Patient Education Pearls

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Overview

• Patient Education Philosophy
• What works for me
• Sun Protection
• Self Skin Exams
• Vitamin D

DOCTOR = TEACHER
• noun - a learned or authoritative teacher
• Origin: Latin, docere
• Same root as docent (teacher at a museum or university)

Teach from your heart
• People FORGET exactly what you SAID
• People FORGET exactly what you DID
• People REMEMBER exactly how you MADE THEM FEEL

Patient Education
• The Art of Medicine
• Performance Art
• Individualized for each patient
• Not reimbursed directly for time
• Train staff as education extenders

Staff Educators
• Some are naturals (KISS)
• All improve with practice
• Supervise and polish, 3 months
• Seasoned staff teach new staff
• New staff present to me and fine tune, before educating patients
Stay Current
Each spring I update “Sun Precautions” handout after AAD and Mohs College meetings
Happy to share, call me for updates if you like
Read newspapers, magazines, web

Sunscreen
• “an ounce of sunscreen can save a pound of flesh, or even a life”
• BUT not the primary defense
• AVOIDANCE is best
• PROTECTIVE CLOTHING is next
• SUNSCREEN is the daily backup

Sunscreen Use
- One ounce will cover one adult in a bathing suit, ONCE!
- Repeat every 1-2 hours, and you will go through a 4 ounce bottle in one day! (vs all summer)
- 20 minutes prior to exposure

Sunscreen Use
• AUSTRALIAN STUDIES:
  • DOUBLE application vs. too thin (0.5 vs. 2.0 mg/cm2) and skip spots
  • DAILY vs. episodic

Sunscreen Use
• Topical medications FIRST
• Combination products: reapply? (moisturizer, makeup, DEET)
• Sequence: moisturizer 1st, sunscreen 2nd, makeup 3rd

Sunscreen Use
• Insufficient application
• Infrequent reapplication
• “Waterproof” is a big fat lie!
• Water resistant = effective after 4 periods of 20 minute immersion (no towel at test sites!)
**Sunscreen Safety**

- PABA = contact allergies
- Less effective derivatives (Padimate O) = less ACD
- 17 active ingredients in USA (OTC drugs)
- 34 in Australia (cosmetics)
- 28 in Europe (cosmetics)

**Sunscreen Safety**

- FDA proposal (8/27/07) not yet enacted (soon?)
- Limits SPF to 50+ (UVB) (5%)
- Adds a 4 star rating (UVA) (95%)
- Improved usage instructions
- Approves new combinations

**Chemical Sunscreens**

- Chemical = Organic
- Must apply 20 to 30 minutes before exposure
- Filter UVB by absorption/conversion to infrared energy
- Often poor UVA protection
- Variable photostability

**Chemical Sunscreens**

**Physical Sunscreens**

- Physical = Inorganic
- Zinc oxide, titanium dioxide, iron oxide
- Scatter and reflect UVR
- Much better UVA protection
Physical Sunscreens

- Microsized ZO and TD
- Nanotechnology (10-50 nm)
- Australian govt review concluded safety, no penetration of stratum corneum (Therapeutic Goods Association, 2006)

Self Exams

- “Ugly Ducklings”
- Perform monthly, with help
- On birthdate each month
- Put on “Birthday Suit”
- Spouse helps, attends derm appts if possible, to learn tips and evaluate/discuss worrisome spots

Vitamin D

- Discrepancies and controversy
- Need more clinical studies (most are just epidemiological)
- Need to control for latitude, season and diet
- For now: supplement, don’t tan!
- USDA: 1000 IU/day for adults

Vitamin D

- Higher risk for insufficiency:
  - Elderly
  - Housebound
  - Obese
  - Darker skinned
  - Photosensitive
  - Northern latitude residents

SUMMARY

- Seek the shade
- Minimize mid-day exposure
- Use protective clothing, wide-brimmed hats, sunglasses
- Use effective sunscreen, applied thick/double layer, daily, reapply
SUMMARY

• “SLIP, SLAP, SLOP”
• (SHIRT, HAT, SUNSCREEN)
• Protect daily, self exam monthly, derm exam for changing/new spots and as needed by history.
• Vitamin D supplement (1000IU)