

The State of Pediatric Dermatology



The subspecialty needs to expand its workforce to continue to meet critical patient need.

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>> The formal creation of the pediatric dermatology specialty drew interest throughout the medical community. The field has since grown considerably and ushered in waves of new research but still suffers from a workforce shortage. A consistent lack of personnel has left pediatric dermatology as one of the most underserved pediatric subspecialties.¹

This scarcity of pediatric dermatologists means patients do not have access to much-needed clinical care and has given way to a host of misconceptions around pediatric skincare. More pediatric dermatologists are also needed to accelerate research into the conditions affecting many infants and children into adulthood, from eczema to psoriasis and acne to a multitude of rare diseases. In recent years, pediatric dermatology has been unable to fill the fellowship match positions available, leaving the field partially undeveloped and in need of more qualified professionals.²

Ultimately, investing more time, money, and talent into pediatric dermatology is critical to yielding more effective treatments for these ailments and advancing the field into the future. Understanding today's shortage of qualified pediatric dermatology professionals requires a dive into the history of the specialty in order to identify how this predicament arose in the first place.

SPECIALTY TRAINING

Pediatric dermatology was not formally recognized until the late 20th century when pediatricians noticed an obvious need for the specialty as throngs of concerned parents bombarded pediatricians with questions about their children's skin. This resulted in the creation of the International Society of Pediatric Dermatology in 1973 and the Society for Pediatric Dermatology (SPD) in 1975.^{1,3,4}

It became clear a new subset of pediatrics and dermatology was necessary for the benefit of medical personnel, con-



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cerned parents, and suffering children. Compared to trained dermatologists, pediatricians struggled to diagnose dermatological issues. This was particularly problematic given that almost one third of pediatric visits typically involved an issue with skin.³

In the late 1980s, many hospitals began to recognize the need for pediatric dermatologists, but very few had available positions and even fewer had available funding to hire the appropriate practitioners.⁵ In the following decade, the field became more prominent as pediatric dermatology societies in the United States and Europe grew, gained

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the**bottom**line

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respect, and earned more funding. At the turn of the 21st century, the number of dermatologists specializing in pediatrics almost tripled.⁵ Though welcome, this growth was insufficient.

A 2004 survey of dermatology residency programs found that three quarters of hospitals understood the need for pediatric dermatologists yet admitted there was a shortage of them. The lack of available medical personnel was apparent, with demand for pediatric dermatologists outstripping supply and open faculty positions greatly exceeding the number of fellows in training during the period of the study.⁶

The American Board of Dermatology recognized the need for a certification examination and recertification process and implemented exam questions and an independent, formal qualification. The criteria to take the exam included previous certification in dermatology in addition to fellowship experience in pediatric dermatology. The first exam was distributed in 2004.¹ According to the American Board of Dermatology, 380 people have become certified in pediatric dermatology as of 2019.



Average wait time for an appointment with a pediatric dermatologist is six weeks, down from 13 weeks in 2009. However, 25 percent of the surveyed wait times still exceeded 10 weeks.

The National Association of Children’s Hospitals and Related Institutions conducted a 2009 survey revealing the average waiting period for a pediatric dermatology appointment was more than 13 weeks; this was the longest surveyed wait time for any pediatric specialty.¹ Despite the persistent demand for pediatric dermatology, only slight improvements have been made over the past decade, with a recent study stating the average wait time for patients is six weeks. This is still far too long for children in need of medical consultation—especially considering 25 percent of the surveyed wait times exceeded 10 weeks. This drawn out wait time serves as an unnecessary barrier for suffering young patients and represents numerous barriers to pediatric care.⁷

CURRENT CHALLENGES AND OPPORTUNITIES

Many obstacles stand in the way of a career in pediatric dermatology. Dermatology is a competitive specialty, and most trainees not only have limited exposure time but also do not receive thorough insight into the variety of subspecialties on offer throughout their education.⁸ Pediatric dermatology was ranked as the third least accessible subspecialty, behind only child psychiatry and developmental pediatrics, in a survey of general pediatricians.¹



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Pediatric residents are often discouraged from pursuing a career in pediatric dermatology due to poor timing; typically, once they discover an interest in the subject during their residency, it is challenging to apply for a dermatology residency position. This is unfortunate, because pediatric dermatology delivers on many of the key values postgrads search for as a challenging field with significant room for growth and research. Also a very small and specialized field, pediatric dermatology has cultivated a tight-knit group of professionals with a constant stream of circulating information. Not to mention the rewarding feeling of helping children and establishing relationships with patients is unlike many other specialties.¹

Though not a deciding factor for every student, compensation and salary are important considerations for those with student loans. Salaries for pediatric dermatology colleagues—another factor exacerbating the talent shortage. Becoming a pediatric dermatologist requires an additional year of training and yields an average salary of \$225,000 in the US based on a survey in 2011.⁹ This is significantly less than a practicing dermatologist would earn in another subspecialty. The contrast is particularly striking when compared to dermatologists who perform cosmetic procedures or practice dermatopathology.¹

As a direct effect of the stark lack of professionals in the

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field, there are too few mentors to teach, encourage, and inspire potential newcomers—in turn perpetuating the cycle. The workforce shortage and lack of mentors is visibly apparent in the uneven geographic distribution of pediatric dermatologists.⁸

Qualified mentors take postgraduate students under their wing and establish a relationship. After this mentorship develops, new pediatric dermatologists are unlikely to venture out to a different territory. Rather, they stay at the same institution under the tutelage of their mentor, thus creating hubs for pediatric dermatology, typically in large cities, while deserts form in less populated areas. This skews allotment of programs and professionals, making it harder for children in more rural areas to get care, increasing the average wait time for patients, and furthering the workforce cycle that currently exists.^{1,7}



Geographic distribution of pediatric dermatologists is uneven, likely because new pediatric dermatologists are unlikely to venture out to a different territory after training. There are deserts in certain areas of the country.

The SPD serves as an advocate for the field in an effort to support children afflicted with skin, hair, and nail disorders. As well as dedicating money, support, and development tools to pediatric dermatologists across the US, the SPD works to progress the burgeoning field through the advancement of clinical research and development of educational opportunities.⁴

THE IMPORTANCE OF PEDIATRIC DERMATOLOGY

A healthy and expanding workforce is vital in order to ensure no child in the US lacks proper access to dermatological care. The important need for pediatric dermatology is evident in the extended wait times for an appointment

and the growing demand for practitioners. Thus, training pathways, increasing interest in pediatric dermatology over other subspecialties in dermatology, and educational opportunities are vital. Career development and geographically dispersed mentorship programs are necessary for the future growth of the specialty.

Bottom line: More fellows in pediatric dermatology must be recruited by increasing exposure to the field in the early stages of training. Expansion of the workforce is necessary to accommodate more timely patient care, as well as grow research and education in this emerging field.¹

While myriad challenges face the world of pediatric dermatology today, the industry is full of hundreds of passionate people dedicated to furthering the field through grants, research and education. Through the progress made by the SPD—increasing efforts to build out training programs and further clinical expertise through innovative research—the future of pediatric dermatology can see expansion and greater numbers of specialists in the coming years. ■

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