



University of Dundee

Response to 'Decline in the use of phototherapy in France from 2010 to 2019'

Eadie, Ewan; Gallacher, Mhairi; Gorczynski, Aneta; Smith, Louise; Dawe, Robert S.

Published in:
British Journal of Dermatology

DOI:
[10.1111/bjd.20586](https://doi.org/10.1111/bjd.20586)

Publication date:
2021

Document Version
Peer reviewed version

[Link to publication in Discovery Research Portal](#)

Citation for published version (APA):
Eadie, E., Gallacher, M., Gorczynski, A., Smith, L., Dawe, R. S. (2021). Response to 'Decline in the use of phototherapy in France from 2010 to 2019'. *British Journal of Dermatology*, 185(4), 871-872.
<https://doi.org/10.1111/bjd.20586>

General rights

Copyright and moral rights for the publications made accessible in Discovery Research Portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

Take down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

Response to Decline in use of phototherapy in France from 2010 to 2019

Word count: 365 (max 450)

Table count: 1

Figure count: 0

E. Eadie¹, M. Gallacher², A. Gorczynski², L. Smith² and R.S. Dawe¹ on behalf of Photonet, the Managed Clinical Network for Ultraviolet (UV) Phototherapy in Scotland

¹ NHS Tayside, Photobiology Unit, Ninewells Hospital and Medical School, Dundee, DD1 9SY.

² NHS National Services Scotland, National Services Division, Scottish Health Service Centre, Crewe Road South, Edinburgh, EH4 2LF.

Corresponding author: Ewan Eadie (ewan.eadie@nhs.scot)

Funding: none.

Conflict of Interest: none to declare.

This is the peer reviewed version of the following article: Eadie, E., et al. 'Response to Decline in use of phototherapy in France from 2010 to 2019', *British Journal of Dermatology* (2021), which has been published in final form at <https://doi.org/10.1111/bjd.20586>. This article may be used for non-commercial purposes in accordance with Wiley Terms and Conditions for Self-Archiving.

Dear Editor,

We share the concerns of Aubin et al. on the decline of ultraviolet (UV) phototherapy in France and the decline of dermatologists prescribing phototherapy¹. As they have highlighted, phototherapy is an important cost-effective and well researched tool with a well-known, minor risk profile when administered appropriately^{2,3}. In 2002, after audit highlighted issues with phototherapy services in Scotland, a national managed clinical network (Photonet <https://www.photonet.scot.nhs.uk>) was established⁴. The network's vision is that all patients with skin conditions that respond to light therapy will be offered appropriate phototherapy wherever they live in Scotland and that this phototherapy will be as effective and safe as possible. To achieve this mission Photonet has established a number of standards and hosts a centralised database of treatment records to enable yearly audit. Photonet also actively engages with its stakeholders, providing educational events, online training modules (<https://www.photonet.scot.nhs.uk/elearning-course/>) and a patient feedback service. The result is a cohort of well-educated and engaged dermatologists, nurses and medical physicists across the country.

We believe that the network has played a large part in Scotland's stable phototherapy numbers over the past ten years, despite the increased availability of targeted therapies during this period. In 2019 the number of UV phototherapy courses per 100,000 of the population in Scotland was approximately the same as in 2010, in stark contrast to the experience in France (Table 1)¹. In addition there were 42 operational phototherapy centres in Scotland in 2019, compared with 34 in 2010. Phototherapy delivery peaked in Scotland in 2016 and, whilst there had been a slight decline since, the numbers were relatively stable until the emergence of Covid-19. The global pandemic has severely affected phototherapy provision across Scotland and the 47% decline in UV courses in 2020 compared with 2010 masks a more severe situation as the data includes 3 months pre-pandemic (Jan – March 2020).

There are challenging years ahead for phototherapy requiring adapted ways of operating (home phototherapy for example). However as Aubin et al. elucidate it would be "deleterious to our speciality to give up phototherapy". We too believe in the importance of phototherapy and we believe that, as Photonet has demonstrated, a strong network of engaged, educated professionals can ensure the modality's continued prominence.

References

1. Aubin, F., Chaignot, C., Gallais-Serezal, I. and The Société Française de Photodermatologie. Decline in use of phototherapy in France from 2010 to 2019. *Br J Dermatol* 2021: Accepted Author Manuscript. <https://doi.org/10.1111/bjd.20384>
2. Foerster, J. and Dawe, R. Phototherapy achieves significant cost savings by the delay of drug-based treatment in psoriasis. *Photoderm Photoimmunol Photomed* 2019;36(2);90-96. <https://doi.org/10.1111/phpp.12511>
3. Boswell, K., Cameron, H., West, J., Fleming, C., Ibbotson, S.H., Dawe, R. and Foerster, J. Narrowband ultraviolet B treatment for psoriasis is highly economical and causes significant savings in cost for topical treatments. *Br J Dermatol* 2018;178(5);1148-1156. <https://doi.org/10.1111/bjd.16716>
4. Dawe, R.S. Phototherapy in the treatment of skin disease in Scotland. *MD Thesis*: University of Glasgow. 2001 Available at: <http://theses.gla.ac.uk/5857/> (last accessed 26th May 2021)

Table 1: Phototherapy in Scotland: Quantitative data from Photosys, a national UV Phototherapy Database provided by Photonet (<https://www.photonet.scot.nhs.uk>); ^aversus 2008; ^bversus 2010.

Year	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Number of UV courses	6800	6917	7147 5% ^a	7117	7343	7605	7476	7817	8383 17% ^b	8032	7620	7482 5% ^b	3763 -47% ^b
Number of patients	6617	6679	6799 3% ^a	6790	7030	7296	7108	7492	8002 18% ^b	7682	7269	7186 6% ^b	3590 -47% ^b
Average number of UV courses per patient	1.03	1.04	1.05	1.05	1.04	1.04	1.05	1.04	1.05	1.05	1.05	1.04	1.05
Number of UV courses per 100k population	131	132	136 4% ^a	134	138	143	140	145	155 14% ^b	148	140	137 1% ^b	69 -49% ^b