

TEXTBOOK OF ADVANCED DERMATOLOGY

PEARLS FOR ACADEMIA AND SKIN CLINICS

PART 1



Editor:
Mohammad Reza Namazi

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**Textbook of Advanced
Dermatology: Pearls for
Academia and Skin Clinics**

(Part 1)

Edited by

Mohammad Reza Namazi

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Textbook of Advanced Dermatology: Pearls for Academia and Skin Clinics (Part 1)

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PREFACE

"My intentions are to spread knowledge; I consider this the most important happiness."

Biruni, a Persian encyclopedic scientist

"Our writings will remain, while we will go. Nothing will remain in the world from us except our writings."

Ferdowsi, a Persian giant poet

"Do not coil on the treasure of science like a snake and deprive science-seekers from acquiring it."

Ali-ibn-Abitaleb, an Arab leader

During my 20-year dermatology practice, including my residency period, I have frequently encountered important clinical challenges that could not be solved by referring to major dermatology textbooks, making me search dermatology papers and the less well-known books to solve these problems. Also, during the past two decades, I have been practicing both medical and procedural dermatology as well as conducting research and writing papers; therefore, I have gained a lot of experience which is not mentioned anywhere. Not to mention my experience in teaching as a university academic staff and in business as a founder and director of my private dermatology clinic.

I thought it would be a big pity not to share the interesting practical points I learned and also my laboriously achieved experience with my colleagues and future dermatologists, believing that any person should write at least one book during his lifetime to share his unique experience with his/her fellow human beings. Actually, this was the motivation to start writing this book. Later on, I became interested in encouraging the collaboration of other colleagues, some being the world leaders in their specific fields, to strengthen this book. I would like to extend my deep gratitude to these dear colleagues who have greatly honored me with their marvelous contributions.

The present book is composed of 5 sections: Teaching Pearls, Medical Pearls, Procedural Pearls, Publication Pearls, and Business Pearls, therefore, encompassing the broad realm of dermatology and filling the large gap in the major dermatology textbooks. Importantly, this book does not aim to provide detailed information on each topic, rather it aims to provide interesting tips which cannot be found or can hardly be found elsewhere. **Therefore, as an advanced dermatology textbook, much important essential information that can easily be obtained from other publications is not included in this book.**

I would like to thank all my dear colleagues who have kindly referred surgical patients to me, especially Drs. Ali Mohammad Namiyan, Amir Kalafi, Mahsa Naseri, Masoud Koraei, Ahmad Moradi, Arash Abtahiyan, Yasaam Khosravi, Khalil Hamedpour and other colleagues whom I may not remember.

I would also like to thank my assistants, Mr. Mohammad Khanchefalak and Ms. Bahar Bayat, for their help in taking photos and Prof. Nasrin Shokrpour for editing some parts of this book.

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This preface cannot be concluded without sincerely thanking Bentham's publishing staff, especially Miss Humaira Hashmi, Ms. Simra Nasir and Ms. Ambreen Irshad, for their help in making the dream of this book a reality.

"This well-arranged composition will remain for years, When every atom of our dust is dispersed.

The intention of this design was that it should survive

Because I perceive no stability in my existence..."

This poem is from Saadi Shirazi, a great Persian poet (translated by Edward Rehatsek into English).

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DEDICATION

To Drs. Uranus Dasmeh, Aliakbar Mohammadi, Vahid Dastgerdi, plastic surgeons in Shiraz, Iran and Dr. Mohsen Alirezai, dermatologist and plastic surgeon in Montpellier, France, for responding to my consultations and queries; Dr. Manouchr Sodaifi, founder of the Dermatology Department of Shiraz University of Medical Sciences, for his amazing interest in teaching; and Dr. Behrooz Kasraee for his help.

To my dear wife Masoumeh, who got headaches on weekends from the constant sound of typing this book from dawn to dusk, and our beloved flowers Sahand and Anahid.

To the memory of Prof. Karim Vessal, the Father of Iran's Modern Medical Editing:

“Near, far, wherever you are, I believe that the heart does go on...

You are safe in our hearts, and our hearts will go on and on..."

CHAPTER 1**Introduction****Mohammad Reza Namazi^{1,*}**¹ Shiraz University of Medical Sciences and Dr. Namazi Skin and Hair Clinic, Shiraz, Iran

Dermatology seems to be originated from internal medicine. The older generation of dermatologists was mainly involved in treating skin diseases. However, this field has progressed tremendously during the past decades, advancing its procedural part to include many surgical operations that were traditionally believed to lie within the realm of plastic surgery.

On the other hand, the progress in laser technology has dramatically advanced the borders of dermatology. A few decades ago, thinking about the use of laser in dermatology was just like science fiction.

Since dermatology is a lucrative field, especially its aesthetic and procedural parts, other physicians, such as general practitioners and even some specialists, have been lured to undertake many non-invasive or minimally invasive procedures that dermatologists believe to belong to their field. This has led to a fierce competition, and the winner of this competition, being cut-throat in some countries, is perhaps the person who not only masters the aforementioned procedures but also knows the business acumen. Unfortunately, business issues, while important, are not taught in the residency period, and there are many expert dermatologists who end up working in clinics belonging to businessmen because they do not know the business acumen.

In this book, besides the purely academic parts of dermatology, *i.e.*, teaching and research, other sections of this wide discipline, *i.e.*, medical, aesthetic and procedural parts, are also covered, and a separate section is also devoted to the business tips.

In the medical section, many compounding formulations of topical compounds are provided. These are mainly based on the author's experience in the prescription of topical compounds. The prescription of topical compounds is done for several reasons. Firstly, the available commercial products may not contain all the ingre-

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Teaching Pearls

CHAPTER 2**Interesting Ways to Encourage Trainees for Proper History Taking and Physical Examination****Mohammad Reza Namazi^{1,*}**¹ Shiraz University of Medical Sciences and Dr. Namazi Skin and Hair Clinic, Shiraz, Iran

Developing the trainees' observation skills and encouraging them to spend adequate time on meticulous history taking and physical examination are not done easily. Two interesting tips to achieve these goals are presented:

-Tell the story of Al-Bakri, the great traveler of mind:

Al-Bakri was born in Spain (1040-1094 CE). He received travelers and merchants in his home and interpreted their stories into his "Book of Highways and Kingdoms". He made accurate references to the geography, culture, religion and trade of Europe, North Africa and the Arabian Peninsula, all this without ever traveling to these distant lands himself! [1] The crater Al-Bakri on the Moon is named after him [2]. Al-Bakri is perhaps the greatest history taker in human history.

A giant semblance of Al-Bakri was displayed at Expo 2020 in Dubai (Fig. 1).

- The Sherlock Holmes series and stories can serve as excellent astuteness inspirers for medical trainees. Sherlock Holmes is a fictional supersleuth who greatly stresses on keen observation, meticulous inspection and heeding details and apparent trifles, which are especially related to dermatological practice. It has been appropriately said that a dermatologist should be a proficient detective possessing the powers of observation and deduction when facing contact dermatitis [3]. In "The Adventure of the Blanched Soldier", Holmes states that he has the habit of sitting with his back to the window while seating his clients in the opposite chair where the light falls fully upon them. Dermatological practice in the gaslight era was exactly the same. Additionally, the dermatologist must have enough exposure of the skin, not trusting the patient's assurance that lesions are or are not present in an area or that they are similar or dissimilar to the ones that

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Medical Pearls

CHAPTER 5**Practical Ways to Improve Patient Adherence****Megan Mukenge¹, Christina Kontzias¹ and Steven R. Feldman^{1*}**¹ *Center for Dermatology Research, Department of Dermatology, Wake Forest School of Medicine, Winston-Salem, North Carolina, USA*

Patient adherence involves collaboration between the patients and their providers. Poor adherence can negatively impact clinical outcomes and increase frustration among patients. Provided are pearls for promoting patient adherence:

-Assessing adherence can be challenging. It may be tempting to ask if patients are taking their medications as prescribed. Often, patients answer based on what they think we want to hear. Consider opting for an indirect line of questioning that can lead to a more truthful response. For example, ask patients, “How and/or when do you take your medication?” or “How many days a week you are not able to take your medication?” Also, you can suggest that patients bring their medications to each office visit. However, this could yield misleading information as patients may discard their medication before the visit.

-Patients are more diligent in following their treatment plans in the days leading up to their appointment and shortly after the office visit [1]. This trend can be explained by white coat compliance. Therefore, implementing strategies that increase the frequency of follow-up visits could be beneficial in improving adherence. Minimizing follow-up time should be considered for initial visits, especially when prescribing a new treatment regimen. If this is not practical, consider virtual assessments. When appropriate, consider progress photo submissions. When patients require less frequent monitoring, consider extending the follow-up time.

-Engage the patients as much as possible when creating a treatment plan. When patients feel included in decision-making, they tend to foster a greater sense of ownership in their health. This can strengthen the physician-patient relationship

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Publication Pearls

Publication Pearls

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“The purpose of research is to publish” - Michael Faraday, English Physicist and Chemist (1791–1867).

If you would like to step into the publication world, you should have the patience of Job, the longevity of Noah, and the faith of Abraham (faith in science). Do not get disappointed at all! I am exaggerating and just would like to increase your patience and tenaciousness. Publishing a paper may take a long time. You may face rejection from several journals, esp. if you would like to publish your paper in the highest impact factor journal as possible. In this case, you need to step down from the impact factor ladder until the highest impact factor journal possible accepts your work, which is time-consuming. Therefore, be very patient and tenacious. Memorize what Ferdowsi, a great Persian poet, has elegantly said regarding the utmost importance of papers:

“Our writings will remain, while we will go. Nothing will remain in the world from us, except our writings.”

Below, some pearls and tricks for publishing papers will be given:

-If your research is unique in some aspects, it is important to mention this in the title and make your title eye-catching. For example, if you have done a research on the epidemiology of pemphigus in your area for the first time, mention it in the title, e.g. “Epidemiology of Pemphigus in Southern Iran: The first Study”. If you have included a noticeably large number of cases or have used data gathered over many years, do mention that: ” Epidemiology of Pemphigus in Southern Iran: a 20-year Retrospective Study” or “ABO Blood Groups and Pemphigus Vulgaris: A Study on 201 Patients”.

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