

Title: Letter to the editor regarding article “Gu L, Diaz SM, Lipner SR. Retrospective study of acne telemedicine and in-person visits at an academic center during the COVID-19 pandemic. *J Cosmet Dermatol.* 2022;21(1):36-38.”

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Keywords: acne, teledermatology, Covid-19

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Dear Editor,

From March 2020, with the outbreak of Coronavirus disease 2019 preventive measures in public health have been adopted in order to reduce virus transmission. There has been a reorganization of dermatologic patient care, resulting in the reduction of in-person visits and the increase of telemedicine use¹. We read with great interest the article written by Gu et al.² analyzing the characteristics of acne visits during the pandemic period and we also want to report the experience of our dermatologic center. We conducted a retrospective analysis of all acne visits (in-person and tele-visits) that were conducted at the Dermatology Centre of the University of Naples Federico II, from March 2020 to December 2021; a total of 213 patients (75 male and 138 females with a mean age of 21.8 years) performed a first visit (54; 25.4%) or follow-up visit (159; 74.6%) using telemedicine platforms. According to the degree of severity, the majority of patients presented with mild-to-moderate acne (136 ;63.8%), whereas 36 patients (16.9%) presented with severe acne and 41 patients (19.3%) required a visit for acne scars. 157 out of 213 patients (73.7%) received topical treatments and 56 (26.3%) subjects were prescribed systemic treatments, including oral isotretinoin that was prescribed in 21 cases. Telemedicine visits and follow-up visits were conducted by video calls, phone calls, e-mails, and text messages in order to continuously assist patients. As reported by Gu et al.,¹ topical treatments were preferred to systemic therapies. Furthermore, when the government's restrictive measures were reduced, 103 (48.3%) patients continued to prefer telemedicine visit with only 51.7% preferring face-to-face consultation. Gu et al. cohort of patients and ours were similar for sex and age ($P < 0.0001$), making our results comparable to theirs.

Teledermatology strongly impacted on patients' management during the Covid-19 pandemic period.² Synchronous and asynchronous teleconsultations allowed to guide and assist dermatologic patients, avoiding virus spreading and reducing the possibility that fake news and fear due to Covid-19 could cause treatment discontinuation, especially for systemic therapies.³

In literature, several real-life experiences, confirming telemedicine efficacy in treating dermatologic patients have already been reported; moreover, with the reduction of government restriction measures, many patients continued to prefer teledermatology to face-to-face consultations. Thus, teledermatology may be a new way of medical practice, in particular for follow-up visits of chronic skin diseases such as atopic dermatitis, acne and psoriasis.⁴⁻⁶ The feasibility, the possibility to join also rural areas are the main strengths of telemedicine.⁴ Moreover, this could be also a way to reduce waiting lists as well as a tool

allowing to overcome logistic barriers (e.g.availabilities of dermatologists, geographical isolation, time constraint).⁴ However, the main limitations remain the technical issues, depending on the computerization of ambulatories, and patients capacity to use messages or video-communication instruments.⁴

Finally, telemedicine revolutionized the concept of medicine, being a valid strategy also after the pandemic. Thus, even if teledermatology played a key role during the pandemic period to fight against social distancing measures,⁷ this tool will play a key role also after Covid-19 pandemic period, particularly in patients affected by systemic diseases.⁴ Clinicians should keep in mind that dermatologic clinical practice is changing and the use of teledermatology in daily clinical practice is mandatory to offer patients a tailored-tail management. Certainly, further studies are required in order to evaluate long-term results of teledermatology and patients' satisfaction.

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