LETTER TO THE EDITOR

[Translated article] Safety in Dermatologic Procedures: An Article Series to Improve Safety in Dermatologic Care

Seguridad en procedimientos dermatológicos. Una serie para mejorar la seguridad en la atención dermatológica

To the Editor,

Medical-surgical dermatology and venereology is closely linked with performing surgery and other therapeutic procedures. In fact, historically, from the beginning of the eighteenth century, surgery has been a cornerstone of our specialty.1 Serious complications associated with dermatologic procedures are infrequent, and so it is unlikely that there are many dermatologists with experience in their management. It is therefore essential to define protocols to manage these exceptional circumstances, encourage proactive prevention, and provide a rapid response when they do occur.

Commercial airlines are a model to follow in risk management. In that field, experts are aware of infrequent risks with potentially serious consequences and have established a series of structured steps (in the form of check lists) to prevent and resolve them. Closer to dermatology, the workflows for emergency rooms and medical emergencies are also based on this system. And, following this model, we proposed a series of short articles under the general title of “Safety in dermatologic procedures,” aimed at preventing and responding to risks associated with our techniques in cases where the previous training of dermatologists may be insufficient. For each article, the dermatologists’ point of view has been formed with at least one subject matter expert and a direct and specific style was used for recommendations.

The content of the 11 topics proposed in the original series was presented during the course of 2021 in a series of on-line lectures with subsequent colloquium within the dermatological Dermachet forum (which currently includes almost 1000 dermatologists from Spain, Europe, and Latin America).2

The articles published to date include those on aspects such as prevention and treatment of medical complications, for example syncope and presyncope, anaphylaxis,3 arrhythmias, hypertensive crisis,4 and cardiorespiratory arrest.5 Emergency situations have also been considered, such as surgical bleeding,6 ocular complications,7 or vascular occlusion in aesthetic surgery (which is now commonplace and integrated into our clinical practice as part of dermatology).8 Management of errors and medical-legal complications is another topic discussed.9

In the coming months, the series will probably be extended with new chapters on topics such as damage to deep-lying structures, risk of infection, and physical risks, including fire in the operating room. Contributions that may be of interest to dermatologists would be welcome. We consider it a series with a novel focus, of a highly practical nature with content and information difficult to find, except in articles widely dispersed in the scientific literature. The time required to locate such articles could be precious in situations where minutes matter.

For safer dermatologic care, we suggest that you read and keep to hand these articles that form part of the series.

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Conflicts of interest

The authors declare that they have no conflicts of interest with respect to the content of the article.

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