

OP31.4

Eight years of tele-dermatology diagnosis of skin lesions in a rural zone

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Background/Aim: To evaluate the teledermatology diagnosis and management of dermatologic tumors for patients in rural areas who may not have ready access to a dermatologist by specially geographic isolate isolated

Methods: Teledermatology “la Sierra” System was established to screening of pigmented dermatology lesions suspected of malignity in our area, especially isolated from the Reina Sofia Universitary Hospital with 3511 inhabitants. In that time, Since October 2007 to October 2015, 489 rural zone patients have been studied. In the first the visit the suspect diagnose has been done, some photos are taken to all of the lesions suspected of malignity and immediately they are sending by encrypted e-mail to the Reina Sofia Universitary Hospital dermatologist. The suspect results were received by e-mail in no more three days. Only suspect malignant lesions were referrals to dermatologist

Results: Women 48%, men 52% . Total malignant lesions 38,79 % (basocellular carcinoma 51, 12%, epidermoid carcinoma 23, 34%, Bowen disease 12, 12%, Atypical nevus 8,9%, melanoma 3,33%, others carcinomas 1,19%) Non malignant lesions 61, 87% (seborreic keratosis 21,83%, actinic keratosis 26, 76%, non atypical nevus 14, 47%, lentigo 5, 66%, others lesions 31, 28%). Hospital referrals avoided 61,87%

Conclusions:

1. Teledermatology system is usefully to screening of malignant skin lesions in our rural area.
2. Teledermatology system improves the screening of malignant skin lesions by its accessibility.

The most frecuente skin cancer in our area is basocelular carcinoma.