

# Insufficient duration of dermatology consultations for psoriasis patients in a worldwide study

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## RATIONAL

The duration of medical consultations impacts the interaction between patients and doctors in medical settings. Extended consultations have the potential to enhance the quality of care and satisfaction among physicians by facilitating more comprehensive patient interactions.

However, determining the appropriate duration of consultations remains a subject of debate.

Given that the management of psoriasis often entails lengthy and intricate procedures, this study aimed to examine whether psoriasis patients feel the duration of their consultations is adequate, to explore the prevalence of psoriasis patients who perceive their consultations as insufficient, and to assess potential predictors including socio-demographic characteristics and therapeutic approaches

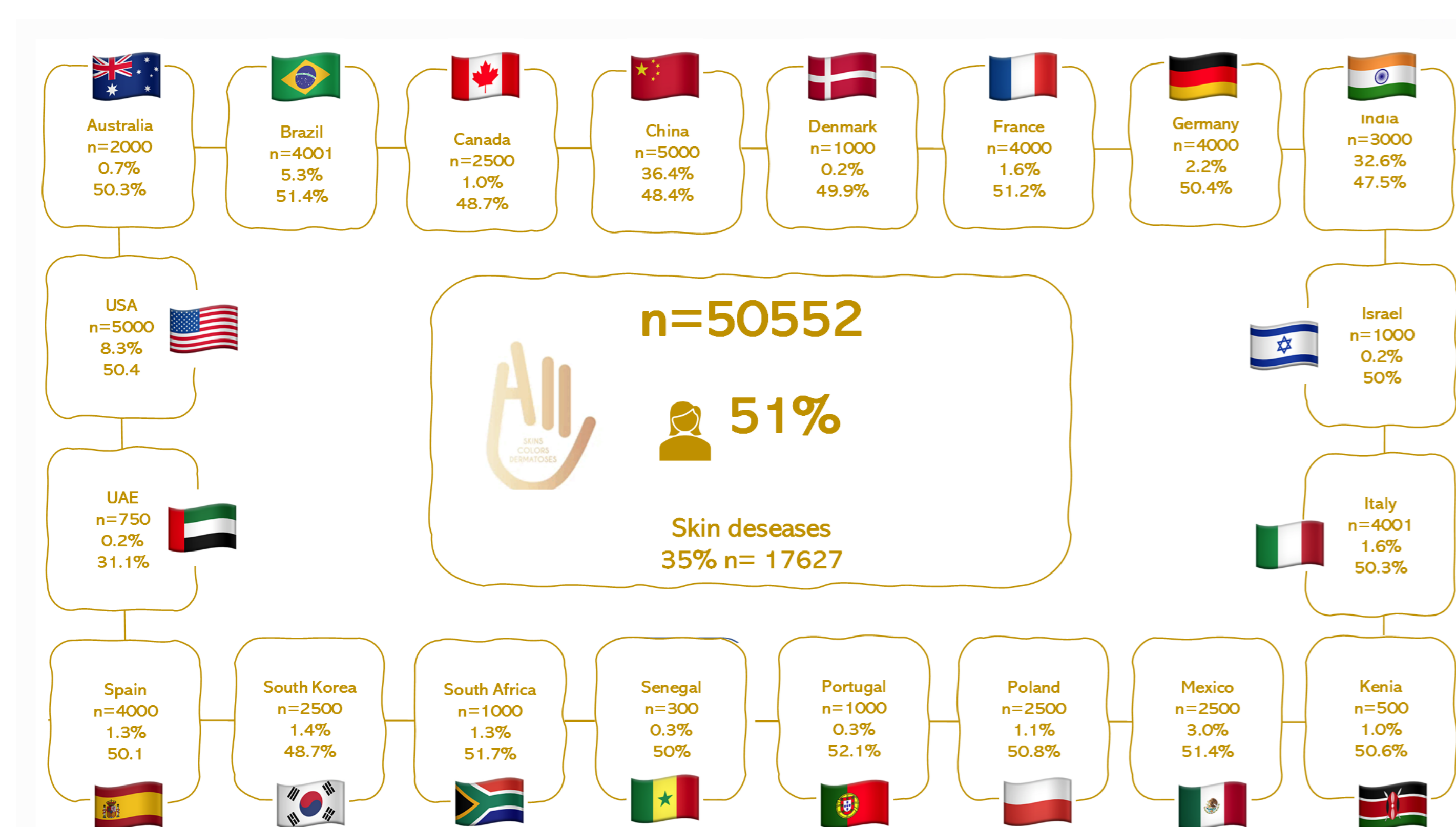
## METHODOLOGY

The ALL PROJECT is a large-scale study of individuals representative of the adult population in 20 countries on five continents: Europe [France, Italy, Germany, Poland, Portugal, Spain, Denmark; n=17500], Latin America[LA] [Brazil, Mexico; n=6501], Asia [China, India, South Korea; n=10500], North America [NA] [Canada, USA; n= 7500 ]; Middle East [ME] [Israel, United Arab Emirates; n=2750], Australia [Australia; n=2000] and Africa [Kenya, South Africa, Senegal; n=1800].

In each of the 20 countries surveyed, representative and extrapolable samples of the general population aged 16 and over were interviewed.

The questionnaire collected information on demographics, the therapeutic management of their psoriasis and their perception of the length of their consultations .A comparison of those who felt the length of consultation was insufficient (DCI) and sufficient was used to evaluate predictors: socio-demographic, therapeutic management.

Descriptive analyses using absolute and percentage frequencies were performed. The test of significance was two-sided and established at 5% ( $p \leq 0.05$ ). Student's t test and Pearson's Chi-squared were performed to compare subjects with reported DCI and those with non-DCI.



## RESULTS

A population of 706 psoriasis patients was selected, including 384 (54.4%) males and 322(45.6%) females (mean age 50.1+/-14.9 years). min 16-85 years. 401 (56.8%) were treated by dermatologists, 139(19.7%) by general practitioners (GPs) and 35(5%) by complementary health practitioners (CHPs). 217 (30.7%) were treated by dermatologists in general practices and 106 (15%) in public hospitals. 471 (66.7%) excluded local drug treatment, 242 (34.3%) excluded systemic treatment (10.3% injectable and 108 oral). 409 were from Europe, 88 from

North America, 96 from Asia, 61 from Latin America, 29 from Australia, 17 from the Middle East and 6 from Africa. 118 (16.7%) considered that the length of the consultation was insufficient. 18.2% of those followed up by dermatologists 14.4% by GPs and 28.6% by CHPs. Respondents who felt that the consultation time was too short were less satisfied with the explanations given (34.6% vs 91.8%, p) and with the treatment offered (27.7% vs 88.1%, p).

The perception of inadequate consultation time was not significantly higher among women (20.5% vs. 13.5%, p), or in the case of hospital treatment (15% vs. 15.7%, p). The prevalence of insufficient consultation time did not differ significantly between countries.

Respondents under 35 years of age (30.5% vs. 18.0%) and those with systemic treatments (21.8% vs. 13.6%) were more likely to consider the duration of consultations insufficient.

Variables	Man N = 541	Woman N = 450	p-Value
<b>Gender</b>			0.635
Man	127 (56.19%)	414 (54.12%)	
Woman	99 (43.81%)	351 (45.88%)	
<b>What the patients said about their last consultation</b>	<b>N = 384</b>	<b>N = 322</b>	
The time the health professional gave me was sufficient	332 (86.46%)	256 (79.5%)	0.018
I was satisfied with the explanations the health professional gave me	324 (84.38%)	261 (81.06%)	0.287
The treatment offered by the health professional was satisfactory	309 (80.47%)	245 (76.09%)	0.187

Variables	35 and under N = 226	36 and over N = 765	p-Value
<b>Gender</b>			0.635
Man	127 (56.19%)	414 (54.12%)	
Woman	99 (43.81%)	351 (45.88%)	
<b>What the patients said about their last consultation</b>	<b>N = 128</b>	<b>N = 578</b>	
The time the health professional gave me was sufficient	95 (74.22%)	493 (85.29%)	0.004
I was satisfied with the explanations the health professional gave me	98 (76.56%)	487 (84.26%)	0.05
The treatment offered by the health professional was satisfactory	95 (74.22%)	459 (79.41%)	0.24

The time the health professional gave me was sufficient	YES N = 873	NO N = 118	p-Value
<b>Gender</b>			0.019
Man	489 (56.01%)	52 (44.07%)	
Woman	384 (43.99%)	66 (55.93%)	
<b>He was satisfied with the explanations given by the healthcare professional</b>			<0.001
Yes	540 (91.84%)	45 (38.14%)	
No	48 (8.16%)	73 (61.86%)	
<b>The treatment offered by the healthcare professional was satisfactory</b>			<0.001
Yes	518 (88.1%)	36 (30.51%)	
No	70 (11.9%)	82 (69.49%)	
<b>Declare having used alternative and complementary medicine</b>			0.02
Yes	199 (22.79%)	39 (33.05%)	
No	674 (77.21%)	79 (66.95%)	
<b>Declare having used a Healer</b>			0.03
Yes	7 (3.52%)	5 (12.82%)	
No	192 (96.48%)	34 (87.18%)	

## DISCUSSION

This study represents the first inaugural examination of the perception of insufficient consultation duration among psoriasis patients. It reveals that individuals receiving systemic treatment for psoriasis were more prone to feeling that their consultation time was insufficient.

Such patients might require lengthier consultations to ensure ample opportunity for reflection on their condition and to address any questions or concerns that impact their daily lives and personal management approaches