28353 Hemorrhagic cellulitis secondary to vibrio fluvialis infection

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Bibliometric analysis of original research in four high-impact dermatology journals
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Introduction: Bibliometric information regarding published dermatology research is scarce. In a retrospective study, original research articles published in 2018 in four high-impact dermatology journals were evaluated for subject content and authorship characteristics.

Methods: The highest-impact dermatology journals from 2018 were selected based on Web of Science journal impact factor. Journal of the American Medical Association Dermatology, Journal of the American Academy of Dermatology, Journal of Investigative Dermatology, and British Journal of Dermatology. Original research articles were identified and analyzed for topic, authorship, and funding characteristics.

Results: A total of 1123 articles were analyzed. The majority (873/1123, 77.7%) were medical dermatology topics, most commonly cutaneous oncology (21.7%) and papulosquamous dermatoses (18.1%). Mean number of authors per article was 8.0 (range: 1-40), and most articles had between 5 and 10 authors. Over 20% of articles had authors from two or more countries, and 93.9% (1055/1123) of senior authors had an academic affiliation. Nearly two-thirds (714/1123) of articles reported research funding; the most common source was government funding (40.9%), followed by private funding (25.5%), institutional funding (15.5%), and industry funding (14.4%). The majority of authors were from North America (502/1123, 44.7%) and Europe (393/1123, 35.0%). Across journals, there were fewer original research articles with senior authors from Australia/New Zealand (27/1123, 2.4%) and Asia (12/1123, 1.1%).

Conclusion: Collaboration between researchers is key to publishing high-impact original articles, and these collaborations are increasingly international. Financial support from various sources including government and private funding (such as the Dermatology Foundation) is also critical.

Commercial Disclosure: None identified.

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Time intervals until the first return office visit for dermatologists compared with other specialties
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Poor adherence to medications is associated with negative health outcomes. Shortening intervals between medication prescription and the subsequent return visit improves patient adherence. However, early return visits may not be considered practical or widely used in typical outpatient practice settings. The timing of return visits is not well characterized, much less the factors that determine the choice of interval. To begin to explore these issues, we studied the time interval between office visits with and without new medications prescribed for dermatologists and compared with other specialties. We analyzed data from the 2014 to 2016 National Ambulatory Medical Care Survey to determine the length of time until scheduled return visits across different specialties. We assessed visits across the 14 major specialties specified in the NAMCS. There were an estimated 2.39 (2.37, 2.42) billion visits. Ten out of 14 specialties had a majority of total dispositions (>50%) to return in two months or greater or as needed; dermatology had the fourth highest proportion (62.5%). When assessing only new patient visits in which a new medication was prescribed, dermatology had the fifth highest proportion (58.4%).

Commercial Disclosure: None identified.

28335
Hemorrhagic cellulitis secondary to vibrio fluvialis infection
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A 75-year-old male with a medical history of heart failure, interstitial lung disease, and stage renal disease on dialysis, and a cerebral tumor presented to the ER due to diarrhea and abdominal rash. His abdominal rash started as asymptomatic bruising along the left abdomen which spread to the right. He developed myalgias, lethargy, and altered mental status; he later developed fever, tachycardia, and hypovolemia and was found to be in septic shock. Labwork revealed a leukocytosis with neutrophilic predominance, elevated lactate, and negative Clostridium difficile. Blood cultures grew Gram-negative bacilli which later speciated as Vibrio fluvialis. Biopsy revealed neutrophilic dermatitis and panniculitis with hemorrhagic consistent with hemorrhagic cellulitis. The patient was treated with IV piperacillin/tazobactam and oral doxycycline with which he had improvement of his abdominal rash, mental status, and systemic symptoms. V fluvialis is a Gram-negative bacterium which occurs widely in aquatic environments. V fluvialis has been detected in mollusks, oysters, mussels, among other marine creatures commonly consumed as seafood. Upon questioning, this patient did admit to eating uncooked clams three days prior to presentation. This organism is known to cause gastroenteritis with diarrheal illness as in this patient. Cases of pyomelanomas, supplicative cholangitis, and bacteremia have been noted with V fluvialis. There is one reported case of hemorrhagic cellulitis and cerebritis in a patient who swam in brackish water following multiple fire ant stings. We report a novel case of hemorrhagic cellulitis and bacteremia leading to septic shock secondary to V fluvialis infection following raw clam ingestion.

Commercial Disclosure: None identified.

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Efficacy of topical serum containing high and low molecular weight of hyaluronic acid as antiaging in Brazilian skin
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Introduction: Hyaluronic acid (HA), alone or in combination with co-agents, has been widely applied in cosmetic industries due to the multiples biological effects as skin hydration, collagen and elastin stimulation, wound healing, tissue regeneration and anti-inflammatory. This study aimed to evaluate the efficacy of topical serum containing multiples molecular weight of HA as antiaging.

Materials and methods: 30 healthy female with age between 44 and 59 years old, skin type II to IV (Fitzpatrick) and wrinkle score 2 to 4 (L’Oréal Skin Aging Atlas) were enrolled in the study. Three drops of product were applied twice daily (morning and evening) during 84 days. The improvement of number, thickness, length and depth of periorbital, perilabial, frontal and neck wrinkles were evaluated clinically by PRIMOS at D28, D56, and D84.

Results and discussion: The results demonstrated a continuous improvement of periorbital, perilabial, frontal and neck wrinkles were evaluated clinically by PRIMOS at D28, D56, and D84.

Commercial Disclosure: None identified.