

18367

Current sunscreen preferences of Australian women in 2019: A cross-sectional study



Elissa Tong, BMed, Royal North Shore Hospital; Kevin Phan, MD, Liverpool Hospital; Saxon D. Smith, MBChB, MHL, PhD, FACD, Discipline of Dermatology, Northern Clinical School, Sydney Medical School, University of Sydney, Australia

Background: Skin cancer is prevented with regular sunscreen use, which is more commonly undertaken by females. Preferences for cosmetic elegance, product performance and skin compatibility are highly quoted characteristics by consumers purchasing sunscreen online. Common barriers to sunscreen use include lack of cosmetic appeal, and there are now additional concerns regarding nanoparticles and the environmental effect of sunscreen.

Methods: We performed a cross-sectional survey-based study in August 2019 to assess current sunscreen preferences and barriers to using sunscreen in 1065 Australian adult female participants. An online questionnaire was utilised, and results were cross tabulated.

Results: Of 1065 participants, 726 (68.2%) cited SPF as one of the important factors in their choice of sunscreen, followed by brand (7.4%), and price (7.1%). However, only 442 participants (41.5%) reported SPF being the single most important factor in choice of sunscreen products, followed by price (14.1%) and skin compatibility (10.8%). The most frequently cited barrier to sunscreen use was greasiness (41.1%), followed by forgetfulness (34.8%). 8.2% of participants had concerns regarding nanoparticles in sunscreen products.

Conclusions: Australian women highly value SPF levels when preferencing sunscreen products. Price, brand, and skin compatibility are also important, with a portion of participants having concerns regarding nanoparticles in sunscreen products. Knowledge of consumer preferences assists dermatologists in making sunscreen product recommendations to their patients, to optimise adherence to sun protection behaviours.

Commercial disclosure: None identified.

18412

Utility of p53 immunohistochemistry in inflamed squamous lesions of the skin



Rosalynn Conic, MD, PhD, University of Maryland; Giovanni Damiani, Ayman Grada, Wilma Bergfeld

Background: Immunohistochemical staining for the p53 tumor suppressor protein is commonly used as an effective tool in characterizing malignant epithelial lesions. Inflamed seborrheic keratoses (SK) with reactive atypia present a diagnostic challenge as these benign neoplasms may have overlapping histologic features with well differentiated squamous carcinomas. This study evaluated the utility of p53 immunohistochemistry in distinguishing benign and malignant proliferative skin lesions.

Methods: Eighty-two cases were identified for study and included cases diagnosed as invasive squamous cell carcinoma (SCC), SCC in situ, inflamed SK, and noninflamed SK. Immunohistochemical staining for p53 was performed on all cases, and the pattern of nuclear staining within the keratinocytes was classified as negative, basal only, basal and suprabasal, or full thickness.

Results: The majority of invasive SCC (62%) and SCC in-situ (75%) demonstrated full thickness positivity for p53. The majority of noninflamed SKs (71%) showed basal-only staining; and the predominant patterns in the inflamed SKs were basal only (45%) and basal and suprabasal (50%), with only 5% demonstrating a full thickness pattern.

Conclusions: p53 immunohistochemistry can be used as an adjunct tool to solve the ambiguity in histologic differential diagnosis between SCC and inflamed SK.

Commercial disclosure: None identified.

18407

Improvement of short-term outcome of mild to moderate atopic dermatitis using a combination treatment of crisaborole ointment 2% and a concomitant topical corticosteroid over a 8 week period



Todd Schlesinger, MD, Clinical Research Center of the Carolinas; Chudi Nduaka, Tuan Elstrom

Background: Atopic dermatitis (AD) also known as atopic eczema is a chronic inflammatory skin disease that is characterized by intense itching and recurrent eczematous lesions. Although it most often starts in infancy and affects two of ten children, it is also highly prevalent in adults. Current topical treatments for AD have not changed in over 15 years and are associated with safety concerns. In AD, overactivity of phosphodiesterase 4 (PDE4), leads to inflammation and disease exacerbation. Combination therapy is known to be superior to monotherapy and is commonly used in other skin diseases. It has been shown that the addition of a corticosteroid (triamcinolone acetonide ointment, 0.1%) to other therapies have been shown to improve the efficacy and decrease the skin irritation normally associated with other therapies alone. By combining medications with a different mechanism of action and safety profile, efficacy can be enhanced and/or safety improved. This study (n = 16) is of the efficacy and safety of crisaborole ointment 2% when combined with a topical steroid (triamcinolone acetonide ointment, 0.1%) for the treatment of mild to moderate atopic dermatitis in subjects 2–79 years of age. Subjects were randomized to crisaborole alone versus combination treatment.

Results: Percentage of subjects with an Investigator Global Assessment at week 8 of clear (0) or almost clear (1) with a ≥ 2 grade improvement from baseline Reduction in Atopic Dermatitis Severity Index (ADSI) Score Improvement in SCORing Atopic Dermatitis Index Reduction in Pruritus.

Commercial disclosure: Pfizer-sponsored investigator-initiated research.

18423

Exploring the role of tattoo artists as community health partners in Texas and Louisiana



Anna Sutherland, MD, Carmen Carlos, BA, Emily Powell, MD, Department of Dermatology, Tulane University; Andrea Murina, Tulane University School of Medicine

Certification standards for tattooists vary by state, but typically include a 1–2-year apprenticeship accompanied by a written examination. However, only 56.1% of artists in New York City, for example, received training on skin conditions. Those that did, were more likely to provide informational handouts and inquire about skin conditions. There is a need for tattooists to be informed about adverse skin reactions and possible complications related to skin conditions, and we sought to investigate the ways physicians and tattooists can better work together and identify areas which, if addressed, could strengthen tattooists' ability to be community health partners. Tattoo artists in Louisiana and Texas were surveyed about the details of the skincare instructions they provide clients, their knowledge of skin conditions and cutaneous eruptions, and their tendency to refer adverse reactions to physicians. We received 12 responses from artists in New Orleans, Baton Rouge, Houston, and Fort Worth. Respondents reported being asked to evaluate adverse reactions as often as daily with the majority asked monthly, indicating that tattooists may encounter adverse skin reactions before physicians. Of the artists surveyed, 66.7% received formal training (eg class, reading material) about tattoo-related skin conditions. Respondents stated they would only sometimes refer to a physician in the case of an adverse reaction, indicating that educating tattooists may improve care of adverse reactions. A majority of artists desire more education on skin reactions. Finally, a handout for tattooed clients may improve outcomes given that a portion of artists are not providing any written information.

Commercial disclosure: None identified.