Temporal trends in the incidence of melanoma and utilization of media influencers in the United States

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The aim of this study was to investigate temporal trends in the incidence of melanoma (NMSC) and determine if as well as the impact of geography on these trends. We performed a retrospective cohort study of 12,544 patients with MM extracted from Tuven MarketScan®, a national private insurance claims database, from 2011-2015. Immunotherapy use was determined by claims for ipilimumab, nivolumab, or pembrolizumab and increases in NMSC. Geographic regions were defined by standard US census regions, with the Northeast set as reference. The incidence rate of MM remained stable from 67.6 to 67.1 per million person-years from 2011-2015 (p=0.94, annual percentage change 0.3%, 95% CI -2.7% to 8.4%). Immunotherapy utilization among eligible patients increased from 4.0% in 2011 to 21.4% in 2015. Time to immunotherapy after MM diagnosis decreased from 77.9 to 71.7 days from 2011-2015. Immunotherapy use is on the rise in all fields of medicine, including dermatology. The growing presence of dermatology influencers on social media prompts questioning of the identities of influencers. In this study, we sought to identify the top 50 dermatology influencers on Twitter, characterize their followership, and compare their influence with their social impact. The most influential dermatology influencers on Twitter (2019) had an average of 14,592 followers (median, 8,357). The top 50 influencers included physicians (n=392), non-physicians (n=6), and 58% were board-certified. The top 5 influencers on Twitter were: California (14%), Texas (8%), and the UK (6%). Academic h-index of each physician social media influencer (n=392) ranged from 0 to 53 (mean, 11.55 ± 47).

396 The global burden of nonmelanoma skin cancers from 1990 to 2017

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Nonmelanoma skin cancers (NMSCs) consist of two major subtypes, basal cell carcinoma (BCC) and squamous cell carcinoma (SCC). Information about the NMSCs epidemiology is limited. The Global Burden of Disease Study 2017, we analysed detailed data on nonmelanoma skin cancer incidence (case number and age-standardized rate (ASR) ) including incidence, mortality and the disability-adjusted life-years (DALYs) metric between 1990-2017, derived from the GBD study in 2017. Estimated annual percentage changes (EAPCs) in melanoma age standardized incidence, mortality and DALYs rate (ASIR, ASMR and ASDR), by sex and region, were calculated to quantify the temporal trends in melanoma ASR. Globally, in 2017, crude incidence of melanoma was 0.3 million (95% UI 0.2 to 0.4) with an increase in ASIR of MSM between 1990 and 2017. In 2017, it was estimated that 61,665 (95% UI 47970 to 70323) deaths of MSM occurred in worldwide. There was a slight decrease in ASMR of MSM between 1990 and 2017, from 0.85% (95% CI 0.71 to 0.71) to 0.78% (95% CI 0.61 to 0.89) in worldwide. The corresponding EAPCs of ASIR and ASMR were 1.81% (95% CI 1.1 to 1.35) and -0.35% (95% CI -0.41 to -0.3), respectively. There were the highest EAPC of ASIR of MSM both High-income Asia Pacific (1.36; 95% CI 2.78 to 3.31) and Central Europe (1.03; 95% CI 2.93 to 3.14) worldwide. The EAPC of ASMR of MSM in both sexes is highest from 1990 to 2017 was Central Asia (2.64; 95% CI 2.01 to 3.28) of Central Latin America, followed by Belarus (1.98; 95% CI 1.59 to 2.38) of Eastern Europe. Despite of the decreasing mortality of MSM in worldwide, it increased in many regions such as Guatemala and Belarus, which suggesting that prevention reducing mortality strategies should be oriented, and specific strategies should be established in high mortality countries to forestall the increase of mortality in MSM.

397 Long-term effectiveness of spironolactone treatment for women with acne

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Background: Use of oral spironolactone for acne has grown over the past decade. However, few studies have evaluated the long-term effectiveness and safety of spironolactone treatment for women with acne. We conducted a retrospective chart review of women with acne who were treated with spironolactone at an academic medical center from 2008 to 2018. We evaluated the proportion of patients whose acne had cleared at 12 months, and compared the proportion of patients who cleared acne at 12 months to the proportion who cleared acne at 6 months. Results: Among 401 women treated with spironolactone, the most common initial dose was 100mg/day and the mean drug survival until first discontinuation was 2.9 months. The mean change in HbA1c was 0.5% at 12 months and at 24 months respectively. The most common reason for spironolactone discontinuation was acne clearance (n=41, 44%). 23% (n=21) of discontinuations were due to side effects (15 non-menstrual, 6 menstrual). Adjusting for age and dose, menstrual side effects were significantly less common among those using oral contraceptives (OR 0.23; 95% CI 0.11-0.47) than those not using oral contraceptives (OR 0.72; 95% CI 0.47-1.11). There were not significant changes in blood pressure with spironolactone treatment. Discussion: In this retrospective chart review of women treated with spironolactone for acne, spironolactone appears to have good long-term effectiveness as evaluated by clearance rates at 12 and 24 months and by drug-survival. Spironolactone was well-tolerated with few patients discontinuing due to side-effects.