MD, MBA

Dr. Payette has been board certified and a faculty member here since 2012. He received his B.A. in Biochemistry at Dartmouth College in 2002. His medical degree was earned here at the University of Connecticut School of Medicine, and at the same time he earned his M.B.A. at the School of Business. He went on to complete his intern year at Baystate Medical Center in Springfield, Massachusetts and then completed his dermatology residency back here at the University of Connecticut School of Medicine. Dr. Payette divides his time treating patients, teaching residents and medical students, and serving as the assistant residency director. His areas of interest are inflammatory skin disorders, skin cancers, and health care economics. Dr. Payette is currently accepting new patients at our Farmington and Southington offices.



Sphoorthi Jinna, MD

PGY 2

Dr. Jinna is currently one of our first year dermatology residents. She graduated from Cornell University with a degree in Biological and Environmental Engineering, and from Columbia University with a masters degree in Human Nutrition. She then earned her medical degree at the University of Cincinnati College of Medicine. Dr. Jinna has also completed her preliminary medicine internship at North Shore-LIJ Health Systems in New York. Her current interests are medical dermatology, with an interest in the cutaneous manifestations of systemic disease, as well as pediatric dermatology and medical education.



Clerical Staff

We currently employ 18 clerical staff in our department. They are responsible for incoming patient calls as well as front desk check in and check out. The clinical staff have knowledge of the principles and practices of the clinical office, as well as knowledge of medical terminology. They have the ability to schedule and prioritize their workflow as well as the ability to work under pressure in a rapidly changing environment. Our clerical staff is one of the best at UConn Health and are ready to provide you with first class service!

