

CALENDAR

UCONN DERMATOLOGY GRAND ROUNDS, 8 AM WEDNESDAYS

October 7, November 4 and December 2 Dermatology Waiting Room 21 South Rd., 2nd Floor, Farmington

UCONN DERMATOLOGY JOURNAL CLUB, 12:15 PM

October 21 and 28, November 18 and 25, and December 16 and 23 Dermatology Conference Room 21 South Rd., 2nd Floor, Farmington

HARTFORD PSORIASIS NETWORK MEETINGS, 7 pm to 8:45 pm

October 8, November 12 and December 10 The Newington Lucy Robin Welles Library 95 Center St. Newington, CT RSVP to register or for questions: Marjorie: 860-888-6669 or Missy: 860-635-0580

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

If I have seen further, it is by standing on the shoulders of giants." – Isaac Newton, 1676.



Over 35 years Dr. Jane Grant-Kels has built a city in Farmington. Avenues glowing and skyscrapers soaring, the city that is the UConn Department of Dermatology teems vibrantly. So how to better this metropolis?

Our department already has 22 faculty, 9 residents and over 100 staff dedicated to providing the best and most comprehensive dermatologic care. Be it cutaneous malignancy, inflammation or cosmesis, there is no skin disorder of which we are fearful. Yet, in spite of our great capabilities, we face many challenges.

Healthcare delivery in the U.S. is rapidly changing in ways that will require our Department to shoulder a larger burden. Patient numbers are plentiful and growing, and wait times for appointments are often long. Thankfully, the UConn Health Center has sanctioned our hiring of new dermatologists and mid-level providers to help address the growing need. Further, satellite offices have been created in Canton and Storrs, with ample room for the addition of more providers at these sites. While not fully eliminating the problem of extended wait times, the expansion of our practitioner corps should help.

Additionally, we will broaden our mission to address difficult-to-treat dermatologic cases by growing the number of our specialty clinics. In addition to clinics dedicated to pediatric dermatology, cutaneous lymphoma, and pigmented lesions we will add sessions focused on psoriasis and psoriatic arthritis (co-managed by a rheumatologist), and immunosuppression (transplant)-related cutaneous disease. Finally, we will expand our use of teledermatology to accommodate patients and practices in distant locales.

Ultimately, UConn Dermatology should remain a glowing city of confident referral, willingly applying the latest therapies to the toughest skin-related challenges. We hope to increase our already regional and national recognition as a leader in full-spectrum dermatologic care and education.

- Bruce Strober, MD, PhD Interim Chair

Latest News...



"TELEDERMATOLOGY"

- JUN LU, MD



What is teledermatology?

Teledermatology is a subspecialty in the medical field of dermatology and probably one of the most common applications of telemedicine and e-health. In teledermatology, telecommunication technologies are used to exchange medical information and provide dermatology service over a distance using audio, visual and data communication. Dermatology is particularly suited to the use of advanced communication technologies and the internet for delivery of care, given that dermatology is one of the most visual medical specialties. By using advanced communication technologies, dermatologists are able to widen their reach to patients in a cost-effective manner.

How teledermatology service is provided?

Teledermatology specialty care is generally delivered via store-and-forward communications or by live-interactive video communications. In teledermatology, store-and-forward communication typically refers to the sending or forwarding of digital images and associated patient data to the dermatologist for viewing, evaluating and providing consultation. For live-interactive teledermatology, providers and patients interact via live video-conferencing. For video-conferencing, a variety of hardware attachments may be utilized to enhance the consultation. In store-and-forward teledermatology, high-quality photos best reflecting the size, location and appearance of skin lesions will be taken with a digital camera. In addition, depending on the feature of skin problems, amplified photos under special fluorescence or/ and polarized light using a dermatoscope need to be taken. The clinical photos together with relevant clinical history will be sent via secured transmission by a referring physician or in some cases patients themselves to the consulting physician. The dermatologist will evaluate the patient based on the clinical photos and available clinical information. The consultation will be sent back to the referring physician to discuss with the patient. In live-interactive telecommunication, video conferences will be set up for the patient, the referring physician and consulting dermatologist at the same time, The dermatologist will then be able to view and evaluate skin problems via live-interactive video.

The benefits and challenges of teledermatology

Teledermatology provides many benefits to patients and primary care providers. It offers an alternative cost-effective and easy-to-access way of care compared to conventional care. With a shortage of dermatologists, especially the lack of dermatology access in many rural or under served populations, teledermatology significantly shortens the waiting period with more predictable fast patient access, decrease patient costs for travelling, missed work days, etc. In addition, teledermatology, since it's often coordinated through the patients' primary care providers, offers great opportunity for coordinated care among physicians as well as the medical education for primary care physicians. Moreover, it also helps triage more urgent, complicated, and serious medical problems into a fast-track of diagnostic procedures, medical treatment and surgery that avoids delay from longwaiting time for in-person appointments.

The experience of patients and referring providers through teledermatology are positive, based on research done so far. Studies on comparing teledermatology (both store-and-forward and live-interactive) with conventional in-person visits have shown:

- diagnostic reliability which was measured by complete agreement among

teledermatologists and clinic-based dermatologist is around 80-90%;

- Management planned accuracy for teledermatologists was rated 78.8% compared with 83.4% for in-person dermatologists with no significant statistical difference and was considered equivalent.
- Patient satisfaction surveys and those of referring providers varies between 70-90% in most studies. Studies on quality of life, clinical outcomes and financial analysis all generate very positive and promising results indicating teledermatology is a reliable alternative way of offering cost-effective dermatology care to patients.

Teledermatology is still relatively new in the field and has shown to be fast growing in the last few years. There are challenges that are unique for teledermatology:

- Suboptimal photos and incomplete history can impede accurate diagnosis,
 no real-time interaction in
- store-and-forward teledermatology may pose a challenge for patient-physician communication or delay of feedback,
- Uncertainty on insurance policy causes doubts among providers, etc.

With more study and research on teledermatology as well as more advanced telecommunication technology, there will be many promising improvement and development in the near future.

Teledermatology at UConn Health

Our department started the teledermatology service this year. We offer both store-and-forward and live-video teledermatology. Our pilot projects with Community Health Network and the Department of Correctional Service, have proven to be very successful with high satisfaction from patients and referring physicians. Patients with the Community Health Network across Connecticut and part of Maine, who otherwise were unable to get dermatology service for months, are evaluated and treated in days without traveling. Patients who need diagnostic or treatment procedures were put into a fast-track for clinic visits. Given positive experiences, plans for expanding the service to more health networks and clinics are underway. Our department is committed to providing easy access and good quality care to our patients across Connecticut.



A Wrinkle in Time?

- Andrew Kim MD, PGY 3



"What can I do about my wrinkles?", is a common question we hear from many of our patients. As part of the normal aging process, we lose the natural elasticity in our skin as the collagen and elastin is broken down over time. It's hard to not walk down the cosmetics aisle of any local store and be overwhelmed by the multitude of products with promises to erase our wrinkles. Outlined below are a few of the methods we discuss with our patients concerned about their skin.

Prevention

Chronic exposure to UV light accelerates the photoaging process, so the best strategy is prevention, prevention, and prevention! Using a good sunscreen with a SPF of 30 or higher on a daily basis (with reapplications at least every 2 hours when outdoors for extended periods) can greatly reduce our exposure to the harmful effects of UV light. Many studies have also implicated smoking as a factor leading to accelerated skin aging. Other factors such as routine moisturization, sleeping position (avoiding those that lead to "sleep lines"), and avoiding repetitive facial movements (such as squinting) can help slow the development of permanent wrinkles.

Topicals

Various over-the-counter preparations containing retinols or alpha-hydroxy-acids (AHA) are formulated to help smooth out skin texture and have been shown to have some efficacy. These formulations tend to be milder and less irritating to the skin than prescription-based

products. However, over-the-counter cosmeceuticals aren't regulated by the FDA and may have unpredictable efficacy. Those seeking a stronger and more consistent product may find benefit from using prescription retinoids such as tretinoin (Retin-A° or Renova°).

Neurotoxins

Repetitive facial movements can contribute to permanent facial wrinkles. The most popular and well known among the neurotoxins is onabotulinumtoxin A (Botox*). Strategic injections of these products into key muscles soften up lines by relaxing the muscles that make our wrinkles more prominent. The effects of these treatments take about a week to take effect and last on average for 3 months.

Fillers

Injectable soft-tissue fillers are used for deeper, coarser wrinkles or loss in volume. There are a wide variety of products available for cosmetic use, so careful selection among the choices with a provider familiar with them needs to be done according to your goals. Most injectable fillers are temporary and last on average from 6 months to 2 years.

Chemical Peels & Dermabrasion

A variety of peels of different strength are available for the treatment of chronic photoaging. These products dissolve away the top layer of skin and cause controlled damage to the deeper layers in order to stimulate collagen production in the skin. Dermabrasion works by a similar method except the process is achieved with a fine abrasive substance instead of a chemical.

Laser Resurfacing

Another alternative to chemical peels or dermabrasion, several different types of laser treatment can be used to cause controlled skin damage and stimulate collagen production. Lasers needing a longer recovery time tend to give more significant results, though they need to be balanced with their side effects.

Highlights

Who we are

Department News!!!

Bruce Strober, MD, PhD is our Interim Chairman for the department. We wish him much success in his new position! Dr. Strober will still continue to see his patients as scheduled.

Jane Grant-Kels, MD has been nominated as one of the AMA Women Physicians Section (WPS)
Inspirational Physicians. The Inspirational Physician program is designed to recognize physicians who have contributed to the achievements of women in the medical profession. Congratulations to Dr. Grant-Kels!

Congratulations to Allen Meckowski on earning the HUSKY HERO Award this past May here at UConn Health! Allen is our Clinical Coordinator in the Farmington Office and we are very proud of his accomplishments here in the Dermatology department.

Kudos!!

TELL FAMILY MEMBERS AND FRIENDS ABOUT UCONN DERMATOLOGY!

With offices in Farmington, Canton and Southington, our highly experienced and board certified faculty and providers will provide you, your family and friends with excellent health care. Call for an appointment today.

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

Jun Lu, MD

Dr. Lu joined our department in 2010. She received her medical degree from China Medical University. She later pursued a postdoctoral research fellowship at the Mayo Clinic in Rochester, MN where she studied immunotherapy for melanoma and psoriasis mouse model. She continued there to completed her medicine internship and dermatology residency. Dr. Lu's academic interests include



general dermatology, connective tissue disease, autoimmune bullous disease, teledermatology and clinical trials. She's been actively involved in clinical trials on new psoriasis therapy and also initiated a teledermatology service with the Community Health Network which successfully provides easy and quick access to dermatology service for patients across Connecticut and Maine.

Andrew Kim, MD PGY 3

Dr. Kim is currently one of our second year dermatology residents. He obtained his B.A. from Brown University prior to attending the University of Massachusetts Medical School. Dr. Kim additionally spent a year as a clinical research fellow at UT Southwestern Medical Center coordinating clinical trials prior to completing his intern year in internal medicine at Lenox Hill



Hospital in New York City. His professional interests include autoimmune connective tissue disorders, medical photography, and procedural dermatology.

Rachel Rose Executive Assistant

Rachel has been with the Department since 2011 and is the Executive Assistant to the Chair. In addition to serving as the main administrative support person to the Chair and Vice Chair, she carries out many non-clinical administrative functions for the physicians in the Department.



These include handling travel authorizations and booking travel, processing reimbursements, and scheduling academic meetings and appointments. She also assists the Clinical Trials Office with patient stipends and transfer vouchers.