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Balloon cell melanoma: A National Cancer Institute database analysis of patient characteristics and survival



Katrice M. Karanfilian, BS, Sara Behbahani, Rutgers University—New Jersey Medical School; Albert Alhatem, MD, Troy Karanfilian, W. Clark Lambert, MD, PhD, Rutgers University

Introduction: Balloon cell melanoma (BCM) is a very rare subtype of malignant melanoma, characterized histologically by large, round foamy cells. To our knowledge, no prior National Cancer Institute (NCI) Survival, Epidemiology, and End Results (SEER) database analysis has focused specifically on this type of melanoma. We aimed to analyze patient characteristics and survival of BCM.

Methods: The SEER database was queried for all cases of cutaneous BCM from 1975 to 2016. Patient characteristics were analyzed. Disease-specific survival analysis was performed using Kaplan-Meier and Cox regression analyses.

Results: Of a total of 114 cases of cutaneous BCM, 70 patients (61%) were male, 110 patients (93%) were white, and the majority (70%) were between the ages of 40 to 79. Thirty-seven patients (32%) presented with Breslow thickness of 4.00-mm. Treatment was surgery in 108 patients (95%). Three patients had radiation (2.6%); in two of these patients, the radiation was combined with surgery. Five-year-DSS was 88.6% (95% CI 81.7%-95.5%). There were no significant differences in survival based on age, sex, race, or treatment with surgery. Breslow thickness of >4.00-mm, distant stage, and primary site categorized as "other" were associated with worse survival. 4.0-mm and distant stage are associated with a worse prognosis.

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The importance of sun safety education in public schools



Anisha Guda, BS, UT Health San Antonio Long School of Medicine; Sandra Osswald, UT Health San Antonio

One in 5 Americans will develop skin cancer in their lifetime, but 80% of skin cancer is preventable. According to WHO, the majority of sun exposure occurs before the age of 18. Many schools in San Antonio are not educating students on this topic. Be Sun Safe is an innovative curriculum that we created that addresses this problem through a short powerpoint presentation that educates children, parents, and teachers in San Antonio regarding sun protection and skin cancer prevention. Ten presentations were given to elementary school students, parents, and teachers in San Antonio. 3rd and 5th graders who attended these presentations took a pre- and posttest that assessed their knowledge on sun protection and whether they use sunscreen. 106 students in 3rd grade and 95 students in 5th grade took the pre- and posttest. Both classes improved their score from the pre to the posttest, 3rd graders missed an average of 2.454 questions on the pretest and 2.121 questions on the posttest. Fifth graders missed an average of 3.290 questions on the pretest and 1.210 questions on the posttest. In addition, only 36% of 3rd graders and 16% of 5th graders claimed that they always use sunscreen. Overall, students improved their knowledge regarding sun protection by listening to the presentation. Of note, many of the students do not use sunscreen. It is imperative that children, parents, and teachers continue to be educated in San Antonio so that the next generation can protect themselves from the sun.

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Effectiveness and safety of oral dutasteride for male androgenetic alopecia in real clinical practice: A descriptive unicenter study



Sergio Vañó-Galván, Trichology Unit, Dermatology Department, Ramón y Cajal Hospital, Instituto Ramón y Cajal de Investigación Sanitaria; David Saceda-Corralo, MD, PhD, Servicio de Dermatología, Hospital Ramón y Cajal, Instituto Ramón y Cajal de Investigación Sanitaria; Oscar Muñoz Moreno Arrones, MD, PhD, Hospital Ramón y Cajal, Instituto Ramón y Cajal de Investigación Sanitaria, and Universidad de Alcalá; Rita Rodrigues-Barata, Carlos Morales, Rocío Gil-Redondo, Grupo de Dermatología Pedro Jaén; Caudia Bernárdez, MD, PhD, Hospital Ruber Juan Bravo, Madrid, Spain

Methods: A retrospective, monocentric and descriptive study was designed. Male patients with a confirmed diagnosis of male-pattern hair loss (MPHL) that have received oral dutasteride for at least 12 months were included. Therapeutic response was assessed by comparison of pre- and post-treatment clinical images by three independent dermatologists with expertise in hair disorders, using a 4-point scale (worsening, stabilization, mild improvement or marked improvement).

Results: In all, 307 patients with a mean age of 35.3 years (range 18-79) were included. Dutasteride was used in capsules of 0.5 mg at a dosage between 1 to 7 capsules per week, being 7 capsules per week the most frequent dosage (175 patients, 57%). Of the 307 patients, 265 (86%) received other concomitant therapies, mainly topical minoxidil (n = 204), dutasteride injections (n = 69), oral minoxidil (n = 63), oral finasteride (n = 39) and topical finasteride (n = 14). Adverse effects (AE) were observed in 20 out of 307 patients (6.5%). Eight patients (2.6%) required the discontinuation of the drug due to decrease in libido (n = 4), gynecomastia (n = 2), irritability (n = 1), and erectile dysfunction (n = 1). All these AE resolved after stopping the medication. Of the 42 patients (13.7%) that received oral dutasteride in monotherapy, 38 patients improved (90%), 10 of them (23.8%) presenting a marked improvement, 4 patients (9.5%) were stable, and no patients worsened. The clinical response was statistically associated with the use of higher dosages (4-7 capsules of 0.5 mg per week) of dutasteride (P = .013).

Conclusions: In conclusion, oral dutasteride is an effective treatment for MPHL with a good safety profile.

Commercial disclosure: None identified.

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Transitioning health needs in rural Panamanian communities



Anisha Guda, BS, UT Health San Antonio Long School of Medicine; Richard P. Usatine, Dawn Janysek, University of Texas Health Science Center San Antonio; Amr Arar, Matthew E. Milam, University of Texas Health, San Antonio; Sammira Rouhani

This project assessed the current state of health of three rural Panamanian communities and evaluated the effectiveness of care provided by annual global health trips. Data collected from prior trips determined that the incidence of *Sarcoptes scabiei* (scabies) in these communities had significantly decreased and the incidence of *Pediculus humanus capitis* (head lice) increased from 2016 to 2017. We hypothesized that we would observe a similar pattern in 2018. A global health team consisting of 5 medical students and one dermatologist provided health care services to the rural Panamanian villages of Cerro de Plata, Los Valles, and Cañazas over a course of 5 days. Clinic patients and children from local schools were screened for evidence of dermatologic pathology. Each diagnosis was confirmed by the attending physician and medical information was documented by the students. We observed a dramatic decrease in the incidence of scabies in Cañazas and neighboring communities. In 2016, 12% of all cases seen were scabies. In 2018, 2% of all cases seen were scabies. In addition, the incidence of lice is decreasing but continues to be an issue. In 2017, 13% of all cases seen were lice while 10% were seen in 2018. The incidence of scabies dramatically decreased due to several factors including continued community education of scabies prevention by annual global health trips, increased medications for local health care providers, and empowered health care workers that provided appropriate health care. Further investigation of the cause of scabies decrease with local providers is warranted.

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