Chronic Inflammatory Skin Conditions: Diagnosis in the Eyes of the Beholder?

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Objectives:
To elucidate the differences in diagnosis of common chronic inflammatory skin (CIS) conditions (atopic dermatitis, psoriasis, alopecia areata, acne, vitiligo) among different ethnic groups and between dermatologic specialists and primary care providers.

Methods:
- **Data Retrieval:** Utilized the DataDirect to obtain patient demographics, clinic sites of patient encounter, ICD9/10 codes issued for each encounter, and other clinical variables/comorbidities.
- **Data Analysis:** The primary response variable was whether the patients with CIS conditions have comorbid diagnosis or not. Thus, the binary response variable is assumed to have only two values (one or zero).

Hypothesis: There are discrepancies in CIS condition diagnosis among different ethnic groups in the specialized (i.e. dermatology) versus non-specialized (i.e. primary physician clinic) visits.

Impact Statement: The downstream effects of this project will be to improve culturally-sensitive patient care, add to the existing literature regarding autoimmune comorbidities, and guide medical education. Because this study seeks to assess how diagnoses of CIS conditions vary based on the clinic setting and how they vary for different races, the data will be used to provide important guidance for improving education of non-dermatologic specialists for diagnosis of CIS, especially in skin of color. Furthermore, it will form the basis of future research utilizing the electronic health record system to determine quality of care for patients with chronic skin conditions, which includes rate of referral to a dermatology office when a CIS diagnosis is made in a primary care setting.