

Transcript Details

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Implementing and Growing PDT

Dr. Todd Schlesinger:

This is Dr. Todd Schlesinger from Charleston, South Carolina. I work with Epiphany Dermatology, and I also have a research company called the Clinical Research Center Of The Carolinas, faculty appointments at George Washington University and the Medical University of South Carolina.

So here to talk to you about photodynamic therapy and how you can incorporate that in your practice. PDT, photodynamic therapy, has been a big part of our practice for a long time now. In fact, I was working on the original studies that led to its development and actually was in medical school during the time when the first topical PDT drug was being worked on. So I've been really working on it for a long time. But in our practice, really practically, it's something that we use for our patients with actinic keratosis.

Of course, I'm in the South, and I think something that comes up often is how do we deal with seasonality? Because we've actually recently published some posters and we'll have a paper coming out soon regarding the seasonality of PDT, which means that if you live in a state where, like the South, like South Carolina or Florida, you may tend not to use photodynamic therapy in the wintertime, or you may not use in the summertime, you're going to use it mainly in the wintertime when patients are not outside. But that really varies by different parts of the country. So northern states, where there isn't as much seasonal variation in the weather, you don't find as much of a seasonal variation.

So how do we overcome that? Try to discuss with our patients ways that they can incorporate PDT into their regimen without impacting their lives as much. So that's one thing we've done to improve our patients' access to photodynamic therapy at different times of the year is by looking at the seasonality of PDT, and then also, just understanding that actinic keratosis is a chronic condition that requires ongoing management, so telling our patients that is important too and making sure they understand that it's not a one-time deal, that in addition to what they're doing with sunscreen and sun protection, that they need to have an ongoing management regimen for photodynamic therapy, or for AK in a general sense, combined with PDT and the other treatments that we offer for actinic keratosis as well. So just the need for ongoing management.

And as far as making it easy for access, we have designated a physician's assistant. A few of them actually can perform the treatments in our practice, which is very helpful for the physicians to increase the patient's access. So having a schedule for photodynamic therapy in the practice allows our patients to have more options for when they can have it done.

Our PAs or physician's assistants are excellent at doing the treatment and performing the curettage application of the photosensitizer and ensures proper billing for that service within the practice, which helps as well. And just making sure that everyone's educated about the outcomes for PDT and what it can do for our patients.

So I think those are all different things that we do to try to increase the access, educate patients about the benefits of PDT for their chronic condition of AK, educating them about the perniciousness of actinic keratosis and how they can incorporate PDT into their regimen.

At the same time, considering that seasonality function, that's just kind of new data where we really want to be able to pay attention to how we can make it more of a year-round thing as opposed to dropping the number of treatments we do every summer, increasing the number of treatments that we do every winter because people get used to that idea and they think, "Oh, well, I can only have this in the winter time," but really, they can have it all year round. We've just fallen into that pattern because of the sun-sensitivity piece that occurs a few days after each treatment.

So those are the things we've done in our practice to help make PDT available as an option to our patients with the least amount of

resistance. So thank you.