

What Is in a Name?

For those who are involved in the world of dermatology and had the pleasure of attending the Summer Meeting of the American Academy of Dermatology (AAD) in Chicago, Illinois, July 30 to August 3, they experienced pleasant weather, exciting events, and intellectually stimulating science. For those individuals who missed this year's summer meeting, or for those who have not made it an annual tradition, I encourage giving the summer AAD meeting a second look.

I prefer the summer meeting to the annual AAD meeting for a variety of reasons. First, the summer meeting is shorter than the annual meeting, which makes the meeting easier to digest in its entirety. Second, the summer meeting is smaller, both in scale and in attendance, which makes it much more manageable to negotiate. Third, the faculty in attendance and the content of the scientific sessions are very much the same as the annual meeting.

Another reason I prefer the summer meeting is the opportunity to participate in meaningful advisory board sessions with industry partners. Love them or hate them, but industry partners are here to stay in the dermatology marketplace.

As is the tradition in these types of meetings, the opening session begins with a round of introductions and icebreakers designed to help everyone feel more at ease with each other and to facilitate a discussion. During one roundtable that I attended, I began the introductions by starting with myself. As I was delivering the usual who, why, what, and where, I was struck with an epiphany regarding my self-designated style of practice. I simply stated that I was a general dermatologist; not a dermatologic surgeon, dermasurgeon, aesthetic dermatologist, and surprisingly, not even a cosmetic dermatologist.

After my self-declaration, I received some unusual stares from colleagues and a few quizzical looks from the panel members representing industry. One colleague seated next to me even went so far as to giggle. I noticed the proverbial pregnant pause as everyone in the room stared at me and waited for some sage wisdom that explained my newly anointed status. My choice was obvious. Clarification was called for and this was the perfect venue to start.

I went on to explain that whereas some individuals may think of me (and sometimes tease me) as never having met a syringe of toxin or filler that I would not inject, the reality is

that I perform and practice medical and surgical dermatology every bit as much as I practice cosmetic dermatology. The fact that I am willing to get up on stage and share my injection techniques with colleagues does not mean that I practice aesthetic dermatology, procedural dermatology, or cosmetic dermatology to the exclusion of *real* dermatology, therapeutic dermatology, or disease dermatology.

In fact, I practice all of the previously mentioned things. My patients are both male and female who vary in age from young to old, and who in some cases possess life-threatening dermatoses and tumors, along with appearance-related concerns. I do this on a daily basis, and I expect that most of you reading this guest editorial do the same thing as well.

Today, being a general dermatologist is synonymous with being a medical dermatologist, a dermatologic surgeon, an aesthetic dermatologist, and a cosmetic dermatologist.

The simple explanation is that the majority of dermatologists like to perform the same kinds of procedures in their daily practices. In spite of protests to the contrary, we march to the beat of the same drummer because as dermatologists, it is what we do.

As a specialty, dermatologists do the things that are necessary to do because of our patients' needs and concerns, financial burdens imposed on us by those outside of the physician-patient relationship, advances in technology, and perhaps because of changing interests, education, and training.

Today, being a general dermatologist is synonymous with being a medical dermatologist, a dermatologic surgeon, an aesthetic dermatologist, and a cosmetic dermatologist. A general dermatologist is considered all of the above and more because only a dermatologist possesses the resources and capabilities to expertly provide and execute all of the services and procedures that are associated with the titles previously mentioned, with their patients' best interests in mind.

Many years ago we called ourselves venereologists or syphilologists. The AAD has gone through numerous classifications of self-titling in order to finally settle on the term *dermatologist*. The wisdom of this name is that it is all encompassing and never constricting or restricting. I wonder what would have happened if we had called ourselves dermatologic syphilologists and woke up one morning to discover that penicillin was discovered by Sir Alexander Fleming instead.

I am, in fact, a general dermatologist, and dermatology has changed during the last 20 years that I have been practicing. I have changed as well, having educated myself in an attempt to stay abreast of new technology, learn new procedures, acquire new knowledge, and apply these skills to my practice and, ultimately, my patients.

In surmising my thoughts on the subject of naming, I offer a bit of advice. Regardless of self-perception regarding subspecialization, status, or skills; in spite of fellowships, memberships, or authorships; and because of education, commitment, and training, we are all general dermatologists; therefore, because of these 2 simple

words, we all belong to the same club, for better or for worse.

I revel each day in the opportunity to be the best dermatologist I can be, whether it is through the use of a syringe of toxin, the extirpation of a skin cancer, or the management of skin disease. The opportunities are all equally important to my patients and I do not pretend to pass moral judgment on their health care decisions. Indeed, I make a daily attempt to better myself through the learning process in a variety of different ways, venues, and sources to effectively meet my patients' needs and expectations.

The summer AAD meeting is one of my favorite meetings to help achieve this goal, and for those individuals who have not attended recently, I encourage you to take another look in order to discover that it has the essential ingredients to make it a great meeting for the general dermatologist.

Wm. Philip Werschler, MD
Spokane, Washington

