

## Met or Unmet Needs of Dermatological Patients: Current Challenges of Dermatologic Care when Patients have Difficulty Communicating their Emotions

Charalambos Costeris\*

*Department of Social Sciences, School of Humanities and Social Sciences, University of Nicosia, Nicosia, Cyprus*

### EDITORIAL NOTE

Primary motives of dermatological patients when receiving medical services often vary. Most needs during the meeting with the dermatologist may not be verbalized, except their desire for a remission or cure of their skin condition. During the first meeting between a patient and a dermatologist, which includes both medical and psychosocial interaction, a therapeutic relationship is expected to be established. At the altar of this relationship, the deeper motives of the patient can be explored by the dermatologist.

The therapeutic relationship depends on both external and internal factors. External factors concern mainly whether the appointment with the dermatologist can be direct (always with the same skin specialist-in private sector) or indirect (by collaborating medical staff who often alternate-during examination in a hospital). Internal Factors mainly concern the various motives which in turn trigger the patient to seek dermatological services. Because these are rarely verbalized they are in turn multifaceted by the patient and are not adequately evaluated. The primary motive and basic 'visible' request of the patient is almost always the cure of the skin condition. The majority of the patients are mainly satisfied when their initial request has been attained without further assessing their motivations, while a second group of patients are keen on learning a wealth of medical information about their skin condition. In the second group of patients then, the initial motive concerning physical health is reinforced by other motives that need to be investigated.

These can be concerns about the general physical health and the quality of life that depend on the dermatological disorder, but also the anxiety associated with the socially ideal appearance and the social prestige that accompanies it. While the former can be treated with the dermatologist's informative medical approach and the latter presented as less important, they also need essential time, as the patient may not verbalize their level of concern. The level of anxiety needs to be investigated, as

according to the literature, patients seeking dermatological care often have a high comorbidity with anxiety disorders, depression and obsessive-compulsive disorders [1,2]. In complex cases, the dermatological disorder constitutes the secondary gain, an external motivator, by which the patient might enjoy receiving care by their important others or their dermatologist, can avoid work and remains in the sick role. Based on this particular group, we can refer to the complexity of the clinical presentation of patients and the need for vigilance of dermatologists, since they need to be approached and evaluated psychologically.

The organization of the medical information and the approach of the dermatologist depends on the personal characteristics of the patient. Even though from the doctor's point of view is considered a daily practice from the patient's perspective the situation experience is unique. The ability of the dermatologist to choose the appropriate emotional approach and the time they will dedicate to the patient, are essential components both for the therapeutic alliance, but also for the therapeutic plan that will be followed. Even if the clinical picture of the dermatological disorder presented does not need further investigation, if the patient expresses their wish for a further examination, dermatologists should evaluate the reasons that motivate the patient in such request, as well as their social and personal characteristics. Dermatologists' ability to investigate patients' complex motives and needs can positively affect the treatment of dermatological disorder and also prepare patients to accept the information that an additional psychological evaluation of their skin condition is needed. The latter reduces the likelihood of conflict in agitated and oppositional patients with reduced insight.

In order to prevent the frustration of fulfilling the motivations of dermatological patients, while enhancing their satisfaction with the receiving medical services, the smooth interaction between dermatologists and patients is necessary. This is enhanced by the appropriate knowledge in the field of psychodermatology [3], a field which only recently has begun to be timidly explored. The anxiety and strong negative emotions

**Correspondence to:** Charalambos Costeris, Department of Social Sciences, School of Humanities and Social Sciences, University of Nicosia, Nicosia, Cyprus, E-mail: kwsteris@gmail.com

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that characterize a multitude of patients, combined with the therapeutic interaction that often involves conflicts, require the cooperation of dermatologists and clinical health psychologists, where the common struggle they will carry out will concern the smoothest treatment plan of the most vulnerable groups of patients. Therefore, the investigation of the skin condition, in combination with the investigation of the patients' motives, needs and feelings, will allow the solution of controversial therapeutic difficulties. This can be achieved through techniques which are key elements of the field of psychodermatology, such as empathy, active listening, conflict resolution and problem-solving skills.

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