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The rise in subscription skin care services

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Abstract
Subscription skin care services are a rising niche of direct-to-consumer telehealth models. The explosion of such services may be a reflection of the increasing demand by patients to have accessible, affordable dermatological care. These models come with both benefits and risks to patients. A thorough understanding of how subscription skin care services work may benefit dermatologists in addressing patients’ questions regarding alternative care options.

Keywords: telemedicine, digital health, acne, anti-aging, hair loss, alopecia, hypotrichosis, herpes simplex virus

Introduction
The advent of subscription skin care services was aimed at lessening the financial and time-related burden of office visits for the treatment of common skin conditions. Subscription skin care services are part of a larger subscription e-commerce market, which has grown by over 100% per year over the last five years[1]. Skin care is a special niche in the market for subscription-based medical care owing to the high prevalence of common skin conditions and the ease of prescribing topical and oral medications in the field. One of the first companies to emerge in the subscription skin care treatment market offered non-prescription based topical acne regimens. Six additional companies currently exist in this market place, offering a variety of dermatological treatments for acne, anti-aging, eyelash hypotrichosis, hair loss, herpes simplex virus infection, and melasma (Table 1). These companies have the ability to prescribe prescription medications in addition to non-prescription medications.

Discussion
Exploring subscription dermatologic care subscription websites, one will find trendy, minimalist web-site designs sprinkled with catchy, treatment-driven quotes, magazine and corporate organization endorsements (such as major league baseball), photographs and reviews of patients experiencing dramatic results with the use of their products, and expert opinions on certain medications from practicing dermatologists within the company’s professional medical network. A membership subscription is all-inclusive, including digital assessments, direct personal follow-up appointments, medication costs, shipping costs, annual medication renewal shipments, and access to additional, non-prescription à la carte treatment options.

Most companies offer a three-step plan to obtain dermatological care (Figure 1). First, the subscriber/patient answers several questions about relevant past medical history and sends in photos to reflect their condition. Step two involves review of the patient’s case by a licensed dermatologist or general practitioner, who subsequently creates a treatment plan specific to the condition. The patient then waits for arrival of their medication, which is conveniently delivered to their home address.

These companies are based on direct-to-consumer telehealth models, in which medical opinion of
licensed physicians in their network, primarily in the field of dermatology, is translated into the prescription of generic dermatological medications and other non-prescription treatments. Physicians are able to provide digital assessments, expert-opinion on treatment, and remote personal medical-counselling through text-message, email, mobile applications (accessible on smart phones and tablets), or online-based chat systems. Companies note quick response times of 24-48 hours for digital inquiries. Through these digital interactions, physicians recommend prescription and non-prescription medications for the patient’s personalized skin treatment regimen, including compounded medicines. Follow-up visits are available and recommended by one company to be carried out every 30-90 days initially, followed by yearly assessments once a patient is satisfied with their current treatment regimen.

The majority of companies do not allow outside prescriptions from dermatologists or other providers but do state they take into consideration the prescription recommendations of outside providers. Insurance coverage of medications prescribed through these subscription services is variable. Most companies do not accept insurance coverage for medications but boast a low-price in comparison to alternative avenues for obtaining the same medications. In addition, companies report that the cost of each digital visit is applied towards the cost of the prescribed medications to reduce the overall cost burden experienced by patients.

**Figure 1.** Model of subscription skin care service. Flow-diagram demonstrating the options for a patient with skin-issues (in office dermatologist assessment versus subscription to skin care service). Patients who pursue treatment through a subscription skin care service may require in-office dermatologist assessment, where the reciprocal is unlikely. DTC = Direct-to-consumer.
An evaluation of published website reviews revealed multiple reported benefits of online subscription dermatology service compared to clinic visits. Many users reported satisfaction regarding the convenience of an online dermatological assessment. This extended from not having to wait for an available appointment (sometimes months) to not having to physically go to a physician’s office. The affordability and accessibility of prescription medications was also frequently mentioned.

The implications of direct-to-consumer telehealth models are both beneficial and harmful to patients. Models such as these may help combat lower accessibility to specialty healthcare amongst different socioeconomic groups, a shortage of healthcare providers, and a rise in healthcare costs. However, patients presenting with what appear to be straightforward acneiform lesions or hair loss may have an underlying, more complex medical diagnosis that could result in mistreatment.

For patients who fail to improve with prescribed regimens of first-line medications, there are limited options for an escalation in therapy. This may result in patients having to seek out an opinion from a dermatologist in-office for further assessment, which means a higher financial burden when added to the subscription telehealth service. In addition, in this case the initial telehealth service did not improve their condition and prolonged the duration of their condition without appropriate treatment.

Patients may be influenced by internally-conducted studies regarding success with treatment. One internal study reported an 88% effectiveness rate judged by survey responses from patients. Unfortunately, no further information was provided on methods or results. Overly optimistic reporting has the potential to mislead patients, create unrealistic expectations of treatment, or dismay patients from seeking an in-office medical visit to assess for more complicated conditions.

**Conclusion**

The rise in subscription skin care services represents a medical niche of the subscription e-commerce market. Patients may benefit from these models through a lower financial burden and ease of access, but are at risk for mistreatment or undertreatment. They may also experience difficulties obtaining treatment escalation if treatment regimens fail. Providers may benefit from the knowledge of subscription skin care services in counseling their patients on risks and benefits of direct-to-consumer telehealth models.

**Potential conflicts of interest**

Dr. Steven R. Feldman has received research, speaking and/or consulting support from a variety of companies including Galderma, GSK/Stiefel, Almirall, Leo Pharma, Boehringer Ingelheim, Mylan, Celgene, Pfizer, Valeant, Abbvie, Samsung, Janssen, Lilly, Menlo, Merck, Novartis, Regeneron, Sanofi, Novan, Quirient, National Biological Corporation, Caremark, Advance Medical, Sun Pharma, Suncare Research, Informa, UpToDate and National Psoriasis Foundation. He is founder and majority owner of www.DrScore.com and founder and part owner of Causa Research, a company dedicated to enhancing patients’ adherence to treatment. Michael Visconti, Wasim Haidari, and Dr. Sarah Taylor have no conflicts of interest to declare.

**References**

<table>
<thead>
<tr>
<th>Company Name</th>
<th>Dermatological conditions treated</th>
<th>Drugs offered (strength)</th>
<th>Cost</th>
<th>Cost per digital visit</th>
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<tbody>
<tr>
<td>Apostrophe®</td>
<td>Hair loss Anti-aging Eyelash hypotrichosis</td>
<td>Finasteride (1 mg) Tretinoin (0.025%-0.1%) Latisse® (3 ml)</td>
<td>$25/month</td>
<td>$20</td>
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<td>Curology®</td>
<td>Acne</td>
<td>Personalized, variable blend of: Clindamycin Azelaic acid Tretinoin Niacinamide Zinc pyrithione Tranexamic acid Metronidazole</td>
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<td>Free</td>
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<td>Hims®</td>
<td>Hair loss Acne Anti-aging</td>
<td>Finasteride (1 mg) Anti-DHT shampoo Minoxidil topical solution (5%) Acne topical: Niacinamide Clindamycin phosphate Tretinoin Anti-aging topical: Tretinoin</td>
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Table 1. Services and cost of prescription and non-prescription based subscription skin care companies.