What’s New at UConn Dermatology?

♦ We are pleased to announce that our newsletter has a brand new look! Since its inception in 2009, our newsletter has provided important articles written by our faculty and residents pertaining to dermatology. We strive to inform our patients and the public via this newsletter with the most recent research and practices within the world of dermatology.

♦ We now provide our patients with suggestion boxes located in our waiting rooms at our clinic locations.

♦ New patients are currently being accepted at our UConn Storrs location where we are now providing dermatologic services.

♦ UConn Dermatology welcomes all new patients to the practice. Thanks to our existing patients for their trust in us. We promise to make your visit a pleasant experience and one that we hope you will tell your friends about.

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History of Mohs Surgery

- James Whalen, MD

Dr. Frederic Mohs, a general surgeon, started the procedure commonly known as Mohs or Mohs micrographic surgery. The goal of the procedure is to evaluate 100% of the margins of the excised tissue. This leads to the highest cure rates and saves the maximal amount of normal, tumor free tissue. He published his first paper describing the procedure in 1941. Years later, he began training other doctors in the procedure. The procedure has undergone only a few changes since its inception.

Dr. Mohs began with a chemical fixative, a zinc chloride paste that was placed on skin tumors. The following day, he would surgically shave through the fixed tissue in a bloodless plane. This tissue was then meticulously mapped and examined under a microscope. If the margins were positive for tumor, the involved area remaining on the patient, would then be coated with a new layer of paste. A second layer of tissue would be removed the following day, and the process would be repeated until a tumor free plane was achieved. There was a residual amount of fixed tissue remaining on the patient. This kept the surgeon from being able to repair the wound. The fixed tissue would fall off in about two weeks and the remaining wound would heal by "mother nature." This is referred to as the fixed-tissue technique.

In the early 1970’s, a significant adaption occurred and is referred to as the fresh-tissue technique. Here, the area is anesthetized locally. Minimal margins of normal appearing tissue are excised around the tumor. This tissue is meticulously mapped and examined under a microscope. If necessary, the patient returns on the same day to have more tissue removed and checked with the microscope. Once clear margins are obtained, reconstructive options are considered and usually performed on the same day.

The name of the procedure, how it’s taught and the oversight of the instruction has changed more than the procedure itself. Originally, Dr. Mohs referred to the technique as chemosurgery. This name refers to the chemical that he placed on the skin followed by surgery. The term micrographic was added and covers both concepts of using the microscope to examine the tissue and the meticulous mapping technique. Mohs has and continues to be taught essentially by the apprenticeship model. This is done in a one to two year fellowship typically following a dermatology residency.

The oversight of its instruction was initially governed by the American College of Mohs Micrographic Surgery and Cutaneous Oncology (ACMMSCO). Later, the name was changed to the American College of Mohs Surgery (ACMS). Many years later, the Accreditation Council of Graduate Medical Education (ACGME) approved the fellowship training with strict guidelines and under the name of Procedural Dermatology. The name of the fellowship was heavily debated and in 2015, the ACGME approved the current name of Micrographic Surgery and Dermatologic Oncology. I am sure Dr. Mohs would approve. Finally, there are physicians who practice Mohs micrographic surgery who have not been fellowship trained and may belong to an organization called the American Society of Mohs Surgery (ASMS). At UConn Health, all Mohs surgeons are fellowship trained and members of the ACMS.

Remembering Dr. Timothy Chartier

- Bruce Strober, MD, PhD; James Whalen, MD; and Hanspaul Makkar, MD

Dr. Timothy Chartier, a former UConn School of Medicine faculty member, passed away on May 26, 2017. He will be missed by his colleagues at UConn and those in the greater community, who have lost a bright star.

Dr. Chartier joined UConn in 2001 after completing his residency in dermatology at Massachusetts General Hospital and then a fellowship in Mohs surgery at the Massachusetts Eye and Ear Infirmary in Boston. In 2004, he started his own dermatologic surgery practice in Farmington, and more recently, Glastonbury. Since that time, he has been active at the state level in the Connecticut Dermatology Society, where he was serving as president-elect, and both the Hartford County Medical Association and Connecticut State Medical Society.

During his time at UConn, he endeared himself to his colleagues, many of whom are still on faculty, and who remember him fondly. He was a team player and always offered to help his colleagues out. He is remembered for his warm, caring demeanor, and his unique ability to put patients at ease. He was charismatic, compassionate and kind, and his patients thought the world of him.

Sometimes we flip through charts when greeting a patient and see an operative note from a prior surgery of Dr. Chartier’s when he was at UConn. Whenever we show a patient how “perfect” his work was, they agree, but invariably follow it up with “and he cared.” In short, Dr. Chartier was skilled and caring, a perfect recipe for a great surgeon.

Dr. Chartier believed strongly in young people being able to afford a higher education, and his family has established a scholarship fund in his honor so that his dream could be fulfilled. Memorial contributions may be made to the Timothy K. Chartier, MD Fund at the Hartford Foundation for Public Giving, 10 Columbus Boulevard, 8th Floor, Hartford CT 06106.
Fore! Duck and Cover from the Sun

Breton Yates, MD, PGY5

Finally, spring and summer are upon us! This is the time for those hibernating outdoor athletes to poke their heads out and see their shadows. With the increased daylight hours and warmer days, athletes both young and old will be dusting off their weapons of choice (golf clubs, racquets, bikes, bats, and more) and flocking outdoors to train and compete. But with all the fun in the sun comes the risk of skin cancer from the increased exposure to UV radiation. According to the American Academy of Dermatology, outdoor athletes may be at an increased risk for skin cancer due to several factors.

Often, outdoor athletes compete or train during mid-day hours when UV radiation is at its highest point. No great workout is complete without a good sweat. But sweating has been shown to increase the photosensitivity of the skin and cause sunscreens to come off easily, thus increasing your risk for sunburns. Although hats are highly encouraged during activity, certain training surfaces, such as water, sand, and concrete, reflect UV radiation from the ground making them less effective for certain athletes. Studies have shown that high endurance athletes can have a weakened immune system. The immune system enables our body to fight off cancers before they ever become a problem. Combine a weakened immune system with chronic sun exposure, and you have a recipe for skin cancer. So how can outdoor enthusiasts protect themselves from getting skin cancer? Here are a few tips from the American Academy of Dermatology:

- Train during non-peak hours, such as morning or late afternoon. The UV radiation is strongest from 10 a.m. to 2 p.m. and should be avoided if possible.
- Wear protective clothing such as hats, sunglasses, and long sleeved shirts. Several athletic companies, such as Under Armour, Nike, and Adidas, make lightweight, sun protective athletic clothing.
- Apply broad spectrum SPF 30 or greater at least 30 minutes prior to your activity. Use a water or sweat resistant sunscreen and reapply every two hours or less. Reapply more often with water sports or with heavy perspiration.
- Be extra cautious with water or sand sports because the reflection increases your risk for a sunburn. Although helpful, even shade or an umbrella won’t fully protect you. You should always apply sunscreen and wear protective clothing.

Apply these few simple tips to protect yourself and have Fun in the Sun!

Who We Are

James Whalen, MD

Dr. Whalen is professor and vice chair here at UConn Health. He graduated from the University of Louisville where he received his Bachelor of Arts in Biology and his medical degree. He then continued to complete his Medicine and Pediatrics internship year there as well. Afterwards, he completed a fellowship at the Price Institute at the University of Louisville for Wound Research. He then completed his Dermatology residency and Mohs/Dermatologic Surgery fellowship at Brown University. Dr. Whalen is currently the director of the Mohs Surgery Department and program director of the Micrographic Surgery and Dermatologic Oncology fellowship.

Breton Yates, MD, PGY5

Dr. Yates is currently our Micrographic Surgery and Dermatologic Oncology fellow. He graduated from the University of Utah with a BS in Biology and then continued his education at their School of Medicine where he received his MD. He completed a transitional year at Intermountain Medical Center in Murrah, Utah. Dr. Yates then completed his Dermatology Residency here at the UConn School of Medicine. His professional interests include pediatrics, cutaneous oncology, medical education and dermatologic surgery. Dr. Yates will be moving back to Utah where he will practice at Woseth Dermatology in Salt Lake City. We wish him all the best in his professional career.

Clerks

Our department is grateful to have such wonderful clerks who are in the front lines for patient services for our very busy practice. They triage phone calls from thousands of patients within and outside of Connecticut on a weekly basis. They provide patient information, and schedule appointments and consults from referring physicians in the community. They are a true asset to the department and provide much needed support to the providers in our practice.
We have several active clinical trials 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 email cmartin@uchc.edu.

A friendly reminder to our patients that this summer’s tick population is high for the Connecticut area. Remember to use bug spray that prevents ticks and to do a ‘tick check’ on yourself. Also, be mindful to wear your sunscreen against the damaging rays of the sun.

We’d like to wish our recent graduates much luck and success in their future careers!
Sphoorthi Jinna, MD Andrew Kim, MD Ammon Larsen, MD Breton Yates, MD

We welcome our new residents and fellows to UConn Dermatology:

Clinical Trials Research in Dermatology
Marie Campagna, MD, PGY1

Dermatology Residency
Malcolm Creighton-Smith, MD, PGY2
Michael Storonsky, MD, PGY2
Gillian Weston, MD, PGY2

Micrographic Surgery and Dermatologic Oncology Fellowship
Sphoorthi Jinna, MD, PGY5