

Global dermatology talks is a virtual lecture series for equitable dissemination of dermatologic information



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Key words: COVID-19; dermatology education; diversity, equity & inclusion; environment & sustainability; open-access; pedagogy; research; social media; Twitter; virtual conference; YouTube; Zoom webinar.

The COVID-19 pandemic disrupted seminar series, grand rounds, and national/international conferences.^{1,2} Although there is value in in-person meetings, the pandemic has also highlighted the opportunity for exchanging information in a virtual setting. Here, we comment on our experience in organizing “Global Dermatology Talks” (GDT) during the COVID-19 pandemic to address the immediate needs of the dermatology education community. Such virtual entities might supplement in-person exchange of academic and research information going forward to promote diversity, equity, and inclusion in addition to positive environmental impacts.

Inspired by “Global ImmunoTalks,” a weekly immunology-focused virtual seminar series created in April 2020 by Drs Elina Zúñiga and Carla Rothlin, we decided to form an analogous dermatology-focused series, entitled “GDT,” established in October 2020.³ GDT is a free, open-access dermatology research seminar designed to promote the active exchange of

Abbreviation used:

GDT: Global Dermatology Talks

the latest information in a virtual setting. GDT has been very successful to date, drawing viewers from multiple countries and institutions, as well as patients, advocates, industry, trainees, and faculty.

GDT seminars occur twice monthly for 1-hour via Zoom webinar. Speakers who have made important contributions to the field of dermatology are invited to speak by the organizers. An effort is made to invite speakers from different geographic regions (Fig 1, A).

Speakers present their basic science, translational, and clinical dermatology research in either a live or prerecorded talk (45 minutes) but are routinely present for a live question and answer session (15 minutes). Questions from attendees submitted through the chat function are read by a moderator

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Funding sources: Dr Daneshjou is supported at T32 training grant 5T32AR007422-38. Drs Richmond and Damsky are supported by Career Development Awards from the Dermatology Foundation.

IRB approval status: Not applicable.

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JAAD Int 2022;9:116-8.

2666-3287

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<https://doi.org/10.1016/j.jdin.2022.08.020>

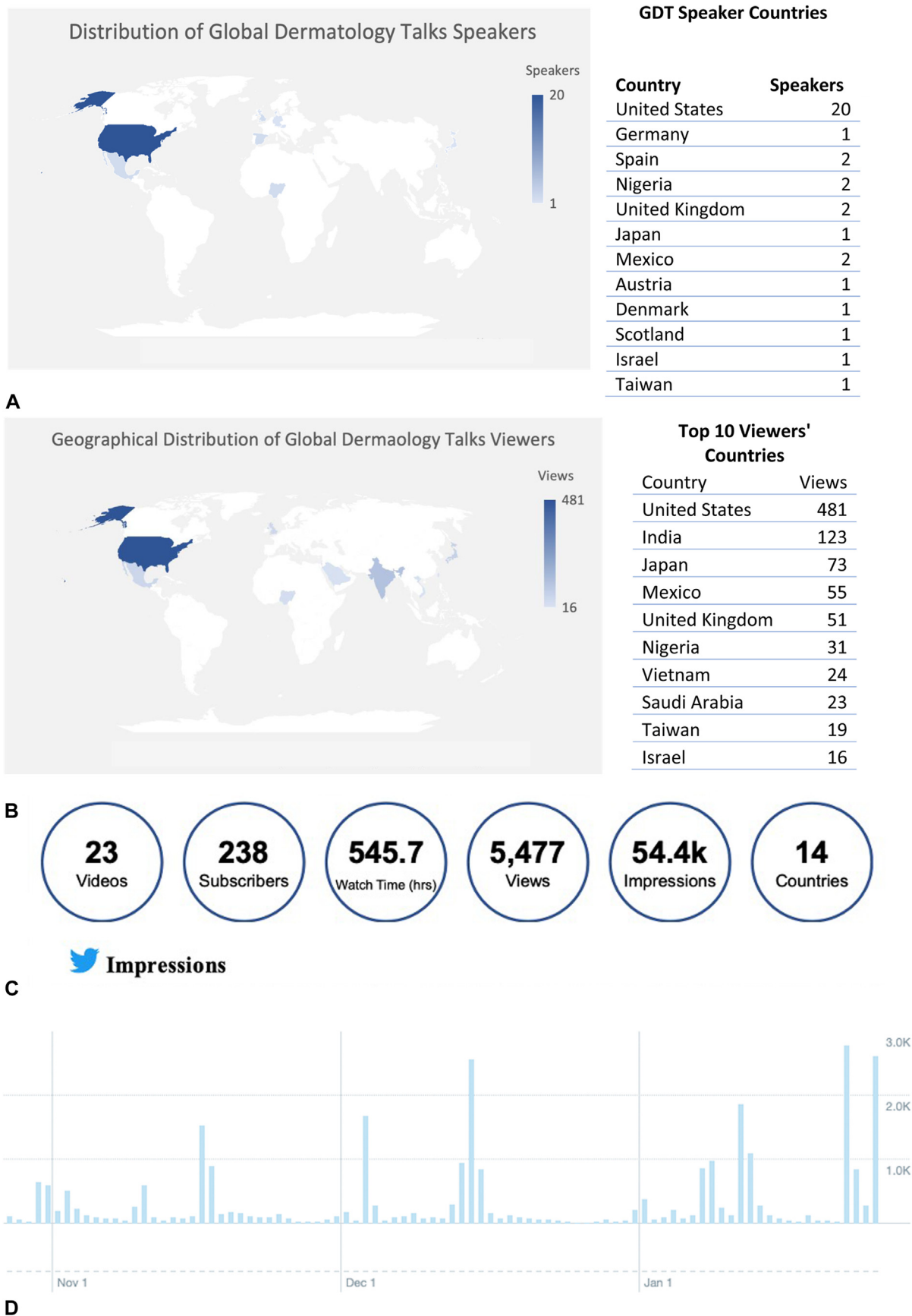


Fig 1. Reach-to-date of Global Dermatology Talks (GDT). **A**, Geographic distribution of GDT speakers from 2020 to 2022. **B**, Geographic distribution of GDT viewers from 2020 to 2022. **C**, GDT's reach on YouTube based off channel metrics. **D**, GDT garnered over 27.7k total Twitter impressions during the first 3 months of the seminar series.

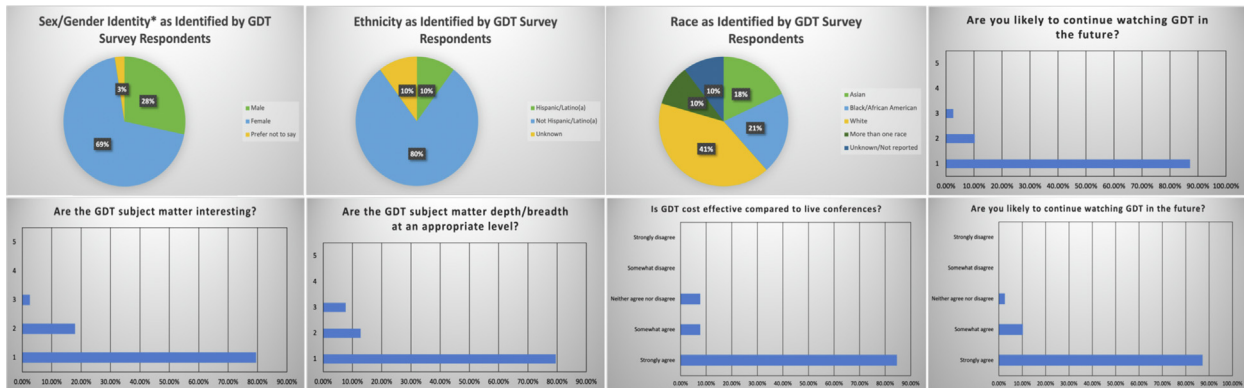


Fig 2. Global Dermatology Talks (GDT) survey results. *Top row:* Demographics and affiliations of GDT survey respondents. *Bottom row:* Survey responses of viewers when asked about the subject matter, cost-effectiveness, and likelihood of continuing to watch GDT. Of the viewers, 79.49% strongly agree that the subject matter is interesting and 79.49% strongly agree that the breadth/depth is at the appropriate level. When compared with live conferences, 84.62% strongly agree that GDT is more cost-effective. Of the viewers, 87.18% strongly agree that they will continue participating in GDT. ($n = 39$ respondents; typical live attendance is 35 attendees, and 238 are subscribed to the YouTube channel; *frequency of sex and gender identity question responses were identical)

and answered by the speaker. Recordings of each session are posted to a YouTube channel with the speaker's consent, to ensure that registrants may view the content if they are unable to attend the live (YouTube metrics; Fig 1, C). A GDT website with the latest calendar and links to prior talks and YouTube recordings is also available.⁴ There has been no commercial sponsorship for the series.

GDT is promoted almost entirely on social media using accounts on Twitter @DermTalks and Instagram @GlobalDermTalks (Twitter metrics; Fig 1, D). Hashtags, such as #DermTwitter, #MedTwitter, #SkinScience, and #Dermatology, have helped reach individuals interested in dermatology. The incorporation of Twitter has broadened audience engagement with the seminar topic and created space for additional real-time discussion. Highlights from the seminar are posted via Twitter by organizers using the hashtag #scicomm (science communication).

We developed and distributed a survey to our attendees and viewers (UMass Chan Institutional Review Board exempted #H00023637) using Qualtrics. We received 39 responses, which represents approximately 86% to 100% of our typical live viewership and/or approximately 16% of our YouTube subscribers. Survey results were overwhelmingly positive (Fig 2).

We believe that the success of GDT illustrates the importance of incorporating virtual meeting opportunities, including virtual components to in-person meetings. Virtual meetings provide an equitable

exchange of information by alleviating the financial burden of travel and are environmentally sustainable by eliminating the need for mass travel.⁵ We plan to continue GDT to share the latest in dermatologic research and education with a broad and diverse audience.

Conflicts of interest

Dr Daneshjou is on the advisory board for VisualDx. Dr Richmond is an inventor on use patents for targeting CXCR3 (0#15/851,651) and IL15 (# 62489191) for the treatment of vitiligo. Dr Damsky is a consultant for Eli Lilly and TWi Biotechnology, has research funding from Pfizer, and receives licensing fees from EMD/Millipore/Sigma in unrelated works. Drs Ederaine, Kimball, Enwereji, Ftouni, and Junejo have no conflicts of interest to declare.

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