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**EPIDEMIOLOGY** 

## RESOURCE STEWARDSHIP IN DERMATOLOGY: AN EVIDENCE-BASED LIST OF RECOMMENDATIONS

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Introduction: As healthcare costs soar, medicine must focus on cost-conscious healthcare delivery. This not only allocates appropriate resources to those who would truly benefit, it also protects patients from the impact of unnecessary tests, treatments and procedures. The need for resource stewardship training has been highlighted in recent years through organizations such as the Choosing Wisely campaign, which aims to eliminate ineffective practises by developing lists of recommendations per specialty.

Objective: To identify low-yield and ineffective, yet common, clinical practices in dermatology.

Materials and Methods: In collaboration with the Canadian Dermatology Association (CDA), a working group was formed, who developed a preliminary list of recommendations through a review of the literature, inspiration from International Choosing Wisely lists, and in consultation with a task force of Canadian dermatologists selected for their expertise, geographical location, and type of practice. The proposed final Top Five list was then sent to the CDA Board of Directors, voted on by all members, and passed by majority approval.

Results: The proposed recommendations have been approved by the Canadian Dermatology Association. One such recommendation presented is: "Don't routinely use topical antibiotics on surgical wounds", motivated by relative cost, risk of sensitization leading to contact dermatitis, and lack of evidence for its use in preventing wound infection. Each recommendation is accompanied by a detailed explanation of the rationale and a comprehensive list of evidence-based sources.

Conclusion: These recommendations have been developed to reinforce resource stewardship in dermatology from a Canadian point of view. Future directions include distribution for increased accessibility and understanding, and the development of easy-to-read patient materials on tests, treatments, and procedures related to their diagnosis. We hope these recommendations will be of high clinical utility and trigger meaningful conversation amongst dermatologists nationally and internationally.





