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Impact of telegealth on pharmaceutical management of dermatological conditions

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The impact of the COVID-19 pandemic caused dermatology providers to use teledermatology to safely arrange clinic appointments during lockdowns. This study aimed to evaluate the impact of teledermatology on pharmaceutical management of AD. A retrospective cohort study was performed using all documented pharmaceutical prescriptions of tetracycline in 2019-2021 prescribed by dermatology providers at a large academic tertiary care institution. Results show an increase in telemedicine visits from 0.75% (2019) to 18.51% (2020), with a decrease to 3.98% in 2021 (p<0.0001). Analysis demonstrates that a tetracycline prescription of over 91 days was given in 37.90% vs. 28.83% of visits for virtual vs. in-person visits respectively (p<0.0001). Interestingly, 52.64% of antibiotic prescriptions written by staff physician dermatologists exceeded 91 days vs. 18.18% for dermatology fellows, 25.74% for resident physicians, and 21.55% for physician-assistants (p<0.0001). The demonstrated increase in duration of antibiotic prescribed during virtual visits is perhaps indicative of less data available for clinical decision-making, longer wait times between provider appointments during this era of lockdowns, and providers desire to make the visit worthwhile. Further studies should explore factors related to provider decision-making in virtual compared to in-person visits. This research is part of a foundation for how virtual visits may play a greater role in dermatologic care as we move towards a post-COVID world.

Impact of crisaborole & tacrolimus 0.03% on patient-reported outcomes and caregiver burden in children with atopic dermatitis

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Impact of the COVID-19 pandemic on the execution of real world, pragmatic trials: The LITE study experience

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With the growing incidence of skin cancer globally, electronic consultations (e-consults) can be a useful tool for dermatologists in the assessment of cutaneous lesions. In this study, we sought to characterize the social and institutional factors affecting completion of initial e-consults as well as in-office follow-ups. Patients with an ICD 10 code of neoplasm with uncertain behavior at The Ohio State University Medical Center that received an e-consult order from May 2017 to May 2021 were queried. Additional information collected included patient demographics, zip code affiliation, follow-up in-office appointment and referral status, as well as any referral efforts employed by the centralized team. Though creative solutions were implemented to address many reported barriers, the residual impact of the pandemic on the economy, healthcare, and family life continues to challenge the execution of the LITE study.

Factors affecting electronic dermatology consultations for patients with uncertain cutaneous neoplasms

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