

We have never seen a dermatologist-Prisons Telederma Project Reaching the Unreachable through Teledermatology

Innocent Atuhe

King Ceasor University, Uganda

Background

Atopic Dermatitis (AD) is one of the most prevalent and growing chronic inflammatory skin diseases in African [1]. AD care is limited in African due to lack of information about the disease amongst primary care workers, limited access to dermatologists, lack of proper training of healthcare workers and shortage of appropriate treatments [2] We designed and implemented Prisons Telederma project based on the recommendations of the International Society of Atopic Dermatitis. Our goal was to increase access to dermatologist-led care for prisoners with AD through teledermatology in Uganda.

Approach

We trained prison staff on AD diagnosis and treatment using an adapted American Academy of Dermatology (AAD) Childhood AD Basic Dermatology Curriculum. This training was followed by blended e-learning and webinars facilitated by Consultant Dermatologists with local knowledge of AD care practices, WhatsApp group discussions and sharing pigmented skin AD pictures and treatment via zoom meetings. We then used Store-and-forward Teledermatology [3], to share AD skin photos with senior dermatologists. Collected locap photos were used to drafted an iconographic atlas AD of pigmented skin for use as a job aid by general physicians. We monitored AD patients using a Patient Oriented Eczema Measure (POEM) tool [4]. We held four advocacy meetings to persuade relevant stakeholders to increase supplies and availability of first-line AD treatments such as emollients in prison health facilities.

Results

1. Draft iconographic atlas of the main dermatoses in pigmented skin
2. Increased proportion of prison physicians with adequate knowledge of AD and teledermatology from 20% to 80%
3. Increased proportion of prisoners with AD reporting improvement in POEM scores from 25% to 35% in one year.
4. Increased proportion of prisoners with AD seen by consultant dermatologist through teledermatology from 0% to 20%
5. Increased the availability of AD recommended treatments in prisons health facilities from 5% to 10%

Recent Publications

1. Al-Afif KAM, Buraik MA, Buddenkotte J et al. Understanding the burden of atopic dermatitis in Africa and the Middle East. *Dermatol Ther (Heidelb)* 2019; 9: 223–241 .
2. Schmid-Grendelmeier, Takaoka R, Ahogo K.C, Belachew W.A, et al. Position Statement on Atopic Dermatitis in Sub-Saharan Africa: current status and roadmap. *JEADV* 2019, 33, 2019–2028. DOI:10.1111/jdv.15972
3. Andrea M Rustad, Peter A Lio. Pandemic Pressure: Teledermatology and Health Care Disparities. *Journal of Patient Experience* Volume 8: 1-5, 2021. DOI: 10.1177/2374373521996982
4. Charman CR, Venn AJ, Williams HC. The Patient-Oriented Eczema Measure: Development and Initial Validation of a New Tool for Measuring Atopic Eczema Severity From the Patients' Perspective. *Arch Dermatol.* 2004;140:1513-1519
5. Zarca K, Charrier N, Mahe' E, Guibal F, Carton B, Moreau F, et al. (2018) Tele-expertise for diagnosis of skin lesions is cost-effective in a prison setting: A retrospective cohort study of 450 patients. *PLoS ONE* 13(9): e0204545. <https://doi.org/10.1371/journal.pone.020454>

Received: Dec 28, 2022; **Accepted:** Dec 30, 2022; **Published:** March 16, 2023

Biography

Innocent Atuhe is the Director of the Centre for Research, Innovations and Commercialization at King Ceasor University. He is a Senior Physician and an international Health Care Quality Improvement Specialist with interests in new health care design and delivery. He is a trainer and mentor in quality improvement for the Ministry of Health and USAID. He is a researcher in use of telehealth to improve health care delivery in resource limited countries.