

Insight Into Dermatology Providers' Perspectives on Approaches to Sensitive Skin: A Pilot Survey

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ABSTRACT

Sensitive skin (SS) is a common patient complaint; however, there are no consistent guidelines to guide dermatologists' approaches to diagnosis and management of SS. Attendees of an international dermatology conference were surveyed to gauge dermatology providers' experiences and perspectives on SS. Survey results suggest that although the definition and diagnosis of SS are ambiguous, SS is increasingly being considered as a unique condition. Patients are commonly seeking dermatologic care for SS; however, dermatologists identified challenges with diagnosis, counseling patients, selecting products or medications, and assessing clinical improvement. These data highlights both a significant demand and a current need for improved provider resources for SS.

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INTRODUCTION

Sensitive skin (SS) is a common, subjective syndrome of cutaneous hyperreactivity. Despite having an estimated global prevalence between 40% and 70%,¹ no consistent guidelines exist to guide dermatologists' approaches to diagnosis, management, or counseling of patients with a complaint of SS. Given the current ambiguity of management principles, we sought to gauge dermatology providers' experiences and perspectives on SS through a survey of attendees at an international dermatology conference.

MATERIALS AND METHODS

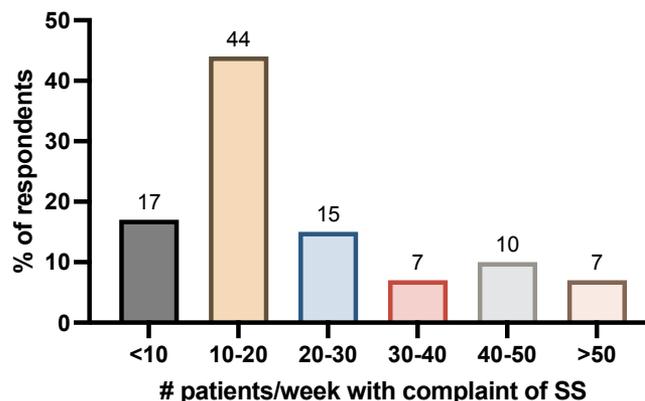
Attendees of the 2022 European Academy of Dermatology and Venereology Congress completed live polls throughout an educational session on SS. Attendees were predominantly dermatologists, a minority (estimated 8-10%) were other dermatology providers including nurses. All questions were multiple choice and required individuals to select one best answer. Survey is IRB exempt (#NCR224549) and no personal data were collected from respondents. The actual number of respondents differed slightly per question, as data were obtained from live polls voluntarily completed by audience members. Response rates per question ranged from 71 to 100%. The total number of respondents that completed each question is indicated below. Results were compiled for analysis.

RESULTS

Fifty-one percent of surveyed dermatology providers estimated the prevalence of SS to be between 25% and 49% (n=45). An additional 34% estimated SS prevalence to be 50% to 74%, while a minority of respondents estimated less than 25% or

greater than 75% (13% and 2%, respectively). When asked to approximate the number of clinic patients per week presenting to their office with a complaint of SS (n=41), selections ranged from fewer than 10 patients per week to greater than 50, with respondents most commonly reporting 10 to 20 patients weekly (44%; Figure 1). Surveyed providers (n=36) considered the primary symptom of SS to be redness (41%), burning (14%), stinging (25%), pruritus (17%), or tingling (3%). When prompted to choose the most likely etiology for SS (n=32), 72% indicated that altered skin barrier is the main cause of SS. Other selected options included external or environmental factors (16%), primary neuropathy (6%), and immune dysregulation (6%). No respondents classified SS as a result or symptom of

FIGURE 1. Estimated patients per week presenting to dermatology providers with a complaint of sensitive skin.



another dermatosis. Fifty-five percent of surveyed dermatology providers consider SS to be a unique skin condition (n=42). Of the remaining, 33% disagreed with this statement and 12% were unsure. The biggest challenges in sensitive skin management (n=45) were identified as difficulty giving product recommendations (31%), assessing improvement over time (29%), prescribing medical management (18%), establishing diagnosis (13%), and discussing sensitive skin with patients (9%).

DISCUSSION

SS is increasingly being considered as a unique condition; over half of dermatologists surveyed reported this opinion and not one respondent selected a primary dermatosis as the driving pathophysiology for SS. However, the definition and diagnosis of SS are still ambiguous. One-third of respondents had discrepant views on SS: they disagreed that SS is a unique condition, but also did not report belief that SS is the result or symptom of other dermatoses. Dermatology providers frequently encounter patients with a complaint of SS; over 80% of providers reported that 10 or more patients present to them with SS weekly. Despite how commonly patients are seeking dermatologic care for SS, providers identified challenges with diagnosis, counseling patients, selecting products or medications, and assessing clinical improvement.

These data highlights both a significant demand and a current need for improved provider resources for SS. Further research should be conducted to develop effective, evidence-based approaches, both diagnostic and therapeutic, to SS. Future studies will expand on the perspectives highlighted here through a larger survey of dermatology providers.

DISCLOSURES

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REFERENCES

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