

### Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/dermconsult/providing-equitable-atopic-dermatitis-care/29447/>

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### Providing Equitable Atopic Dermatitis Care

#### Announcer:

You're listening to *DermConsult* on ReachMD. On this episode, Dr. Ruchi Gupta will discuss how providers can mitigate racial inequities in the treatment of atopic dermatitis. In addition to being a Professor of Pediatrics and Medicine at Northwestern University Feinberg School of Medicine, Dr. Gupta is also the Founding Director of Northwestern's Center for Food Allergy and Asthma Research. Let's hear from Dr. Gupta now.

#### Dr. Gupta:

With my patient populations, a lot of times, different cultures use different treatment modalities. And a lot of it is natural, which is great, and a lot of it is they wait longer to get treatment, so they'll use basic over-the-counter things like Vaseline for a long period of time until it gets really unbearable. So how do we start working on educating more around "No, there are other modalities?" There's a fear of steroids, but there is a time and place for them. And there is a fear of some of these other new treatments along with the biologics, so that I think is one area—education, awareness, and really having those conversations to make people feel that these treatments are safe and good for them. Education and awareness of the importance of protecting that skin barrier and not letting atopic derm continue without treatment, especially in underserved and minority populations, is critical.

What I think would be ideal is if dermatologists could really connect to their referring physicians and help them with basic steps for care for atopic derm. I think as generalists, they always really depend and trust the physicians that they refer to, and then dermatologists coming back and giving them resources. I want to say we've got to improve access and getting them into dermatologists. In my own practice, sometimes the wait can be six months to get into a dermatologist. Dermatologists are busy, and it's harder to see Medicaid, Medicare or underserved patients, so getting that knowledge to their referring doctors early would be really helpful.

I know in a lot of clinics, we just have something on our wall, and something that dermatologists give us that is very clear on first-line treatment and second-line treatment; there's all of these things out there in the literature, but dermatologists who know their physicians, they'll trust them so much more, so I think that's one big thing dermatologists can do. Additionally, they know all the latest and greatest, so giving talks or discussing it with their referring physicians in terms of what is best.

I think dermatologists obviously understand atopic derm in different skin tones and different communities and really do that very well. So we can build trust, improve access, and help educate generalists because they're the ones who are first-line in seeing it.

Atopic derm is such an important topic. As we learn more and more about the importance of the skin barrier and what could potentially happen if that barrier is compromised in terms of other conditions—I don't think we've known that as well as we do now—protecting the skin and really controlling that atopic derm is so critical. Really understanding what it looks like in different skin tones, treating it early, and talking to dermatologists and getting them access is critical, and I think it's happening. I think there's more and more awareness.

#### Announcer:

That was Dr. Ruchi Gupta giving insight on how providers can mitigate racial inequities in the treatment of atopic dermatitis. To access this and other episodes in our series, visit *DermConsult* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!