

### 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.comhttps://practicaldermatology.com/series/pdt-in-practice/patient-experience-pdt/28863/>

### ReachMD

www.reachmd.com  
info@reachmd.com  
(866) 423-7849

---

### Patient Experience with PDT

#### Dr. Joel Cohen:

I'm Dr. Joel Cohen from Denver, Colorado. I'm the director of AboutSkin Dermatology and AboutSkin Research. I'm a board-certified dermatologist who did fellowship training and aesthetic dermatology as well. And I've been on the Biofrontera Scientific Advisory Board for a number of years, and I've been honored to participate in several of their clinical trials, and lead some of these studies as lead author for some of the new indications, or potential indications.

So we've incorporated Ameluz and red light into our practice because of really the fact that this is a formulation that can penetrate deeper into the skin due to the lipophilicity, and we know that red light, being a longer wavelength, penetrates deeper than blue light. So we use it for our patients with actinic keratosis on a regular basis. Many of our patients just don't want to have the homework of going home and using a cream, whether it's 5-FU or imiquimod or other formulations, where they have to put something on that causes burning and stinging and redness and crusting and that unsightly appearance. So if we can get them to do the treatment in the office, we know that they've done the treatment, we know that they've completed the treatment, and then we can see them in follow-up after this to make sure that the actinic keratoses have improved. So it's really communication with the patient and making sure that they're really on board with what to expect from the procedure.

So getting patients to come in for photodynamic therapy, it's really important that they understand the downtime. So typically, it's going to take patients, in most cases, three to five days of some redness and some dryness and some irritation, so they need to configure that into their schedule. Certainly, avoiding this before any major social events is really important, so I tell patients, family photos coming up, make sure that you avoid that for at least 10 days or so, just to make sure everything goes okay. And then, we tell patients that it's going to be the day of the treatment, plus two days after that, that they need to avoid outdoor light during the day, as well as any window or skylight exposure during the day as well, and that's really important that they understand that.

So for some patients, they might live out in the west of the office area, for us it's towards the mountains, and if they're driving home at the end of the day into the mountains from a distance, then that's going to be significant sun exposure. So we really try to pick the time of day that makes the most sense for them, depending on how far they live, and it's also picking the time of year that makes the most sense for them. So I take care of a lot of school administrators and college administrators, and for them, summertime is the only time that they can really do some of these actual treatments. So we are fully prepared to do that, and we make sure that they're on board, again, avoiding outdoor light exposure and windows and skylights.

And then, in addition, for some people, the wintertime is going to be a tough time for them to do it. I have a lot of patients that ski or board or snowshoe, and they're just not willing to give up several days, two and a half days, especially if there's a powder day on the horizon. So for them, it's going to be really outside of that winter type of area. So we do photodynamic therapy in our office in all seasons.