406 Dermatologist and patient perspectives on implementing cardiovascular risk prevention in the management of psoriasis: A qualitative study

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OBJECTIVE: There is need for the selection of a core set of outcomes that would at minimum be reported in trials of facial aging interventions. METHODS: A systematic review was performed for English-language randomized controlled trials and controlled clinical trials, using terms related to the appearance of the face. RESULTS: 112 surveys between August 2018 and June 2019; 32.1% were HC and 67.9% were patients. WC and 70.8% SLE. The survey elicited information on race, Fitzpatrick skin type, sunscreen type, SPF value, whether sub-

408 Sunscreen use and photosensitivity in lupus patients

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Ultraviolet radiation (UVR) exacerbates cutaneous lupus (CLE) and systemic lupus (SLE) symptoms. Patients are instructed to avoid UVR exposure and to use sunscreen daily. Most sunscreens contain organic UV filters that can penetrate skin, enter systemic circulation and cause unintended biological effects. There is little known about sunscreen use by patients or the determinants that drive its use. A survey was conducted to determine if the frequency of sunscreen use differed between patients with severe disease and healthy controls (HC) and if the type of sunscreen (organic or mineral) used correlated with experiencing adverse effects (AE) from sun exposure (sweat, flares, feeling sick). Subjects were recruited from clinics (RSRB# 35516) and dermatology practices (RSRB# 35516). We received 112 surveys between August 2018 and June 2019; 32.1% were HC and 67.9% were patients. WC and 70.8% SLE. The survey elicited information on race, Fitzpatrick skin type, sunscreen type, SPF value, whether sub-

409 Outcomes reported in clinical trials of facial aging: A systematic review

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OBJECTIVE: To identify outcomes that have been measured in clinical trials of facial aging interventions. METHODS: A systematic review was performed for English-language randomized controlled trials and controlled clinical trials, using terms related to the appearance of the face. RESULTS: 112 surveys between August 2018 and June 2019; 32.1% were HC and 67.9% were patients. WC and 70.8% SLE. The survey elicited information on race, Fitzpatrick skin type, sunscreen type, SPF value, whether sub-

410 Tape-strips capture gene-expression changes in moderate-to-severe atopic dermatitis patients treated with dupilumab

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411 Demographic and clinical factors associated with patient-reported remission in psoriasis

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Achievement of remission in psoriasis is a key goal for patients and clinicians, yet definitions of remission vary. Some treat-to-target initiatives in psoriasis have focused on degree of skin involvement, while others have also incorporated quality of life (QoL) measures. The goal of this study is to identify factors associated with patient-reported psoriasis remission. The National Psoriasis Foundation conducted a survey within a random stratified sample of 1,570 individuals with psoriatic disease in the United States. Participants provided demographics and were asked about a provider diagnosis of psoriasis, psoriatic arthritis, or both. Psoriasis duration, area of Extent of Psoriasis (EOP), a validated self-reported measure of body surface area (BSA). Individuals reporting BSA ≤ 3% were asked if they felt their psoriasis was in remission and provided information on comor-

412 Acceptable delay between diagnosis and treatment of melanoma, cutaneous squamous cell carcinoma, and basal cell carcinoma

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BACKGROUND: There is a paucity of literature regarding the acceptable duration of delaying treatment after diagnosing various skin cancers. OBJECTIVE: To gather expert opinion on the number of days acceptable to delay melanoma and non-melanoma treatment after biopsy-proven diagnosis. METHODS: American College of Mohs Surgery (ACMS) surveyed about the number of days that they would delay treatment for melanoma, basal cell carcinoma, squamous cell carcinoma, and in-person skin checks, based on the following circumstances: (1) they what they would want for a family member or close friend, (2) standard institution or office policy, (3) standard national policy; (4) in a pandemic when PPE is available; and (5) in a pandemic when PPE is unavailable. RESULTS: 189 participants completed the survey. For all skin cancer types, there was a multimodal distribution of responses in the number of days acceptable to delay treatment, and responses ranged from several days to nearly a year. Shorter delays were observed in response to more aggressive cancer types. CONCLUSIONS: There is significant heterogeneity in skin cancer experts’ opinions of the acceptable number of days to delay treatment for melanoma and non-melanoma. There is need for the selection of a core set of outcomes that would at minimum be reported in all future studies of facial aging.