Home phototherapy: improving access to dermatologic care

INTRODUCTION

Psoriasis (PS) and atopic dermatitis (AD) affect 3.2% and 7.3% of the adult population in the United States, respectively.

Phototherapy is an effective and economic treatment for AD and PS with few side effects. However, phototherapy clinics are available in only 11% of counties in the United States. This can create substantial patient burden, as treatment regimens often require patients to visit the clinic several times a week.

At URMC, we have created a home phototherapy program in partnership with Excellus BlueCross BlueShield to provide patients with phototherapy devices at home at reduced or no cost.

The objective of this study is to determine patient-reported disease, quality-of-life, and treatment satisfaction outcomes from our home phototherapy program.

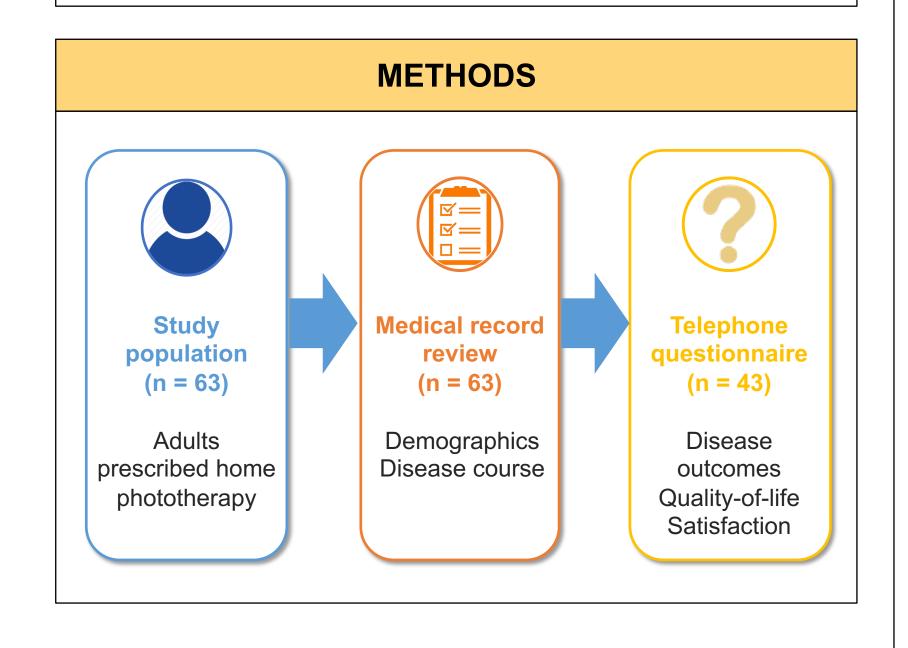


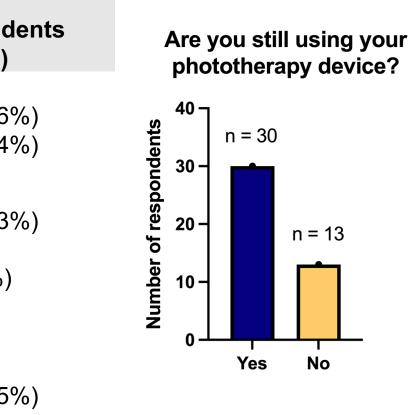
Table 1. Demographics of Study CohortAll (N = 63)Survey		
	All (N = 03)	respondents (N = 43)
Sex, n (%)		
Male	23 (36.5%)	14 (32.6%)
Female	40 (63.5%)	29 (67.4%)
Race, n (%)		
White	56 (88.9%)	41 (95.3%)
Black	2 (3.2%)	0
Other	4 (6.3%)	2 (4.7%)
Unknown	1 (1.6%)	0
Disease, n (%)		
Psoriasis	35 (55.6%)	23 (53.5%)
Atopic dermatitis		11 (25.6%)
Other	14 (22.2%)	9 (20.9%)



and generalized (right) dermatologic diseases. (www.Daavlin.com)

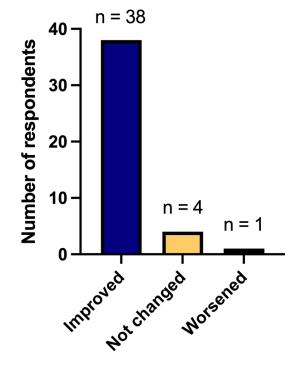
Fatima Bawany MD, Julie Ryan Wolf PhD MPH, Francisco Tausk MD Department of Internal Medicine and Department of Dermatology, University of Rochester Medical Center

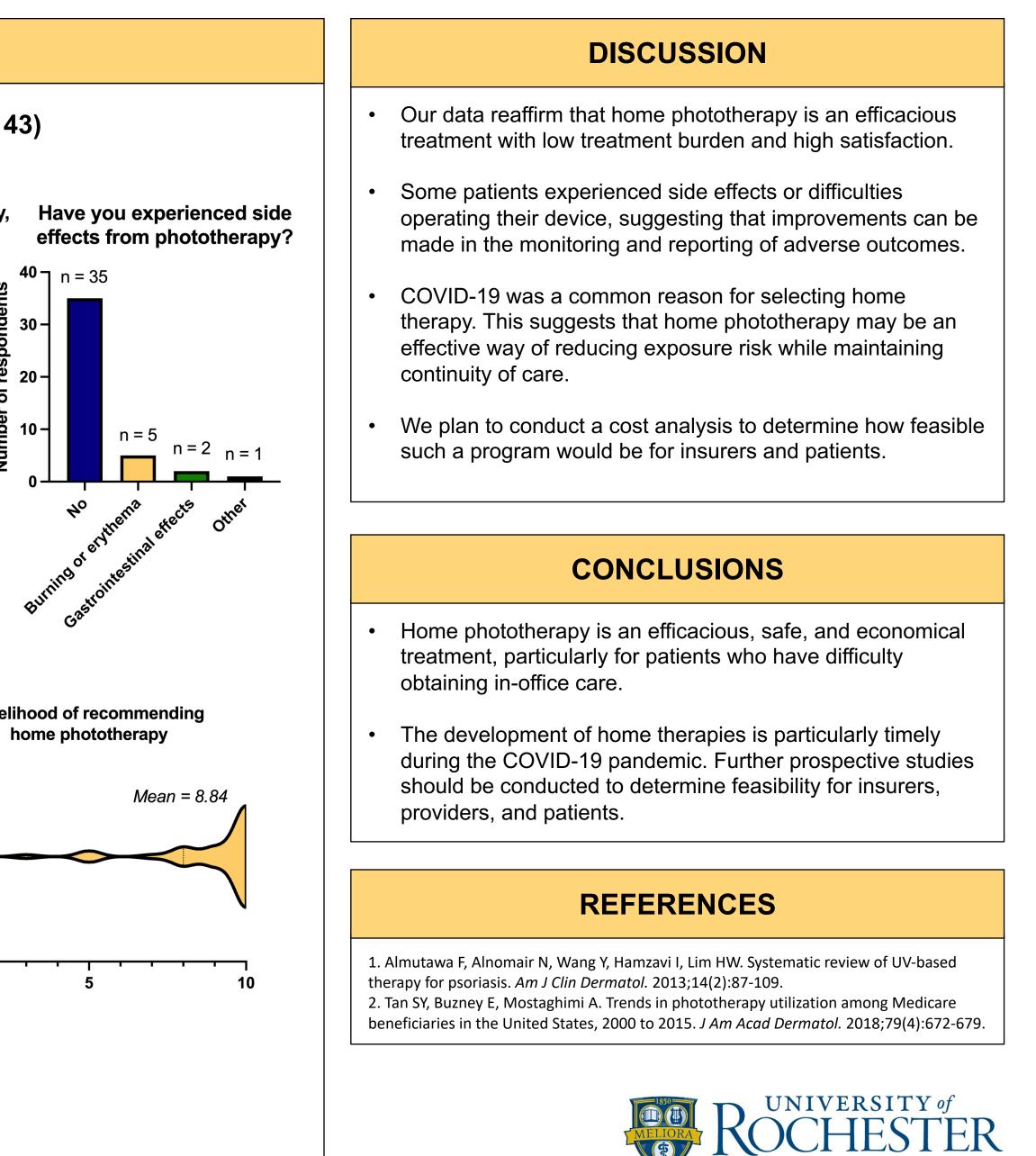
RESULTS



Survey responses (N = 43)

Since initiating home phototherapy, has your skin problem...?





Reasons for selecting home phototherapy instead of in-office phototherapy

