

MESSAGE FROM LEADERSHIP

Happy New Year!

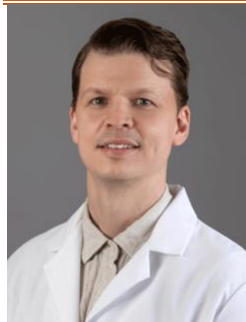
We are gearing up for our meeting in beautiful Springdale, Utah on April 27th --just 3 months away! We are so excited to bring to you another high-quality meeting in the best format—quick, lightning fast and usable information—and then fun recreation in one of the most beautiful places on the planet.

We have SOLD OUT of rooms at the Springhill Suites so if you haven't already found lodging, there are a few remaining hotel rooms nearby. Do you have any questions about the meeting? Reach out to our secretary Leah or feel free to contact me directly: Hadjicharalambous@gmail.com This edition of the newsletter has important contributions from Dr. Maggie Hammond as she gives us a jak "cheat sheet" as well as well as our member spotlight from Jonas Adalsteinsson

With Gratitude,

Elena Hadjicharalambous & UDS Leadership team

MEMBER SPOTLIGHT: JÓNAS AÐALSTEINSSON



1) Tell us about your upbringing and what led to medical school

I was born and raised just outside of Reykjavik, Iceland. My mom was a politician and my dad a lawyer, so I spent a lot of time with my grandparents since they had long workdays. At the age of 9 we moved to Boston, where my parents completed a degree at Harvard but after they graduated, we moved back to Iceland. I had fond memories from Boston and always wanted to return to the US for training and work. Math and physics were my main interests growing up and my plan was initially to pursue a physics degree. However, my life took a quick turn after high school. There is this huge entrance exam that you must take to get into medical school in Iceland, and

basically your rank on this single exam determines if you get in or not. The high school that I graduated from is known for providing a strong foundation for this exam and I decided to give it a shot and I got in.

2) How has your family life enhanced your practice and your ability to provide compassionate care?

My wife and 2-year-old daughter are here with me in the US but the rest of our family lives back home in Iceland. I would say since having our daughter I have an easier time connecting with my pediatric patients, and I feel like the bond I form with both parents and their kids is stronger

3) How do you keep up to date with literature?

I signed up for email updates from all the major dermatology journals and make sure I read through them once a month. If I see an interesting article that sparks a research idea I make sure to note it down.

4) For clinic, do you prefer scrubs or dress attire? Bowties or neckties?

Scrubs most days. Interestingly in Scandinavia where most of my friends from Iceland practice, dress attire, bowties and neckties are often forbidden or frowned upon in hospital-based clinic settings.

5) What is your favorite skin condition with which to help your patients?

Skin cancer as well as severe psoriasis/AD and HS. It can often be challenging to individualize the treatment of skin cancer, whether it be MMS or a less invasive approach like ED&C or topical/intralesional 5FU. For inflammatory skin conditions we have so many medications at our disposal today. Trying to figure out the best systemic option for each individual

patient and the dramatic response we often achieve within just a few weeks/months can be very satisfying to witness.

6) Which dermatologic medication would you want all of your family members to take?

Heliocare/niacinamide combo.

7) What do you like to do in your spare time?

I enjoy long endurance gravel/MTB rides. At home I read a lot of philosophy and science fiction.

8) What do you love about Utah?

The mountains, the people and my department at the University of Utah.

9) Where do you love to travel?

When I have the time to travel I usually go back home to Iceland, because that's where my family lives. But it's long been a dream of mine to explore the French Riviera and southern Italy.

10) What is your favorite food?

Indian food when I go out. But my favorite food in day-to-day life when I can get it is high quality fresh fish.

PEARLS & GEMS BY MAGGIE HAMMOND, MD

Currently FDA approved JAK Inhibitors for Dermatologic Diseases:

(Updated December 2022)

Drug name	Inhibits	Dermatologic FDA- approved uses	Dosing	Monitoring parameters
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Oral				
Abrocitinib (Cibinqo®)	JAK1 selectively	Atopic dermatitis	100mg PO daily; if inadequate response at 12 weeks, 200mg PO daily	Baseline: Tb, hepatitis panel, CBCd 4 weeks: lipid panel
Baricitinib (Olmiant®)	JAK1, JAK2, TYK2 > JAK3	Alopecia areata	2mg PO daily; if inadequate response increase to 4mg PO daily	Baseline: Tb, hepatitis panel 12 weeks: lipid panel
Deucravacitinib (Sotyktu®)	TYK2 selectively	Psoriasis	6mg PO daily	Baseline: Tb
Upadacitinib (Rinvoq®)	JAK1, JAK2 > JAK3, TYK2	Atopic dermatitis	15mg PO daily; if inadequate response increase to 30mg PO daily	Baseline: Tb, hepatitis panel, CBCd, LFTs 12 weeks: lipid panel

Topical				
Ruxolitinib 1.5% cream (Opzelura®)	JAK1, JAK2	Atopic dermatitis, vitiligo	Thin layer to affected skin twice daily	Consider baseline Tb

Note: Recommended to give Herpes Zoster vaccination before starting any oral JAK inhibitor; avoid all live immunizations during treatment.

REFERRALS TO THE UNIVERSITY OF UTAH

We are lucky to have an outstanding academic dermatology department in our state and there may require referrals. A common question is *how do we send the University of Utah referrals?*

GRAND ROUNDS:

- If a provider would like to refer a patient for Grand Rounds, it would be best if they call the admin office at 801-581-6465 and ask for Dave or Autumn. Records will eventually need to be faxed to admin at 801-581-6484.

RHEUM-DERM & VULVAR CLINIC:

- The best way for outside providers to refer to the autoimmune clinic or Dr. Cocks is by faxing the referral in with any applicable notes. They can fax them to 801-581-4911.