

A Newsletter for members of the Texas Dermatological Society www.texasdermatology.org Summer 2019



Send news of your recent appointments, accomplishments, announcements, etc.

We are unable to reprint abstracts or published articles; however, we will list the citation of any articles that were published in a peer-reviewed journal.

Send information to audrey.nelson@texmed.org for inclusion in the next newsletter.



President's Message

When I moved back to Texas after residency, I was fortunate to have the guidance of Dr. William R. Holder. He remains one of the most brilliant dermatologists I have ever met. I was blessed having him as my mentor and friend. He advised me early to join and become active with the Texas Dermatological Society (TDS). I can honestly say that it has culminated into me becoming your new president. I am excited, humbled and honored to lead

this wonderful society of amazing individuals.

This century old society is a fantastic place to reconnect with friends and establish new relationships with colleagues. I want to thank our support staff, especially Laura Madole, our TDS Executive Director, for their contributions to our group. Their efforts along with our past leaders, as well as your membership and support, have led to us to become a beacon of excellence among state societies. As such, we have received numerous model state society awards from the American Academy of Dermatology. Faculty and residents provide our members with outstanding content each and every meeting. As an added bonus: with just two meetings a year, almost all of the requirements for CME are met, including those pesky ethics hours. Please help grow our society and get involved with our push for more members by encouraging your colleagues and friends to join the TDS.

I am happy to announce the news that we are moving forward with a project started by our previous president, Dr. Allison Readinger. We are joining forces with the AAD to support an Adopt-a-Shade program to a deserving school that needs our help, I only wish that we could have supported more of the applicants. The school that the TDS will sponsor in 2019 is 'Veterans Memorial Elementary School in Roma, TX!' To assist in sponsoring this endeavor, we will be having a fun TDS "Bar Crawl" in lieu of the typical welcome reception at our next meeting. Please look for information in the upcoming meeting brochure in regards to this. I hope that many of you will come out, enjoy nature (with sunscreen/photo protection) and contribute to this awesome program.

We live in interesting times and the TDS may call on you to get involved by contacting your local politician regarding issues that are important to dermatologists and our practices. You may think your voice is not heard, but every single one of your voices counts. Please assist us to ensure that we stay in front of important legislative directives that affect our future.

I look forward to seeing everyone in San Antonio. If we don't know each other, please say hello as I would love to meet you. I am looking forward to the TDS having another successful year.

Page 2

Dermatologist

Legislative Update by Eric Woomer

After 140 days of work, Texas legislators concluded the 86th biennial legislative session with a streak of high-profile bipartisan bills sent to Governor Greg Abbott's desk, while avoiding the many pitfalls that threatened to derail their efforts. In contrast to the high-profile feuds which highlighted the previous session, the legislature passed multiple top-priority bill providing big wins on both sides of the aisle. While not short on controversy, the session was historically productive, addressing issues ranging from school finance reform, to property tax reductions, and disaster preparedness.

The final budget, which sets spending levels for the 2020-2021 biennium, totaled \$250 billion in federal, state, and local spending. Highlights of the bill include \$94 billion in school funding, including an overall increase of \$6.5 billion, with an additional \$1.6 billion earmarked for teacher pay raises; \$5 billion in funding to buy down property tax rates across the state; and \$84 billion for health and human services programs.

In an effort to curb the growth of local property taxes, the legislature approved language effectively capping the amount local governments can increase tax rates without seeking voter approval. Cities and counties are limited to increasing their property tax rates by 3.5% annually before triggering a voter referendum on the increase. School districts are now similarly capped at annual increases of 2.5%.

The legislature also meaningfully addressed school finance reform by providing \$6.5 billion to improve public schools and boost teacher salaries, and lowering school district taxes by \$5.1 billion. This effectively increases overall funding per student and reduces necessary reliance on the "Robin Hood" system. Additionally, the bill includes full-day pre-K for eligible students, incentives for dual-language and dyslexia programs, and provisions to develop teacher merit pay systems.

In the wake of Hurricane Harvey, lawmakers prioritized implementing recovery efforts and developing infrastructure to better prevent future flooding. To do so, the legislature approved a withdrawal of \$1.7 billion from the state Rainy Day fund, directed to the creation of the Flood Infrastructure Fund, a dedicated fund specifically designated to mitigate flood risks, and the Texas Infrastructure Resiliency Fund, which is made up of four separate accounts addressing specific disaster concerns.

Following the tragic school shooting at Santa Fe High School in 2018 and a rash of school shootings across the country, the legislature enacted a sweeping school safety initiative. The legislation includes provisions requiring specific training for school resource officers, strengthening mental health initiatives in schools, setting requirements for classroom access to electronic communications in the event of an emergency, and the creation of teams to identify possibly dangerous students.

As part of nationwide efforts to reduce the use of tobacco products, the legislature passed an increase to the legal age to buy tobacco. Under the legislation, the legal age to purchase tobacco has been raised from 18 to 21 throughout the state, with an exception for military personnel. Texas became the 14th state in the country to raise the legal tobacco purchasing age to 21. Among the bills that directly impacted the practice of dermatology, here is a quick rundown of key bills we were involved with:

Authored by Senator Hughes, SB 2366 was an effort to reign in the unregulated practice of medspas given that many of these operate without appropriate physician oversight and supervision. The legislation provides a definition of medical spas and 'false, misleading, or deceptive acts or practices,' as well as setting posting requirements for medical spas, sets complaint reporting standards, and allows for recovery of awards in court actions against medical spas pursued by the consumer protection division.

The bill was broadly drafted that could have created many unintended consequences, and ultimately did not pass. However, the Texas Medical Board (TMB) is presently considering additional rules regarding the ownership structure of medspas and the delegation of authority to perform nonsurgical medical cosmetic procedures.

Authored by Rep. Klick, HB 1792 would expand the scope of the practice for an advanced practice registered nurse authorized to work independently include ordering, performing and interpreting diagnostic tests; formulating primary and differential medical diagnoses and advanced assessments; and treating actual/potential health problems. The bill would have significantly altered the oversight role of physicians and was opposed strongly by the House of Medicine. It ultimately did not pass.

Authored by Rep. Paddie, HB 1504 continues the TMB, amends the Board's licensure and enforcement processes, establishes a radiologist assistant certificate, and updates training for other boards.

HB 1532, authored by Rep. Meyer, requires the TMB to accept and process complaints made against nonprofit health organizations in the same manner as complaints made against health professionals. The bill also would require these organizations to develop anti-retaliation policies for physicians and submit biennial reports to TMB.

HB 2174 by Rep. Zerwas deals with the Texas Controlled Substances Act, to protect against prescription drug misuse and diversion. It requires practitioners to prescribe controlled substances electronically, limiting opioid prescriptions to a tenday supply for acute pain requiring practitioners to complete continuing education related to prescribing and dispensing opioids. The bill includes a number of exemptions to the electronic prescribing mandate.

Authored by Rep. Walle, HB 2261 boosts the amount of money a physician could receive under the physician education loan repayment program by \$5,000 each year. This would bring the total amount of repayment assistance available to physicians through the program to \$180,000. The bill would apply only to physicians who established eligibility for loan repayment assistance on the basis of an application submitted on or after September 1, 2019.

The AAD Advisory Board had a great meeting this year in Washington, D.C. We discussed and passed several resolutions at the meeting, many of which dealt with the AADA's involvement in addressing drug-pricing concerns. The AADA has had a voice in several pieces of legislation that are currently being discussed addressing the recent exorbitant hikes in drug prices by increasing transparency and competition in the market. Stay tuned for updates on that front! Here are some other updates from the Academy and ways that you can get involved:

- AAD Committee Applications: 2020 AAD Committee Applications are open. If you have an interest in getting involved at the Academy level, this is a great way to do it! Applications can be found here: <u>https://www.aad.org/applications/cctf</u>
- Drug Shortages: The AADA is looking for Members who are experiencing a shortage of lidocaine or lidocaine with epinephrine please visit the AAD's website for more information. The AADA plans send a letter to the head of the FDA Drug Shortage Task Force to continue to highlight the severity of the shortage and call for the agency to include the drug on the proposed essential drugs list. The AAD/AADA has also formed a committee to address Drug

by Catherine Harrell, MD

Shortages, so please let them know if you hear of any other drugs in short supply.

• AADA Legislative Meeting in Washington, DC: As always, this is a very unique experience and opportunity to meet with your Congressional Leaders! The more of us that attend from Texas, the more representatives that we have the opportunity to meet with one-on-one. I highly encourage you to attend this meeting at least once. It is encouraging to see what we can accomplish when we speak up! Dates are Sept 8-10th in Washington, D.C. Please email Laura Madole at laura.madole@texmed.org if you are interested, as TDS has generously offered to pay for the meeting registration/hotel for the first 10 members to sign up! There is also a resident scholarship available through the AADA.

I will be handing over the baton of AAD Advisory Board Representative to Dr. Angela Moore, who will do a wonderful job in this role. Please let her know if you have any issues or concerns that you feel need to be addressed at the Academy level, and she can assist in developing and presenting a resolution to the Advisory Board.

Have a wonderful summer!



Dr. Cloyce Stetson and Dr. Allison Readinger

TDS 2019 Robert G. Freeman, MD Mentoring and Leadership Award

The fall 2019 TDS Mentoring and Leadership Award was presented to Dr. Cloyce Stetson at the spring 2019 conference in Houston, TX.

Dr. Stetson is the Dermatology Residency Program Director at Texas Tech University Health Sciences Center in Lubbock, TX. His contributions to the dermatology residents throughout the years has made an immense impact on the profession as a whole. Congratulations Dr. Stetson on this well-deserved award!

LEGISLATIVE Continued from page 2

Building upon the legislation passed during the 85th Session regarding maintenance of certification, SB 1882 by Sen. Buckingham requires hospitals to provide voting physician members of a medical staff with information on how to request and hold a vote to require maintenance of certification.

Authored by Sen. Hancock and Rep. Oliverson, SB 1264 prohibits balance billing to health benefit plan enrollees, expands the Texas Department of Insurance mediation program between health benefit plans and out-of-network providers that were facilities, creates an arbitration system between health benefit plans and out-of-network providers that were not facilities, and requires health plans to cover certain out-of-network services at the usual and customary rate.

It is always my pleasure to serve the Texas Dermatological Society at the Texas Legislature. Please feel free to contact me with any questions or concerns you may have.

Page 4

DALE TDS Fall Meeting Sept. 27-28, 2019 HYATT HILL COUNTRY RESORT AND SPA

TDS Room Rate: \$229 Phone: (210) 647-1223

Be sure to mention you are with the TDS to receive this discounted rate! Rooms are available for booking now and will be at the special rate on the first come, first serve basis.

Bring your families and come join your TDS colleagues for a fantastic meeting at the Hyatt Hill Country this fall! The program is complete and the TDS thanks Drs. Wendi Wohltmann and Sandra Osswald for their hard work putting together an amazing schedule! Speakers include Drs. Dirk Elston, Phoebe Rich, Jane Grant-Kels, Melissa Piliang, Vivian Bucay, Shannon Buck, Jim Neiner, Emily Wong, Christopher Edens, Whitney High, Emily Becker, John Browning, Lucia Diaz and Shannan McCann!

We can't wait to see you there!

Fall Annual Meeting Highlights



1st Annual TDS Bar Crawl, Benefitting the Adopt-A-Shade Program!

The TDS had joined forces with the AAD to support the "Adopt-A-Shade" program for a deserving school that needs our help! The TDS has selected, and will sponsor a shade for the 'Veterans Memorial Elementary School in Roma, TX." Dr. Conner Chan, TDS President, will travel to Roma, TX on September 12th for the dedication ceremony where a plaque will be placed honoring the TDS for the support.

To assist in sponsoring this endeavor, and hopefully many more in the future, the TDS will be having a fun 'Bar Crawl' event in lieu of the standard welcome reception at the next meeting this fall. Participation in the bar crawl will be \$25 and all donations will be put towards shade structures for children in Texas. The donation will also give you access to the different stations along the bar crawl and you'll get a 2019 TDS Bar Crawl T-shirt!

Come out, enjoy nature and your friends and contribute to this awesome program!

1st Annual TDS Art Show!

The TDS will host its first annual member art show at the fall 2019 meeting. Are you a photographer? Painter? Sculptor? We would love to see your work and share with all TDS colleagues and attendees in San Antonio!

All art submitted should be flat pieces if possible. Members can bring the art piece, as well as a description and we will display them at the TDS member lunch on Friday, September



27th through the PM break with exhibitors. Feel free to place your art in the area for viewing anytime during the lunch, we can't wait to see what you bring!

Be sure to mark on the registration form your interest in the art show, and please include a brief description of the piece(s) you'll be bringing to display!

TDS Future Partner Supporters

Thank you to the following members who contributed to the "Future Partner" program:

Eric Kraus, md

Kathleen Kroger, MD

Amir Aboutalebi, MD Donna Adam, RN-DNC Kirstin Altman, MD Terry Barrett, MD Cecilio Enrique Batres, MD Alma Berlingeri-Ramos, MD Lindsay Bicknell, MD David Butler, MD Conner Chan, MD Melissa Chiang, MD Mara Dacso, MD Georganna Davis, MD Ronald Davis, MD Dayna Diven, MD Susan Dozier, MD Kathryn Durham, MD Laura Fite, MD Robert Fox, MD Carlo Gavino, MD Bernard Gibson, MD Bartley Gill, MD William Gilmore, MD Michael Graves, MD Emily Grimshaw, MD Ashley Group, MD Catherine Harrell, MD Ryan Hick, MD Leisa Hodges, DO Joel Hyman, MD Erica Kelly, MD

Keagan Lee, MD Byron Limmer, MD Rachel Limmer, MD James McCarty, MD Bruce McDonald, DO, FAOCD Anh Van Nguyen, MD

Kehinde Ogunmakin, MD Matthew Petitt, DO Sarah Pinney, MD Sharon Raimer, MD Ronald Rapini, MD Allison Readinger, MD Samantha Robare, MD Robin Roberts, MD Russell Rowe, MD Mary Shepherd, MD, PhD Jerald Sklar, MD Christopher Stroud, MD Leigh Sutton, MD William Tausend, MD Travis Vandergriff, MD Thank you to our generous sponsors from the 2019 annual meeting!

GOLD SUPPORTERS

Abbvie Janssen Biotech, Inc. Sagis Diagnostics Sanofi Genzyme/ Regeneron

SILVER SUPPORTERS

Amgem Galderma Laboratories, LP Lilly USA, LLC Mayne Pharma Pfizer, Inc. UCB, Inc.

Dermatologist Articles & Publications Page 6

Members in the News

Paul Friedman, MD, was recently honored with the prestigious Leon Goldman Memorial Award. This distinctive recognition is given annually by the American Society for Laser Medicine & Surgery to a practicing physician who has demonstrated longterm excellence in patient care, research, or education relating to the field of medical laser treatments. Read more about this award <u>here</u>. Dr. Friedman was also invited to present a lecture while accepting the Award on March 29, 2019 at the ASLMS Annual Conference in Denver, during which he shared a number of stories about how lasers have allowed him to change the lives of many individuals. See presentation <u>here</u>.

Ade Adamson was awarded a Dermatology Foundation Public Health Career Development Award. See here: <u>CLICK</u>. Ade Adamson is also opening up a Pigmented Lesion Clinic at UT Austin Dell Medical School this fall for patients at high risk for melanoma.

PUBLICATIONS

Christopher Haley, MD

A 22-Year-Old Man With Painful Vesicles on His Flank. Haley CT, Tyring SK. JAMA. 2019 Mar 4. doi: 10.1001/jama.2019.0107.

Ramya Vangipuram, MD

The efficacy of omalizumab in Cutaneous Mastocytosis: A case series.

Hinojosa T, Lewis DJ, Vangipuram R, Safeer L, Mui UN, Haley C, Konoplev S, Tyring SK. Dermatol Ther. 2019 May;32(3):e12848. doi: 10.1111/dth.12848. Epub 2019 Feb 20. AIDS-Associated Malignancies.

Vangipuram R, Tyring SK. Cancer Treat Res. 2019;177:1-21.

Zeena Nawas, MD

Antiviral Drugs Nawas Z, Nguyen QG, Sanber K, Tyring SK Fitzpatrick's Dermatology, 9th edition, pp.3493-3516; 2019.

Ngoc Mui, MD

Identification of Novel Autoantibodies Associated With Psoriatic Arthritis.

Yuan Y, Qiu J, Lin ZT, Li W, Haley C, Mui UN, Ning J, Tyring SK, Wu T.

Arthritis Rheumatol. 2019 Jun;71(6):941-951. doi: 10.1002/ art.40830. Epub 2019 Apr 6.

Ravi Patel, MD

Topical Diacerein Ointment for Epidermolysis Bullosa Simplex: A Review Limmer AL, Nwannunu CE, Shah R, Coleman K, Patel RR, Mui UN, Tyring SK. Skin Therapy Lett. 2019 May;24(3):7-9.

Glycopyrronium Tosylate (Qbrexza) for Hyperhidrosis Nwannunu CE, Limmer AL, Coleman K, Shah R, Patel RR, Mui UN, Tyring SK. Skin Therapy Lett. 2019 Mar;24(2):1-3.

Stephen K. Tyring, MD, PhD

Patient-Reported Outcomes of Adalimumab, Phototherapy, and Placebo in the Vascular Inflammation in Psoriasis Trial: A Randomized Controlled Study.

Noe MH, Wan MT, Shin DB, Armstrong AW, Duffin KC, Chiesa Fuxench ZC, Kalb RE, Menter A, Simpson EL, Takeshita J, Tyring SK, Van Voorhees AS, Mehta NN, Gelfand JM. J Am Acad Dermatol. 2019 Jun 1. pii: S0190-9622(19)30884-9. doi: 10.1016/j.jaad.2019.05.080.

The oral Janus kinase/spleen tyrosine kinase inhibitor ASN002 demonstrates efficacy and improves associated systemic inflammation in patients with moderate-to-severe atopic dermatitis: results from a randomized double-blind placebo-controlled study.

Bissonnette R, Maari C, Forman S, Bhatia N, Lee M, Fowler J, Tyring S, Pariser D, Sofen H, Dhawan S, Zook M, Zammit DJ, Usansky H, Denis L, Rao N, Song T, Pavel AB, Guttman-Yassky E.Br J Dermatol. 2019 Mar 28. doi: 10.1111/bjd.17932.

Efficacy of tildrakizumab for moderate-to-severe plaque psoriasis: pooled analysis of three randomized controlled trials at weeks 12 and 28.

Papp KA, Reich K, Blauvelt A, Kimball AB, Gooderham M, Tyring SK, Sinclair R, Thaci D, Li Q, Cichanowitz N, Green S, La Rosa C.

J Eur Acad Dermatol Venereol. 2019 Jun;33(6):1098-1106. doi: 10.1111/jdv.15400. Epub 2019 Mar 5

Polyomaviruses of the skin: integrating molecular and clinical advances in an emerging class of viruses. Sheu JC, Tran J, Rady PL, Dao H Jr, Tyring SK, Nguyen HP. Br J Dermatol. 2019 Jun;180(6):1302-1311. doi: 10.1111/ bjd.17592. Epub 2019 Mar 14.

Human polyomavirus 7 (HPyV7)-associated dermatoses: novel molecular mechanism driven by viral activation of 4E-BP1 and MEK-ERK-cJun.

Wu JH, Narayanan D, Simonette RA, Rady PL, Tyring SK. Int J Dermatol. 2019 Apr;58(4):383-387. doi: 10.1111/ijd.14315

Hamill SS, Geddes-Bruce E,

Nonablative Fractional 1,550-nm Laser for the Treatment of an Unusual Nevu Sebaceus. Dermatol Surg. 2019 Feb 7. doi: 10.1097/ DSS.000000000001768.

Suggs AK, Hamill SS,

Melasma: update on management. Semin Cutan Med Surg. 2018 Dec;37(4):217-225. doi: 10.12788

Vangipuram R, Hamill SS.

Perfluorodecalin-infused patch in picosecond and Qswitched laser-assisted tattoo removal: Safety in Fitzpatrick IV-VI skin types. Lasers Surg Med. 2019 Jan;51(1):23-26. doi: 10.1002/ lsm.23022. Epub 2018 Oct 12.

THE TEXAS Jermatologist

Resident Information

Resident Housing Stipend

Similar to previous meetings, TDS offers a generous housing stipend to all residents attending the meeting. Each resident will need to pick up the resident housing stipend form upon check-in at the TDS registration desk, fill it out, and return it, along with your hotel receipt, to the TDS registration table at the meeting, or send it to the TDS business office within a week of the meeting. Each resident will receive reimbursement for one night at the host hotel (or an equivalent hotel). If you share a room with another resident, TDS will cover one additional night (one night per resident covered). You must be a TDS Resident member to receive a reimbursement.

Resident Podium and Poster Competition

Participating residents will be eligible for cash prizes: \$500 for 1st place, \$300 for 2nd place, and \$200 for 3rd place. Check the TDS website for competition procedures and submission forms.

Staying Connected to TDS

Recent dermatology residency graduates, whether starting a fellowship or joining the dermatology workforce, are eligible for FREE membership during their first year of practice. Applications can be submitted online through the TDS website. If you have further questions, please call our administrative office at (512) 370-1502, or email audrey.nelson@texmed.org.

TDS Resident Representatives to the Board

Leigha Sharp, MD (leigha.sharp@ttuhsc.edu) and Helena Jenkinson, MD (jenkiah@gmail.com), are the co-resident reps on the TDS Board. Please do not hesitate to reach out to either of them regarding questions or concerns related to TDS!

New Active Members!

Adewole S. Adamson, MD, MPP Brittany Sambrano Barros, MD Solomon S. Brickman, MD Melissa P. Chiang, MD William Chad Cragun, MD Bartley J. Gill, MD, PhD Charles Eric Greeson, MD Rajani Katta, MD Soo Jung Kim, MD Alexander George Marzuka, MD Shannan Elizabeth McCann, MD Denise W. Metry, MD Mary Kendall Parker, MD Amit M. Patel, MD Elba Iris Rubianes, MD Pauline Scott, MD Alan Kenneth Silverman, MD Janice M. Wilson, MD David R. Wright, MD

New Associate Members!

Laura Beth Buford, MD Ryan R. Riahi, MD

Austin The Woodlands Houston Spring San Antonio Houston San Angelo Houston Houston Katv San Antonio Houston Austin Nederland Flower Mound Katv San Antonio Galveston Southlake

Austin Sugar Land

New Allied Health Members!

New Resident Members!

Hannah Stevenson, NP

Skyler M. White, MD Danielle N. Brown, MD Vida Chitsazzadeh, MD, PhD Andrew S. Fischer, MD Radhika Grandhi, MD James J. Jones, MD Richard Lin, MD Ravi C. Patel, MD Harina P. Vin, MD Johnny Zhao, MD Brett Allen Austin, MD Rachael Camille Saporito, MD Amreen Sitabkhan, MD Fabiana Castro Porto Silva Lopes, MD Jose Antonio Cervantes, MD Jean Elizze Mabute Charles, DO Andrew DeCrescenzo, MD Jacob Dodd, MD Taylor C. Duke, MD Tyler H. Enos, MD Andres Garcia, II, MD Katie Homan, MD Kelly Laskoski, MD Melinda Liu, MD Jennifer Catherine Martin, MD Katherine Snodgrass Martin, MD Andrew Matsumoto, MD Andrew Matsumoto, MD Heidi Held McDonald, MD Seena Monjazeb, MD Fiorinda Fiona Muhaj, MD Muneeza K. Muhammad, MD Saisindhu Narala, MD Jeannie M. Nguyen, MD Hannah Pederson, MD Ashley Eryn Pezzi, MD Catherine Evelyn Pisano, MD Christopher Andrew Riley, Jr., MD Mary Alice Sallman, MD Nova Shu, MD Farval Siddigui, MD Swaminathan Sundaresan, MD Lesli Rogers Tristan, MD Uzoamaka Tracey Ukoha, MD Hal Bret Willardson, MD Tyler James Willenbrink, MD Frank Winsett, MD Tara Braun, MD Ravi R. Patel, MD Annika Sofia Silfvast-Kaiser, MD

League City

Houston Dallas Houston Denver Danville San Antonio New York Houston Houston Houston Lubbock Temple San Antonio Austin Austin Weatherford Dallas San Antonio Houston Dallas Houston Belton San Antonio Dallas Houston Houston Dallas Dallas San Antonio Houston Houston Sugar Land Houston Lubbock Temple Houston Austin San Antonio Houston Austin San Antonio Galveston San Antonio Houston San Antonio Austin Galveston Houston Houston

Dallas

Congratulations to the Winners!

2019 Annual Spring Meeting Resident Podium and Poster Competition winning abstracts printed below

PODIUM WINNERS

1st Place - Megan Trainor, MD Perplexing Papules and Patterns

Megan Trainor, MD¹, Fabiana Lopes, MD¹; Moise Levy, MD1,²,

1. The University of Texas - Austin, Dell Medical School Division of Dermatology; 2. Department of Pediatrics; 3. Dell Children's Medical Center, Pediatric/Adolescent Dermatology

An otherwise healthy 1-month-old female presented to our pediatric dermatology clinic for evaluation of skin lesions present since birth and abnormal hair growth. The patient was the product of an uncomplicated term pregnancy. On exam she was found to have a several soft, skin-colored papules of the left lower cheek and a single (clinically) subcutaneous soft papule of the left lower face. She also had a single patch of darker hair of the left frontal scalp and a lipodermoid of the left eye.

A diagnosis of encephalocraniocutaneous lipomatosis (ECCL) was considered due to the constellation of ocular and skin findings, and neuroimaging was ordered. Consultations with genetics, ophthalmology, and neurosurgery were requested. An MRI of the head revealed a left cerebellopontine angle lipoma and a left cranial arachnoid cyst. Ophthalmology confirmed the diagnosis of an oculodermoid, and neurosurgery has been following the lipoma and arachnoid cyst. The lipoma has shown slight enlargement by imaging as the patient has grown.

Chromosomal microarray analysis of the peripheral blood revealed no known microdeletion or microduplication syndromes, and no deletions of the mitochondrial genome were detected. No seizures or cardiovascular dysfunction have occurred. A spine survey was normal. Developmentally, the child is progressing normally, and the family is planning for surgical removal of her lipodermoid and facial lipoma.

Encephalocraniocutaneous lipomatosis (ECCL) is a rare, nonprogressive neurocutaneous disorder that presents with dermatologic, ocular, and central nervous system anomalies. While the findings of ECCL are present at birth, the diagnosis is typically made later at four to five years of age.1 Cutaneous lesions such as subcutaneous lipomas of the frontotemporal region, alopecia and focal skin aplasia of the scalp, and skin tags of the eyelids are described.^{1,2} Nevus psiloliparus (NP), the smooth, hairless, fatty nevus of the scalp, is considered the dermatologic hallmark of the syndrome.^{2,3} The ocular findings of ECCL include benign tumors and lipodermoids.³ Lipomas are the primary CNS anomaly and are frequently located at the cerebropontine angle.² Jaw tumors, bone cysts, and aortic coarctation may also be found.⁴ A mutation within the tyrosine kinase domain of FGFR1 has been identified in five patients with ECCL.⁵ Our patient likely has a mosaic form of ECCL. Many diseases may present with cutaneous mosaicism including pigmentary, syndromic, inflammatory, tumoral, and vascular disorders. Confirming the diagnosis of cutaneous mosaicism can be challenging as the mutation is often not detectable in peripheral blood, as in our patient.⁶ Skin biopsies can be analyzed with single nucleotide polymorphism (SNP) chromosomal microarrays to confirm the diagnosis.⁶ Mosaic conditions can be inherited only if the mutation is present in the gonadal tissue; however, genetic testing of cutaneous lesions does not provide insight on potential transmission to offspring.⁷

- Levy ML, Massey C. Encephalocraniocutaneous lipomatosis. In: Islam MP, Roach ES, eds. Handbook of Clinical Neurology, Vol. 132. Amsterdam: Elsevier; 2015:265-269.
- Moog U. Encephalocraniocutaneous lipomatosis. J Med Genet. 2009;46:721-729.
 Hunter A. Oculocerebrocutaneous and encephalocraniocutaneous lipomatosis syndromes: blindmen and an elophapt or comparts enderwore? Am J Med Genet A 2006;140:700–726.
- and an elephant or separate syndromes? Am J Med Genet A. 2006;140:709–726.
 Moog U, Roelens F, Mortier GR, et al. Encephalocraniocutaneous lipomatosis accompanied by the formation of bone cysts: harboring clues to pathogenesis? Am J Med Genet A. 2007;143A:2973–2980.
- 5. Bennett JT, Tan TY, Alcantara D, et al. Mosaic activating mutations in FGFR1 cause encephalocraniocutaneous lipomatosis. Am J Hum Genet. 2016;98(3):579–587.
- Vreeburg M, van Steensel MA. Genodermatoses caused by genetic mosaicism. Eur J Pediatr. 2012;171(12):1725–1735.
- Asch A, Sugarman JL. Epidermal nevus syndromes: New insights into whorls and swirls. Pediatr Dermatol. 2018;35:21-29.

2nd Place - Rachel McAndrew, MD

Quality of Life in Hidradenitis Suppurativa: A crosssectional study of a pediatric population

Rachel McAndrew, MD; Fabiana C.P.S. Lopes, MD; Kate Sebastian, RN, MPH; Lucia Z. Diaz, MD

Patients with hidradenitis suppurativa (HS) suffer with its chronic course and an appreciably reduced quality of life (QoL). While the impacts of HS on QoL have been well characterized in adult patients, no studies to date have looked at QoL specifically in pediatric HS patients. We sought to characterize QoL in pediatric patients with HS and their caregivers.

Methods: We conducted a cross-sectional study evaluating QoL measures in pediatric patients (12-17 years of age) with HS using validated surveys which were used with permission. Surveys included: (1) the Skindex-teen questionnaire, a dermatology specific QoL questionnaire validated for patients age 12-17, (2) the Patient Health Questionnaire-2 (PHQ-2), a short depression screening tool, and (3) and the Family Dermatology Life Quality Index (FDLQI), a validated QoL survey designed for family members of patients with skin disease.

Results: Twenty-one pediatric patients with HS participated in the study with a mean age of 15.3. There were a predominance of females (81%) and Hispanic patients (70%). All except one patient was obese and all were overweight (BMI range 93-99). The average score of the Skindex-teen survey was 48.1 (0-84). The majority of patients reported being bothered by the appearance of their skin and frustrated by their condition "all the time". They also often worried about their condition, dealt with pain and itching, and their sleep and choice of clothing were affected by their disease. 28.5% of participants screened positive for depression on

the PHQ-2(score >3). The average score on the FDLQI was 10.8 (range 0-30). Caregivers' lives were most impacted by the time spent caring for their child with HS and the personal emotional distress related to their child's condition. Conclusions: Our results demonstrate the profound effect that HS has on QoL pediatric patients and their caregivers. While our study did not have a control group for direct comparison, it is helpful to put these survey findings in context. The negative impact on QoL in pediatric HS patients on the Skindex-teen questionnaire was more than double that of pediatric psoriasis patients (48.1 vs 21.1).3 The rate of positive screening for depression (28.5%) was greater than double that of a general adolescent population (12%). The impact of QoL of caregivers was similar to that of other studies using the FDLQI for caregivers of patients with inflammatory conditions. Our findings exemplify the profound impact that pediatric HS has on QoL and these patients should be evaluated and managed accordingly. Given the high rates of depression found in our study, practitioners may consider screening pediatric HS patients for depression with a PHQ-2. Our findings should be taken in the context of its limitations given the small sample size, lack of control group, and single center nature of the study, but are the first to quantify the negative impact that HS has on QoL in a pediatric population.

3rd Place - Katie B. Homan, MD

An Investigation of Hyfrecation and Interference with Implantable Cardiac Devices

Katie B. Homan, MD; Sima Amin, BS; Manish Assar, MD; Mary Lee, DO; Chad D. Housewright, MD

Mohs micrographic surgery, excisional surgery, and electrodessication and curettage are common dermatologic procedures that often employ electrodessication via hyfrecators to achieve hemostasis. According to in-vitro studies, electrodessication is considered safe in patients with implanted cardiac devices. To our knowledge, there is no in-vivo data to support this claim. In this study, we aim to describe the outcomes of hyfrecation electrodessication with the Conmed 2000 Hyfrecator during dermatologic procedures in patients with pacemakers, CRTs, and ICDs.

Methods: Retrospective chart review was done from March 2014-April 2018 at a single center. Forty-five patients met inclusion criteria of having a cardiac device, having undergone an electrosurgery procedure using the Conmed 2000 Hyfrecator (Utica, NY), interrogation of the cardiac device by a cardiologist within one year prior to the surgery, and cardiac evaluation or interrogation within one year following surgery. Adverse perioperative and postoperative outcomes, as well as device malfunction, were evaluated.

No adverse perioperative effects were reported. Cardiac Ddevice reports were examined for inappropriate firing of the defibrillator, loss of capture, temporary inhibition of pacing, battery drainage, pacing at an elevated or erratic rate, failure to deliver anti-tachycardia, reversion to asynchronous pacing, induction of arrhythmias, or tissue damage at lead-tissue, but no such issues were found. The lack of complications associated with pacemakers, ICDs, and CRT devices with hyfrecation electrodessication using the Conmed 2000 Hyfrecator is reassuring., Hhowever, prospective and larger retrospective studies are warranted.

POSTER WINNERS

1st Place - Daniel Grabell, MD

Ribavirin modulates histone H3 methylation and the PDK-AKT-mTOR axis in Merkel cell carcinoma cells

Daniel Grabell, MD, MBA1[†], Allison L. Limmer1[†], Deepika Narayanan1, Hung Q. Doan, MD1,2, Rebecca A. Simonette1, Peter L. Rady, MD, PhD1, Stephen K. Tyring, MD, PhD, MBA1

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Merkel cell carcinoma (MCC) is a rare, aggressive neuroendocrine skin carcinoma. Merkel cell polyomavirus (MCPyV) is clonally integrated in over 80% of MCC tumors, with a carcinogenic mechanism dependent upon activation of mTOR and 4E-BP1 pathways. These pathways promote carcinogenesis through recruitment of eukaryotic initiation factors (eIFs) and assembly of the eIF4F complex, composed of eIF4A, eIF4E, and eIF4G at the 5'-m7G cap. The 5'-m7G cap analog ribavirin has been found to inhibit eIF4E-dependent NBS1-PI3K-PDK-AKT axis activation, which in turn prohibits cell proliferation. If ribavirin has similar implications in the treatment of MCC cells requires further investigation.

We utilized the MCPyV-positive MCC cell line MKL-1 to analyze the impact of ribavirin on histone H3 methylation and the PDK-AKT-mTOR pathway. Our data showed that treatment of MKL-1 cells with the 5'-m7G cap analog ribavirin resulted in histone H3 methylation and a marked downregulation of PDK, AKT, and mTOR phosphorylation at 72 hours of treatment.

These findings demonstrate that ribavirin's action in blocking eIF4E function results in the deactivation of important oncogenes like PDK, AKT, and mTOR. Histone H3 methylation may lead to the downregulation of EGR1 transcription factor and cancer biomarker. Our findings may suggest an intriguing novel possibility of utilizing ribavirin for treatment of MCPyV-positive MCCs.

2nd Place - Ramya Vangipuram, MD

Elevated PD-1 and PD-L1 Expression Levels in Specific Peripheral Blood Mononuclear Cell Subsets Persist Two weeks after Acute Zoster

Ramya Vangipuram, MD¹, Christopher T. Haley, MD², Dallas Jones, PhD³, Jennifer C. Martin, MD², Ravi R. Patel, MD², Uyen Ngoc Mui, MD², Maria Nagel, MD³, Stephen K. Tyring, MD, PhD^{1,2}

1. Department of Dermatology, University of Texas Health Science Center at Houston, Houston, Texas; 2. Center for Clinical Studies, Houston, Texas; 3. Department of Neurology, University of Colorado School of Medicine, Aurora, CO

Varicella zoster virus (VZV) is a human alpha-herpesvirinae subfamily member that is latent in 90% of the world population and reactivates in 50% by 85 years of age to produce herpes zoster, as well as multisystem disease including stroke and vision loss. Mechanism(s) that facilitate viral spread are not well-characterized, however, modulation of immunoinhibitory proteins programmed cell death protein-1 (PD-1) and its ligand (PD-L1) could inhibit effective viral clearance. Thus, we compared PD-1 and PD-L1 levels in peripheral blood mononuclear cells (PBMCs) from subjects with acute zoster and 2 weeks later to that of healthy controls, along with changes in antiviral and immunosuppressive cytokines. Compared to controls, flow cytometry analysis revealed (1) elevated levels of PD-1 in CD4+ and CD8+ T cells, NKT cells, B cells and monocytes during acute zoster and 2 weeks later, and; (2) elevated levels of PD-L1 in all PBMC subsets, except NK cells, during acute zoster; these elevations persisted 2 weeks later in CD4+ and CD8+ T cells and B cells. Additionally, elevated plasma levels of IFN-, CXCL-10, IL-10 and TNF- were detected during acute zoster, indicative of an antiviral immune response. The global induction of PD-1 and PD-L1 expression in specific PBMC subsets during acute zoster that persists for 2 weeks supports a novel immunosuppressive mechanism induced by VZV that may contribute, in part, to ineffective virus clearance and replication in multiple organs, leading to a wide spectrum of clinical disease. Finally, these immunoinhibitory proteins provide potential targets to attenuate VZV-associated disease.

3rd Place - Rachael C. Saporito, MD

Intralesional methotrexate for treatment of keratoacanthoma and well-differentiated squamous cell carcinoma

Rachael C. Saporito, MD, Meagan O. Harris, MD, Chad D. Housewright, MD

In the most recent "Guidelines of care for the management of cutaneous squamous cell carcinoma" by Kim et al. published in the Journal of the American Academy of Dermatology, intralesional methotrexate was not included as a potential alternative to surgical excision. This case series presents three patients with keratoacanthoma and well-differentiated squamous cell carcinomas that showed complete clinical resolution with two to three injections of 25 mg/mL methotrexate, each approximately two weeks apart. We propose consideration of intralesional methotrexate for primary treatment for non-surgical candidates or neoadjuvant therapy prior to Mohs micrographic surgery. Biopsy should first be obtained to ensure that the lesion is a well-differentiated squamous cell carcinoma. Due to the risk of pancytopenia and hepatotoxicity, a complete blood count and a comprehensive metabolic panel should be obtained prior to administration and one week after the initial injection. Caution is advised in patients with significant abnormalities at baseline or alterations following treatment. No patients in this case series developed lab abnormalities following injection or adverse events.

Kim JYS, Kozlow JH, Mittal B, et al. Guidelines of care for the management of cutaneous squamous cell carcinoma. J Am Acad Dermatol. 2018;78 (3): 560–578.

Save the date for the AAD fall legislative conference!

September 8-10, 2019

The Willard InterContinental Hotel Washington, D.C.

Registration is open for the fall AAD legislative conference. To encourage Texas representation at the meeting, the Texas Dermatological Society has graciously agreed to pay for the hotel and registration fees for the first 10 members who register for the conference and email Laura Madole. Please email laura.madole@texmed.org if you plan to attend the conference this year and we'll get you on the list. First come, first served basis. Hope to see you there!

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