Disadvantaged groups may reduce health disparities related to skin cancer. Conclusions: There are substantial differences in HIT utilization of skin cancer patients without a bachelor’s degree were less likely to look up health information online, communicate with a healthcare provider by e-mail, and filled prescriptions electronically. Results: From 2011-2018, the proportion of patients who scheduled healthcare appointments online increased from 4.16% to 21.35%. The proportion of patients who accessed information online was significantly higher with a healthcare provider by e-mail, and filled a prescription electronically increased from 0.05 for all. Patients with income below 200% of the federal poverty level and patients without insurance were more likely to look up health information online, communicate with a healthcare provider by e-mail, or fill a prescription electronically (p < 0.05 for all). Conclusions: There are substantial differences in HIT utilization of skin cancer patients across sociodemographic lines. Interventions aimed at increasing HIT utilization among disadvantaged groups may reduce health disparities related to skin cancer.

Association of occupational exposures with disease manifestations in systemic sclerosis

Systemic sclerosis (SSc) is thought to be induced by an environmental trigger in a genetically predisposed host and leads to significant mortality from internal organ involvement. In this study, we compare the SSc disease features for different occupational exposures of SSc patients in Canada. Data on 1502 patients was extracted from the Canadian Scleroderma Research Group cohort over the years 2003-2019. Gender, occupational exposure history, symptom severity, antibody profile and mortality data were collected. Logistic regression models were used to determine clinical characteristics associated with each occupational exposure. Occupational exposures were reported in 494 patients, predominantly to organic solvents (3.07), industrial fumes (1.39), silica (1.01), heavy metals (9.37), asbestos (8.7) and epoxy resins (1.7). Mortality was more prevalent in males compared to non-occupational SSc (11.5 vs 1.6 male to female ratio). Silica exposure was associated with higher prevalence of diffuse SSC (OR 1.19, CI 1.08-1.32) and increased mortality (OR 1.15, CI 1.06-1.25). Exposure to organic solvents was associated with renal disease (OR 1.03, CI 1.01-1.08) and asbestos with increased mortality (OR 1.16, CI 1.06-1.26). In addition, industrial fumes and heavy metal exposure were associated with higher prevalence of interstitial lung disease (ILD), renal disease and mortality. Epoxy exposure was associated with IBD, renal disease, diffuse SSC and anti-RNA polymerase III antibody positivity. Consistently, lower frequency of anti-centromere antibody was noticed in patients exposed to silica, heavy metal or industrial fumes. This study revealed that SSc patients with previous occupational exposure to organic solvents, industrial fumes, silica, heavy metals, asbestos and epoxy resins are predominantly males and exhibit more severe disease phenotype and/or mortality. While effective workplace protection strategies are needed, it remains imperative to obtain a detailed occupational history in SSc patients to focus on secondary prevention and risk education.

Statistical study of adverse drug reactions, of patients with melanoma, treated with biological drugs

The aim of the study was to analyze ADRs from more innovative drugs used in oncological immunotherapy for the treatment of melanoma, in particular Nivolumab and Pembrolizumab. The ADRs were compared, detected by the analysis of medical records, and reported to the Pharmacy of the Hospital “Santa Maria alle Scotte” of University of Siena in the period January 2019-October 2020. Furthermore, the ADRs extracted from the Italian National Pharmacovigilance Network have been analyzed. The study population consisted of 263 patients, where 43 ADRs were reported, of which 37.21% is represented by ADRs in patients with melanoma. Melanoma patients treated with Nivolumab and Pembrolizumab globally showed a 28% of treated patients (of which 36% are treated with Nivolumab and 28% with Pembrolizumab). In patients treated for melanoma, there is a general prevalence of the male subject (66.14%), in line with literature data; in particular, 70% of melanoma patients are males and 68% of patients treated in this population. From the analysis of all treatments carried out for melanoma, 32.55% ADR was detected with Nivolumab and Pembrolizumab. By re-elaborating the ADRs data, it appears, therefore, that the serious reactions are 33.33% for Pembrolizumab and 62.50% for Nivolumab. According to the above-quoted adverse-sensitivity characteristics to the consultation system, lists at the time of the reporting of ADRs, in order to avoid differences in the reporting of similar ADRs, aimed at improving good clinical practice, of strategic drugs, for the management of serious pathologies such as melanoma.

Patients’ attitudes towards active surveillance for basal cell carcinoma

Basal cell carcinoma (BCC) is the most common cancer in the US. 30-50% of BCCs may be curable if treated when small. Most BCCs are managed surgically regardless of life-expectancy. More than 40% of patients with limited life-expectancy die within 5-years of their BCC treatment, rarely from skin cancer, and likely do not live long enough to benefit from their treatment. Active surveillance has been proposed for some of these patients. The objectives of the current study were to determine patients’ attitudes and concerns regarding active surveillance, and to evaluate the effect of an educational video on patients’ attitudes and concerns. We conducted a pre-post survey study of 203 patients in the dermatology clinic at the Minneapolis VA Medical Center from August 2019 to October 2020. An educational video on BCC was created, and reviewed/accepted by the Minneapolis VA IRB to ensure educational rather than coercive content. The primary study outcomes were change in the number of patients with concerns regarding BCC active surveillance, change in specific concerns, and the percentage of patients with active surveillance pre- and post-video. Significantly less respondents were concerned with their doctor monitoring their BCC post-versus pre-video (61% vs 48%, p = 0.0065). Most respondents felt comfortable, very comfortable, or neutral in participating in a study for active surveillance, and no significant differences found between pre- and post-video (73% vs 75%; p = 0.5517). Respondents were most concerned with tumor growth (54%) and metastases (40%). Post-video, significantly more patients were concerned with frequent doctor visits (0% vs 9% p < 0.0001) and making the wrong decision (15% vs 26%; p = 0.0070). No significant difference in comfort level with BCC active surveillance was noted between older (>75) versus younger (<75) respondents. Majority of patients are comfortable with active surveillance of BCC. Providing education on BCCs may alleviate patients’ concerns regarding active surveillance.