2019 Summer Meeting

Pearls: Diagnostic and Therapeutic

July 27th, 2019
9 AM – 12 Noon

No Relevant Conflicts

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Off Label Alert

Just about everything I talk about today is an off label use... That's what makes them "pearls"!

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Announcements

Have you a "pearl" you'd like to hear us mention in the next Practical Pearls Session? Email me at drspstone@gmail.com

(credit will be given, if your pearl is used)
New For Hailey-Hailey

NALTREXONE - Supplied (for drug abuse) as tablets and susp for injection

INDICATIONS:
- Maintenance treatment of alcohol dependence, 50mg daily with food
- Relapse prevention following opioid detoxification
- Smoking cessation†
- Treatment of pruritus †
- Due to cholestatic liver disease.
- Due to systemic or dermatologic disease.
- For uremic pruritus†

Due to cholestatic liver disease.

Due to systemic or dermatologic disease.

For uremic pruritus†.

† Off Label

From: Treatment of Hailey-Hailey Disease With Low-Dose Naltrexone

New For Hailey-Hailey

Usual dose 50mg and up
- At 50-100 mg daily, used for treatment of trichotillomania and itch
- Multiple case reports of LOW DOSE naltrexone.

From: Treatment of Hailey-Hailey Disease With Low-Dose Naltrexone

New For Hailey-Hailey

- Multiple case reports of LOW DOSE naltrexone.
- For H2 – 3mg, 4.5mg and 12.5mg have been reported in multiple series
- 50 mg dose anecdotally  failure (pubs and Chicago Derm Society discussions)
- Reports of low dose also in dermatomyositis, systemic sclerosis, psoriasis and lichen planopilaris
- Some success in the reduction of signs and symptoms in both Grover disease and Darier disease

From: Treatment of Hailey-Hailey Disease With Low-Dose Naltrexone
An Experiment:
nrspstone @ Gmail.com
Alexis Curreri from the Board Certified Dermatologists on Facebook

Lichen Planus:

Oral L.P.: 80% improvement with crushing two 30 mg apremilast tablets in a 16 oz. water bottle: swish and swallow b.i.d. Use a new bottle every week and discard any remainder

For extensive full body Lichen Planus: Full dose of apremilast per package insert, cleared after 4 months
CASE FOR DIAGNOSIS

- 5 year history, variable severity
- Has used:
  - Topical steroids
  - Azaleic acid
  - Ketoconazole cream
  - Clenia®
  - Doxycycline
  - Metronidazole topical
You Could Choose to Biopsy or
ROSACEA

- Could be Demodex!
- Redness, stinging, facial pruritus, unresponsive to rosacea medications –
- Tiny pustules, tiny keratotic spines
- Prior Rx:
  - 1-2-3 oint (1%HC, 2% SA, 3% precip Sulfur)* and
  - Selenium sulfide shampoo
  *

* (X 10 to 14 days, then taper to 1 – 2X/wk)
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**ROSACEA PITYRIASIS FOLLICULORUM**
- Follicular Scaling (nutmeg grater feel)
- Other Misdiagnoses
  - Erythematelangiectatic Rosacea
  - Monomorphic Acne

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**CASE FOR DIAGNOSIS**

### Slide 24

**CASE FOR DIAGNOSIS**
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DEMODEX FOLLICULORUM
WHAT ELSE CAN YOU USE?

- There are no decent evidence-based studies
- Permethrin 5% (personal experience, case reports)
- Crotamiton (personal experience, case reports)
- Soolantra® (ivermectin) Cream, 1%
- Ketoconazole (topical)
- Erythromycin ointment
- For blepharitis:
  - Sulfacetamide ointment
  - Tea Tree Oil (there is a commercial product on the market)

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Severe Demodex folliculorum–Associated Oculocutaneous Rosacea in a Girl Successfully Treated With Ivermectin

Figure Legend:

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"cylindrical dandruff of the eyelids"
Hair Issues

- Biotin
  - Literature only supports use in nail disorders (and true biotin deficiency)
  - No support for hair or skin disorders. Despite the FDA’s warning against its use, biotin sales continue to increase. Elevated serum biotin levels (>10 ng/mL) can interfere with the biotin–streptavidin interaction commonly used in the separation phase of immunoassays. This interference may lead to erroneous laboratory values for the following studies: TSH, free T4, free T3, HCG, NT-proBNP, and troponin.
  - Even with a biotin dose of 10 mg a day, serum biotin levels can reach therapeutic levels. To help mitigate patient risk and minimize adverse health outcomes, it is imperative that providers discuss biotin use with each of their patients.

- CCCA
  - CCCA patients can benefit from long-term topical therapy to minimize worsening, even if there is no hair regrowth.
  - Hair breakage with pruritus in the vertex scalp can be an early sign of CCCA.

Dr. Brianna De Souza and Dr. Amy McMichael

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BRIAN BERMAN ON KEOIDS

- 71% recur post excision
- Shave plus IDM 10% recur at 1 yr, 20% at 5 yr
- IDM PREVENTS scarring after breast surg.
- SRT after shave removal helped prevent recurrence
- Electron beam post excision works
- IL, Verapamil works
- Intralosional cryo 50% shrinkage
- Picato worked a little in 1 patient
- Silicon gel reduced scars post op1

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Treatment Of Keloids On The Ear:

- Shave excision with imiquimod nightly starting immediately after the procedure
- Excision with immediate ILK with a pressure earring, followed by ILK 40 q4 weeks
Eval serum levels of Vit A and Vit D in children with AD

Recorded SCORAD, IgE, eos, VA and VD levels

VD and VA levels were significantly lower in children with AD than in normal children (p < 0.001, p = 0.0423).

VD and VA levels were negatively correlated with SCORAD scores.

VA and VD co-deficiency may exacerbate AD symptoms in children.

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• Handout: Every patient should receive a handout – or leave with a small bag of samples – sunscreen, moisturizer, etc

AAO REVISED RECOMMENDATIONS ON SCREENING FOR CHLOROQUINE AND HYDROXYCHLOROQUINE RETINOPATHY

• Baseline examination is advised >> reference point and to rule out maculopathy

• Annual screening should begin after 5 years (or sooner if there are unusual risk factors).

• Newer objective tests can be more sensitive than visual fields.
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**Codes And Coding**

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**2019 Skin Biopsy Codes**

- **11102**: Tangential biopsy of skin, (eg, shave, scoop, saucerize, curette), single lesion
- **11103**: each separate/additional lesion
- **11104**: Punch biopsy of skin (including simple closure when performed), single lesion
- **11105**: each separate/additional lesion
- **11106**: Incisional biopsy of skin (eg, wedge), (including simple closure when performed), single lesion
- **11107**: each separate/additional lesion

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**TANGENTIAL BIOPSY VS. SHAVE REMOVAL**

**Tangential biopsy**
- **Intent**: Obtain tissue sample for diagnostic pathologic examination
- **Instrument**: Sharp blade, such as scalpel, flexible blade, curette
- **Depth**: May include epidermis only, or epidermis and dermis
- **Histopathologic tissue evaluation**: Always done
- **Two codes only**: Primary and add-on

**Shave removal**
- **Intent**: Therapeutic removal of epidermal or epidermal-dermal lesion
- **Instrument**: Removal with a sharp blade, such as scalpel, flexible blade
- **Depth**: Not through dermis
- **No suturing required
- **Histopathologic tissue evaluation**: May be done
- **Code selection**: Determined by site and lesion size
### Tangential Biopsy vs. Shave Removal: Examples

<table>
<thead>
<tr>
<th>Tangential Biopsy</th>
<th>Shave Removal</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Biopsy of an inflammatory dermatosis with the shave technique</td>
<td>• Cosmetic shave removal of an elevated nevus</td>
</tr>
<tr>
<td>• Biopsy of a large atypical pigmented lesion (saucerization or scoop biopsy technique, into deep dermis)</td>
<td>• Shave removal of irritated seborrheic keratosis, irritated nevus</td>
</tr>
<tr>
<td>• Intent: obtain an optimal tissue sample for histopathology</td>
<td>• Intent: to completely remove the lesion; or to completely remove the noxious portion of lesion</td>
</tr>
</tbody>
</table>

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**Codes And Coding**

- 99452: Code for the determination of the correct code.
- 99451: Code for the service provided.

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**Consulting Provider**

- 99445: Service provided.
- 99447: Code for the service provided.
- 99448: Code for the service provided.
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**Codes And Coding**

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>99451</td>
<td>Professional evaluation and treatment of a patient or other qualified health care professional that was not at that time an employee or agent of the facility.</td>
</tr>
<tr>
<td>99452</td>
<td>Fees for the evaluation and treatment of a patient or other qualified health care professional that is not an employee or agent of the facility.</td>
</tr>
</tbody>
</table>

**TREATING / REQUESTING PROVIDER**

- 99451
- 99452

Announcements

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(credit will be given, if your pearl is used)

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**Announcements**

If time permits, there will be more slides. I’ll send them, if you’ll email me at spstone@gmail.com

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