

# CARE DEFICIT ASSESSMENT SERIES

The AMA asked some of our physician experts how their patients have been impacted by the COVID care deficit. In this series, physicians share insight from the frontlines and the opportunities they see for improvement.

It will take all of us, working together, to recover from the care deficit. We hope to generate discussion among physicians, patients and our health system partners to help find a way forward.

# **ISSUE 5 DERMATOLOGY EXECUTIVE SUMMARY**

#### The Care Deficit

The care deficit that has severely impacted dermatology patients and has led to dangerous delays in diagnosis and treatment. This has left many Albertans living in pain and, in some instances of skin cancer, these delays in care may shorten lives. Although physicians are doing all they can to help patients navigate the system and receive the care they need, it is difficult to meet the needs of patients in a timely, effective way.

#### **Skin Cancer**

Most cases of skin cancer are curable if they are caught early and treated quickly, but the care deficit has had a dramatic impact on early detection and resulted in dangerous delays in essential treatment.

- Dermatologists report an increase in people presenting with advanced stages of disease due to a delay in diagnosis.
- During waves of COVID, while some patients avoided seeking care because of fears of contracting COVID-19, others had difficulty seeing their family physician, who would have noted changes and facilitated referrals to specialists.
- In some parts of Alberta, patients have begun turning to <u>emergency departments for care</u>, including for dermatology issues, as they no longer have or can't find a family doctor of their own.
- The number of biopsies being done to detect skin cancer dropped dramatically in COVID waves, which means many skin cancers will progress further and leave patients with fewer or ineffective treatment options.
- Physicians report seeing multiple surgeries that required aggressive procedures with wide excision resections due to advanced disease. The lack of operating room times resulted in some patients being put on chemotherapy in an attempt to control disease progression prior to surgery.
- Many patients are triaged based on the size of their lesion and pathology report after biopsy, although
  delays in care can result in changes in both the diagnosis and the treatment plans before treatment
  begins.
- Resources that help people understand what to watch for, although helpful, leave too much responsibility in the hands of patients who are not trained to assess changes or risk.
- Although some physicians adapted to virtual appointments, many elderly patients have found it challenging to use Zoom technology, making it difficult to do skin exams by video.



### **Other Skin Conditions**

- Other important areas of skin health such as contact dermatitis testing, wound care, pediatric
  dermatology, cutaneous lymphoma and immuno-dermatology are also facing serious delays in
  diagnosis and treatment.
- Most of these subspecialty areas in dermatology are run by single physicians, and even small changes in access result in significant delays in patient care and access.
- Physicians working in these areas have seen their wait times increase from four months to over a year.
- There are also many downstream effects. For instance, delays in testing for metal allergies will impact a patient's eligibility for certain medical procedures, including cardiac procedures that require patch testing.
- Dermatologists have also been called upon to help understand issues such as the <u>pediatric multisystem</u> <u>inflammatory syndrome</u> temporally associated with SARS-CoV-2 infection, which is often difficult to distinguish from <u>Kawasaki disease</u>.
- COVID-19 has also created new challenges for the management of patients with cutaneous disease
  who may be receiving systemic immunosuppressive therapy, such as corticosteroids and biologic
  agents.
- Increased wait times have amplified the fear and frustration of many patients, who have become increasingly irritable and anxious because they mistakenly believe physicians can influence and increase capacity in the system.
- The resulting pressures have exacerbated the stress and burnout many physicians are experiencing.

# **Short-Term Strategies, Work-Arounds and Solutions**

- Alberta's dermatologists have been attempting to address the delays in care by increasing the number of hours worked, but this is unsustainable and has led to physician burnout.
- Physicians have been working to advocate on care deficit delays by alerting decision makers and the public of the urgency of the backlog and the need for more health care resources.
- Physicians have adapted to offer virtual care appointments, using video whenever possible to assess lesions and prioritize surgeries. When video is not an option, physicians have asked patients to submit photos in advance and then connect with them via phone appointments.
- Efforts have been taken to educate and counsel patients about the various precautions taken in surgical centres to provide safe care and minimize transmission of COVID-19.

# What's Needed in the Long Run

- Create central access and triage programs to ensure most urgent patients are prioritized and directed to the first available dermatologist/surgeon.
- Ensure fair and reasonable remuneration for dermatologists.
- Screening programs staffed by family physicians with additional training and experience would help ensure the most urgent and appropriate patients are seen first. This would likely provide the greatest benefit in regional centres.
- Review the decisions that led to clinic and surgical centre shutdowns during the pandemic. These lessons will allow us to prepare and plan for future health care crises.
- Integrated EMRs would allow for more rapid referrals.
- Help train personal care aids who work in home care or in supportive living facilities to identify suspicious skin lesions on patients.



## **Resources for patients**

We have compiled a list of resources for patients, families and caregivers. We hope that it will be helpful. The list is not exhaustive, and the AMA is not associated with the delivery of any of these services.

More information is available in the <u>Detailed Overview</u>.

Thank you for your interest in this issue!

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