

COMPELLING COMMENTS

Disparities in Access to Treatment for Pigmentation Disorders

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Disparities in access to treatment for pigmentation conditions pose significant challenges in dermatology,¹ emphasizing the critical need to address cultural and racial factors in treatment approaches. These conditions, characterized by abnormal skin pigmentation, can have a profound impact on individuals' self-esteem and overall well-being. However, unequal access to appropriate care exacerbates these disparities. Limited availability of dermatological services in underserved communities, particularly those with marginalized populations, and insurance coverage gaps contribute to delayed or inadequate management of hyperpigmentation and hypopigmentation conditions. Additionally, cultural and racial factors play a crucial role in shaping individuals' perceptions of these conditions and their willingness to seek treatment. Sociocultural beliefs, beauty standards, and traditional practices influence help-seeking behaviors and treatment preferences.

Khosla and colleagues found that virtual group support visits may reduce psychosocial isolation and improve access to care for children with vitiligo (as well as their parents), particularly among those from non-White racial backgrounds.² Moreover, a 1993-2010 National Ambulatory Medical Care Survey study revealed that African American and Hispanic patients were less likely to have a procedure performed for

dyschromia (N=24.7M, P<0.01), presumably owed to potential adverse effects in darker-skinned populations, yet more favorable combination regimens also remain underutilized in these groups.³ Kang et al. additionally highlight that more than a quarter of these patients rely on Medicare (9%) or self-pay (17%), which may alone pose significant barriers to cosmetic dyschromia treatment.³

Tailoring treatment approaches to consider a range of cultural, racial, and economic factors is vital for providing effective and patient-centered care. By promoting cultural sensitivity and awareness among healthcare professionals, addressing language barriers, and incorporating community outreach programs, it is possible to bridge the gap in access and ensure that individuals from diverse backgrounds receive equitable and appropriate care for hyperpigmentation and hypopigmentation conditions.

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