

Augmenting the scope of dermatologic care and training via student-run health clinics

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Abstract

Skin cancer is a major public health problem. Unfortunately, individuals who lack health insurance have lower skin cancer screening rates compared to insured individual and, therefore, have a higher risk of more advanced cancer diagnoses. Student-run health clinics may be the answer to this dilemma. Student-run health clinics can not only help by providing essential dermatologic services to the general population, both insured and uninsured, but also provide early exposure to dermatology education for medical students.

Keywords: dermatology, education, student health clinics

Introduction

In 2014, the United States Surgeon General issued a landmark call to action to prevent skin cancer, calling it a major public health problem [1]. Since then, it has become increasingly apparent that essential dermatologic care should no longer be ignored, given that over 3.5 million skin cancers are treated annually in the United States, costing our healthcare system approximately 8.1 billion dollars annually [2]. Unfortunately in the United States, individuals without health insurance tend to have consistently lower screening rates and have a higher risk of being diagnosed with advanced stages of cancer or of having complications [3]. Student-run health clinics may provide a fitting solution. These clinics not only provide early exposure to dermatology education for medical students in their preclinical years, but also

provide essential dermatologic services to the general population.

Recently, student-run health clinics have emerged across the United States in an effort to provide care to underserved and uninsured populations. These clinics play a unique role among safety net providers as they are often the first, and sometimes only, healthcare provider that patients see. Studies across various specialties have shown that it is possible to successfully implement quality improvement interventions in student-run clinics, which ultimately lead to a higher quality of care, greater variety of services provided, and reduced hospitalization [4-6]. In this regard, they may be an effective outlet in providing specialized, preventative care to patients who lack access to necessary dermatologic services. At the University of Miami Miller School of Medicine, the Mitchell Wolfson Sr. Department of Community Service (DOCS) is one of the organizations that provides a wide variety of healthcare services to the community including dermatologic services. Based on its 2017-2018 annual report, over 1000 clinic patients were seen with over 2500 physician hours dedicated to the community. The services offered included education booklets, call back services, and referrals [7].

Discussion

More often than not, patients with limited access to care tend to consult a primary care provider or non-physician for treatment of their dermatologic complaints [8]. Unfortunately, this has the potential

to result in incorrect diagnosis and consequently, incorrect treatment. Making dermatologic resources more easily accessible through student-run health clinics can facilitate expedited care and improve referral ability to a board certified dermatologist for these patients. Furthermore, involving medical students in the process of dermatologic patient education is an opportunity for enhanced, experiential learning in the pre-clinical setting. Early exposure to dermatology and access to mentors is extremely beneficial to medical students interested in pursuing this field.

National data reveals a total of 34 million patient visits to non-federally employed, office-based dermatologists, with 40% of patients presenting with a new problem. The top diagnoses from these visits can be considered debilitating and potentially life threatening, ranging from acne to malignant neoplasms [9]. To make matters worse, these 34 million may not include patients who are uninsured, underserved, or use safety net clinics as their primary form of healthcare. Student-run clinics that offer dermatologic care would certainly help in providing care to these underserved populations as they allow more patients to see a specialist and receive treatment for a life-threatening or debilitating disorder. Furthermore, student-run clinics offering dermatology specialty care may also increase the

number of correct diagnoses for patients' skin problems, particularly when a dermatologist is overseeing the students. Receiving care from a dermatology specialist in the primary care setting leads to improved diagnostic accuracy and a decrease in unnecessary medication treatment [10]. This discrepancy further gives evidence for the importance of dermatologic care that may be offered at student-run clinics.

Conclusion

Student-run health clinics offer a wide variety of services, including dermatologic care, for underserved and uninsured populations. Annual skin cancer checks, education about the use of sunscreen and sun protection, and counseling about skin self-exams are fairly simple but critical interventions that can be incorporated into routine patient visits at student-run health clinics. These seemingly small preventative measures have the potential to serve a greater purpose by reducing or even preventing common dermatologic issues before they become severe or lead to morbidity and mortality. By providing accessible dermatologic care for underserved and uninsured populations, patients with potential skin cancers will receive better information, earlier interventions, and access to a dermatologist.

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