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### **32622 Imaging technologies for presurgical margin assessment of basal cell carcinoma**

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33676

**Identifying factors associated with multibiologic use at an academic center**

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Though biologic agents have shown excellent efficacy in treating many patients with moderate to severe plaque psoriasis, a subset of these patients are refractory to treatment with multiple biologic agents. Certain variables such as demographics, degree of disease severity, genetics, and previous experience with biologic therapy have been shown to influence response to single biologic therapy in patients with plaque psoriasis. We examined clinical data from 222 psoriasis patients at UCSF; 171 reported use of only a single biologic agent and 51 reported prior use of 3 or more biologics at enrollment from 2006-2020. We analyzed demographic features, clinical features, and comorbidities associated with use of 3 or more biologics. On multivariate analysis, use of 3 or more biologics was associated with greater duration of psoriasis (22.9 vs. 19.3 years [ $P = .01$ ]), initial presentation of psoriasis on the gluteal cleft (15.7% vs 4.7% [ $P = .05$ ]), less family history of psoriasis (43.1% vs 54.7% [ $P = .01$ ]), and lower prevalence of high cholesterol (19.6% vs 22.8% [ $P = .008$ ]). Erythrodermic type psoriasis (13.7% vs 2.9% [ $P = .06$ ]) trended towards significance with use of three or more biologics. These results may suggest certain subsets of patients with psoriasis are harder to treat with biologics. In the next phase of this project, patient data (demographics, disease severity, treatment history, etc.) will be collected using a novel, physician crowd-sourced database that will allow physicians to contribute cases of psoriasis patients who have failed multiple biologics or cases who have responded to a single biologic.

*Commercial Disclosure: None identified.*

32622

**Imaging technologies for presurgical margin assessment of basal cell carcinoma**

Krishan Parashar, BSc, Wayne State University School of Medicine, Detroit, MI; Angeli Eloise Torres, MD, Department of Dermatology, Henry Ford Hospital, Detroit, MI; Wyatt Boothby-Shoemaker, Michigan State University College of Human Medicine, East Lansing, MI

Basal cell carcinoma (BCC) is the most common skin cancer worldwide. Mohs micrographic surgery is a highly used BCC treatment, involving staged resection of the tumor with complete histologic evaluation of the peripheral margins. A reduction in the number of Mohs stages would significantly improve care and could result in substantial economic benefits, estimated at \$36 million USD in savings per annum. Noninvasive imaging modalities can potentially streamline the surgical management of skin cancers by refining presurgical assessments of tumor size. We assessed the current imaging techniques in dermatology and their application for tumor margin assessment of BCCs prior to Mohs micrographic surgery. These include dermoscopy, photodynamic diagnosis (PDD), high-frequency ultrasound (HFUS), optical coherence tomography (OCT), reflectance confocal microscopy (RCM), and optical polarization imaging (OPI). Each technology is limited or strengthened by its resolution, depth, speed of imaging, field of view, maneuverability, and billing. RCM, and a combination of RCM with video mosaicking technique and OCT, appear to be promising imaging techniques in pre-surgical margin assessment because of the superior resolution of RCM and the enhanced depth of imaging of OCT. OPI is also favorable for margin assessment based on its field of view and maneuverability. Further research and efficacy studies are necessary before such techniques can be implemented widely. It is imperative that general dermatologists and Mohs surgeons alike are well informed regarding the existing technologies given the increasing incidence of skin cancer and the associated rising costs.

*Commercial Disclosure: None identified.*

33834

**Impact of chronic spontaneous urticaria on health-related quality of life in the United States**

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**Objective:** To evaluate the burden of illness among patients diagnosed with chronic spontaneous urticaria (CSU) in the USA.

**Methods:** Data from adult respondents with a self-reported physician diagnosis of CSU were collected from the 2019 USA National Health and Wellness Survey, a nationally representative sample. The burden of illness was analyzed using the SF-36v2 (Mental [MCS] and Physical Component [PCS] Summary scores), health utility scores (SF-6D, EQ-5D), Dermatology Life Quality Index (DLQI), Work Productivity and Activity Impairment (WPAD), Patient Health Questionnaire-9 (PHQ-9), General Anxiety Disorder-7 (GAD-7) and Urticaria Control Test (UCT).

**Results:** Among 635 patients with CSU, 53.2% were treated (prescription and/or OTC), 77.0% were poorly controlled [UCT score 10. CSU impacted patient's mental health status (MCS score: 36.3 [10.5]) more than physical health status (PCS score: 40.1 [10.0]). SF-6D utility score was 0.54 [0.14] and EQ-5D was 0.62 [0.33]. The mean (SD) GAD-7 score was 10.5 (7.2) with 21.1% reporting moderate (10-14) anxiety and 33.7% reporting severe (15-21) anxiety. The mean (SD) PHQ-9 score was 13.5(8.9), with 14.9% reporting moderately severe (15-19) depression and 31.8% severe (20-27) depression. Mean [SD] percentage absenteeism (36.5% [26.1]), presenteeism (67.2% [34.9]) and overall work productivity impairment (73.1% [34.2]) was reported among the employed patients. Mean [SD] percentage activity impairment among all CSU patients was 62.6% [34.1].

**Conclusion:** The majority of CSU patients had poor disease control and showed a high impact on mental health and impairment of work and activities.

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34291

**Impact of COVID-19 pandemic on dermatology patient pharmacy preferences**

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**Background:** Health care and prescription costs continue to increase dramatically in dermatology. Resources such as pharmaceutical discount cards, price comparison mobile applications, and the advent of online/mail-in pharmacies may reduce patient medication costs and increase ease of access, a need especially highlighted with social distancing and stay-at-home guidelines of the COVID-19 pandemic.

**Objective:** This study aims to assess dermatology patient pharmacy preference for filling medications prior to, during, and after the COVID-19 pandemic.

**Methods:** We conducted a retrospective study of patients seen at Wake Forest Baptist Health (WFBH) Dermatology from 06/01/2019 to 07/01/2020 and prescribed tretinoin to evaluate their corresponding pharmacy choice. Additionally, we assessed subjective patient preference for pharmacy type before, during, and after the pandemic via a survey tool hosted by Amazon Mechanical Turk.

**Results:** An average of 72.3 prescriptions per month of tretinoin were provided at WFBH, of which 0-3 were transmitted to an online/mail pharmacy; no significant increase in online/mail pharmacy transmission was noted after onset of the pandemic. Survey data were collected from 1568 participants. Prior to the pandemic, 8.4% of participants reported online pharmacy use, with increasing preference (27.9%) during the pandemic. Of total participants, 20.5% anticipate online pharmacies remaining their main source for dermatologic medications after the pandemic. Of the participants preferring in-person pharmacies prior to the pandemic, 22.6% changed their preference to online pharmacies during the pandemic.

**Conclusion:** Although online pharmacies offer economical convenience and ease of access, patients continue to prefer traditional in-person, as opposed to online, channels for obtaining dermatologic prescriptions.

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