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Millions of French people suffer from skin diseases. Responsible for many diseases and disabilities, these pathologies have considerable psychological, social and economic impacts for patients and their families, and are burdened with unacceptable loss of opportunity.

We, patient associations, scientific societies and dermatologists, do not understand the deafening silence of the public authorities on the issue. This omission brings dermatology to the edge of a precipice: it suffers from the most serious difficulties of access to care. A recent study shows that this is the worst specialty for getting a first appointment. There are two reasons for this: medical demographics and disorganized care.

The neglected organization of care

Indeed, more than half of practicing dermatologists are over the age of 55; however, the number of interns in training will not make it possible to stabilize the density of dermatologists before 2041 at best, i.e. ten years after the other specialties.

Similarly, the organization of dermatological care is dormant: saturated, non-existent or exhausted hospital services, bed closures, vacant positions, aberrant appointment times even in emergencies, wandering of patients.

The consequence is obvious: the care pathways in dermatology are illegible for patients and professionals. Who and where to consult? How to make without an appointment available before several months? With the key to the abandonment of care despite sometimes terrible physical and psychological suffering for the sick and their loved ones.

We are not exaggerating the situation. Here are three examples to be convinced: it takes on average eight and a half years of delay, diagnostic wandering and suffering before receiving a diagnosis of Verneuil's disease; in the absence of Medicare coverage, the nursing care required by epidermolysis bullosa is often carried out by relatives; finally, the treatments recommended by the experts remain inaccessible to patients with vitiligo today.

Proposals closer to the field

It is therefore incomprehensible that skin diseases are still absent from the State's health priorities, and in particular from regional health plans (PRS). We have initiated an unprecedented participatory approach in dermatology to identify the most urgent needs and make proposals as close as possible to the field. We ask that these proposals be taken into consideration to save a sector in danger and the future of patients.

In practice, we ask to:

- find an accessible hospital offer, by including dermatology in the management dialogue between regional health agencies (ARS) and hospitals;*
- train more dermatologists and encourage dermatologists to maintain their professional activity beyond retirement through concerted incentives;*

– develop and promote tele-expertise: regional experiments have shown the relevance of this device in dermatology, as a complement to face-to-face consultations;

– strengthen the paramedical resources of the sector, in particular by the presence of psychologists in the dermatology departments. The reevaluation of complex cutaneous nursing care is also necessary for the management of the daily care of the patient;

Hospital shifts

– strengthen the role and skills of first responders (general practitioners, liberal nurses, etc.) in dermatology, and equip them with the equipment necessary for diagnosis;

– generalize proven systems (specialized care teams in the territory) and the establishment of hospital appointments by city dermatologists, which will improve the relationship between the first line, specialized care and the hospital;

– deploy medical assistants, a measure that has proven itself in other medical specialties to enhance the efficiency of pathways.

These proposals must be implemented quickly. Some depend on national decisions; others can be undertaken immediately in the territories, if the regional health agencies take them up in the 2023 regional health plans. This is the meaning of the contribution we sent them in February.

Minister of Health, ladies and gentlemen responsible for ARS, you have all the levers to get dermatology out of the blind spot of the health system. Please take them.

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