

Synopsis: Who should look after genital skin disease in the 21st century?

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Genital skin diseases are extremely common and can have a major impact on patients, potentially being highly embarrassing and affecting their sexual-functioning, their relationships with others and their own self-image.⁽¹⁾ The aim of this essay was to look at how genital skin diseases are currently managed, weighing up each method's advantages and disadvantages, and whether their management could be improved.

Conditions affecting the genital skin may present initially to a general practitioner (GP) or at a genitourinary medicine (GUM) clinic. GPs are often able to manage common skin conditions, however complicated or rare disease usually requires a referral to specialist services. Ideally GPs would be able to manage a wide range of conditions, however as they do not have as much experience as specialists in genital skin conditions this is not always possible. GUM clinics may be seen as being more accessible to some patients as they do not require a referral from a GP.⁽²⁾ They are specialists at dealing with sexually transmitted infections, however patients with non-sexually transmitted conditions may be treated more appropriately elsewhere.

When GPs are unable or unsure how to manage a patient they may make a referral to a dermatologist. Dermatologists are specialists in skin diseases and have vast levels of experience of their management, however patients in some areas may have

to wait months for an appointment.^(3,4) In some cases patients may be referred to GPs with a special interest in Dermatology which may reduce referral times,⁽⁵⁾ however they may not be able to manage the most complicated or rare conditions.

Vulval diseases may be managed by gynaecologists, with some operating specialist vulval clinics, either within the specialty of gynaecology, or on a multi-disciplinary basis alongside dermatologists as well as other specialties. How these clinics are run varies across the UK, however the British Society for the Study of Vulval Disease recommends that women with rare or complicated disease should have access to multi-disciplinary teams to ensure that they have access to the most appropriate treatment,⁽⁶⁾ and so consideration should be given to adapting existing services to achieve this.

Self-care is the most common method of managing dermatological conditions⁽⁷⁾ and, with increasing access to the internet,⁽⁸⁾ many patients may use the internet to help manage such conditions. While some patients may find this more convenient, self-care using the internet brings its own risks. The internet could however be used to provide high-quality, reliable information written by professionals to help educate patients, as well as providing information to difficult to reach groups. Information provided on the internet could also encourage patients to present to healthcare professionals, while easily accessed, professionally written information may prevent patients from using unreliable or unsafe websites.

Finally, teledermatology using modern technology to provide high-quality images to specialists is being increasingly used in the management of skin conditions.

Teledermatology could be used to manage genital skin conditions, by facilitating communication between GPs and dermatologists to allow some patients who would previously have needed a referral to be managed in primary care.

Conclusion

The care of patients with genital skin conditions is extremely important due to the distress they can cause. They are managed by various disciplines, each having their own unique strengths. As such, genital skin conditions should continue to be dealt with by various disciplines with patients having access to multidisciplinary teams where necessary. It should also be recognised that many patients will look online for information about their health, and so high-quality, professionally written information should be available to prevent patients relying on untrustworthy or even unsafe websites.

References:

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