

# Short Cases in Dermatology

## Introduction

Skin problems are very common in primary care: a pre-pandemic study of those attending general practice found that 14% of patients consulted about a dermatological problem<sup>1</sup>. Most patients with skin conditions can be managed by primary health care clinicians. Many treatments involve topical agents and patients need to be motivated to self-manage if chronic conditions are to be controlled in the long term<sup>2</sup>. Few clinicians have post-graduate training in dermatology and, at times, may feel out of their depth in clinical practice. Some may draw upon limited undergraduate exposure to dermatology when they were a student<sup>3</sup>. As a result, patients with minor disease may be referred to secondary care when they might be managed safely (and well) in primary care.

This module aims to update clinicians about four common skin problems which present frequently to primary care. As with all of our modules, the content was determined by an online focus group of practising clinicians. The authors have endeavoured to be inclusive regarding gender, age and ethnicity with the presented cases and have included photographs with consent from DermNetNZ. The module's structure has changed so that the information section and case commentary follow each case. We are conscious of the current workload in primary care and groups may want to study this module over two meetings or decide to study two or three cases.

The module's aims are to give evidence-based management options for:

- children with eczema
- adults with pruritus
- adults with hidradenitis suppurativa
- adults with psoriasis

The cases below are designed to illustrate the problems described in the aims of the module. They are real cases, but are **not** meant to be the focus of the group's discussion. Instead, PBSGL groups are encouraged to think of similar cases in their own place of work.

Studying all the cases is not compulsory. If the group runs short of time, and completing the group feedback is still to be done, it is better to leave out a case completely. The feedback, where group members say what changes they will make in practice as a result of the meeting, is an essential part of the learning process – more important than “completing the cases”.