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ORIGINAL ARTICLE

Professional performance of the dermatologist in the care of pediatric patients with skin conditions

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ABSTRACT

Introduction: the quality of health care must be closely interrelated with the level of professional performance of human resources. Good professional performance by a Dermatology specialist is essential, even more so when dealing with pediatric patients, where skin diseases have their own particularities.

Objective: to characterize the professional performance of the dermatologist in the care of pediatric patients with skin conditions.

Methods: observational, descriptive, cross-sectional study, carried out in dermatologists in Havana, between 2024 and 2025. The universe was made up of the 75 specialists in the province, a sample of 46 being selected, to whom a previously designed and validated professional performance test was applied. Descriptive statistics were used to process the information.

Results: 42,8 % reported having only basic knowledge about childhood skin diseases. 40,5 % do not know how to act when faced with a pediatric patient with skin conditions, nor are they capable of making decisions without receiving instructions. 45,2 % only sometimes make the correct diagnosis when caring for pediatric patients with dermatological conditions, while the same percentage of dermatologists establish the appropriate treatment.

Conclusions: more than half of the dermatologists reported having basic or minimal knowledge regarding the care of pediatric patients with skin conditions, not acting with professional independence. Decision making in dermatological practice with a child or adolescent was poor, only sometimes referring to making the correct diagnosis and establishing the appropriate treatment.

Keywords: Patient Care; Dermatology; Skin Diseases; Workforce; Work Performance.

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INTRODUCTION

Currently, the quality of health care has to be closely interrelated with the level of professional performance of the human resources that are trained in Medical Education institutions, whose origins date back to various cultures and times.[1] Dermatology is a branch of medical sciences that responds to the growing need to provide solutions to health problems related to skin conditions.[2]

Pediatric Dermatology is based on the study, prevention and treatment of skin diseases in children and adolescents. Diseases typical of that stage appear in childhood, and those that are typical of adults affect pediatric patients in different ways. Infants can present skin diseases that manifest themselves in a very specific way and, therefore, it is necessary to treat them in a personalized way. Another important aspect to take into account is the family's actions when faced with a child with a dermatological condition, and the degree of anxiety and worry that this situation can generate; Therefore, there must be a close doctor-patient-family relationship. For all this, the dermatologist must have solid knowledge and skills that allow him to properly manage these patients, and where values such as humanism, knowing how to listen, and teamwork are essential for good practice.[3]

Medicine is currently moving toward a more personalized and technology-driven approach, making a high level of professional competence essential for dermatologists—especially when treating pediatric patients, for whom dermatological conditions present unique characteristics specific to that stage of life. A dermatologist who treats children must recognize that a child is not simply a miniature adult. Children may not always be able to articulate what is bothering them; they may be unable to answer questions about their health, or they might struggle to remain patient and cooperative during a physical examination. Consequently, it is becoming increasingly important to enhance the professional performance of these specialists, ensuring they are equipped with the necessary tools to address these evolving challenges.[3]

It is essential that permanent and continuous training processes be promoted that respond to the demands in the formation of a new man, who must be distinguished by knowledge, know-how, knowing how to be and knowing how to live together.[4] In the opinion of the authors, continuous training ensures the updating, progress and advancement of professional activity, which allows the development of attitudes, knowledge and skills that imply improvements in the professional performance of the dermatologist. Taking into account all of the above, this research was carried out with the objective of characterizing the professional performance of the dermatologist in the care of pediatric patients with skin conditions.

METHODS

An observational, descriptive and cross-sectional study was developed in Dermatology Specialists of the province of Havana, during the period October 2024 to October 2025.

The universe was made up of the 75 dermatologists who work in Havana. The sample was made up of 42 specialists, selected through simple random probabilistic sampling. Dermatologists with more than six months of experience caring for pediatric patients and who voluntarily agreed to participate in the study were included. Those who were on work or teaching leave during the data collection period were excluded.

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The following variables were used: level of knowledge in dermatological care for pediatric patients, level of professional independence, ability to diagnose dermatological diseases in pediatric patients.

A professional performance test was administered to all those included in the study, an instrument that was previously designed and validated.

Statistical analysis
For the statistical analysis, the absolute frequencies and percentages of each variable studied were calculated, which made it possible to describe the behavior of the professional performance indicators in the selected sample. The results are presented in tables that facilitated the comparison between the categories analyzed and the interpretation of the findings obtained.

Ethical aspects
This research was approved by the Scientific Research Ethics Committee and by the Scientific Council of the Miguel Enríquez Faculty of Medical Sciences, bodies that evaluated its scientific relevance and compliance with ethical principles. In addition, the confidentiality of the data, the anonymity of the participants and the obtaining of informed consent were guaranteed, in accordance with the guidelines established for health research.

RESULTS

Specialists predominated in the age group of 30 to 39 years, who represented 45,3 %, followed by those from 40 to 49 years with 13 for 30,9 %. The mean age was 43,2±10,4 years (Table1).

Table 1. Distribution of dermatologists according to age.

Age*	No.	%
30 - 39	19	45,2
40 - 49	13	30,9
50 - 59	8	19,1
60 and over	2	4,8

Notes: * Mean ± SD of age: 43.2 ± 10.4 years.

Regarding the level of knowledge in dermatological care for pediatric patients, 42,8 % reported having basic knowledge about dermatological diseases in childhood, followed by 38,1 % who reported having minimal knowledge. Only 11,9 % reported having high knowledge about skin conditions in pediatric age (Table 2).

Table 2. Distribution of dermatologists according to level of knowledge in the care of pediatric patients with skin conditions.

Level of knowledge in the care of pediatric patients with dermatological conditions	No.	%
High knowledge	5	11,9
Basic knowledge	18	42,8
Minimal knowledge	16	38,1
No knowledge	3	7,2

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In the research, 17 specialists reported not knowing how to act with a pediatric patient with skin conditions, nor being able to make decisions without receiving instructions, which represented 40,5 %, followed by 11 who reported achieving independence in solving common problems. of pediatric dermatology and sometimes takes initiatives, for 26,2 %. Only 2 proposed excellent resolution of complex situations, with professional independence and are capable of always taking initiatives (Table 3).

Table 3. Distribution of dermatologists according to level of professional independence.

Level of professional independence	No.	%
Resolves complex situations excellently, independently and always takes initiatives.	2	4,8
Achieves independence in solving common problems and sometimes takes initiatives	11	26,2
Manages to resolve situations that are common in daily dermatological practice without instructions	9	21,4
Decision making in daily dermatological practice is deficient and does not act with the necessary independence.	17	40,5
It is unable to diagnose pediatric patients with dermatological disorders	3	7,1

Regarding the ability to diagnose dermatological diseases in pediatric patients, 19 dermatologists (45,2 %) reported that they only sometimes make the correct diagnosis, followed by 13 (31,0 %) who indicated that they often make the correct diagnosis. It is worth noting that only 3 (7,1 %) stated that they always make the correct diagnosis (Table 4).

Table 4. Distribution of dermatologists according to their ability to diagnose skin conditions in pediatric patients.

Ability to diagnose skin conditions in pediatric patients	No.	%
Always makes the correct diagnosis when treating pediatric patients with dermatological conditions	3	7,1
Often makes the correct diagnosis when treating pediatric patients with dermatological conditions	13	31,0
Sometimes makes the correct diagnosis when treating pediatric patients with dermatological conditions	19	45,2
Rarely makes the correct diagnosis when treating pediatric patients with dermatological conditions	6	14,3
Is unable to make a diagnosis when treating pediatric patients with dermatological conditions	1	2,4

The 45,2 % reported that they only sometimes establish the appropriate treatment when faced with a pediatric patient with dermatological diseases; while only 2 indicated that they are always able to establish an adequate therapeutic plan. There were 4 specialists who stated that they were not able to indicate correct treatment in these patients, which represented 9,52 % (Table 5).

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Table 5. Distribution of dermatologists according to their ability to manage skin conditions in pediatric patients.

Ability to manage skin conditions in the pediatric patient	No.	%
Always establish an appropriate therapeutic plan	2	4,8
Almost always establishes an appropriate therapeutic plan	9	21,4
Frequently establishes an appropriate therapeutic plan	8	19,1
Sometimes establishes the appropriate treatment	19	45,2
Not able to indicate correct treatment	4	9,5

DISCUSSION

In the research, dermatologists predominated in the age group of 30 to 39 years, followed by those from 40 to 49, and the average age was 43,18 years. The above coincides with a study carried out in Mexico, where the majority of dermatologists who currently provide services were born between 1982 and 1994.[5] In a research carried out in Spain by Soto Moreno et al.,[6] the average age was 41 years, data that correlates with thepresent study. On the other hand, in the research carried out in Chile by Mena Vergara et al.,[7] the average age of the dermatologists was 53,6 years. In Cuba, at the end of 2024 there were 486 dermatologists, but the authors found no research regarding age in this specialty.[8]

When applying the professional performance test, 42,8 % of those included in the study reported having basic knowledge to care for pediatric patients with dermatological conditions. In the literature it is reported that the Dermatology specialist must acquire all the knowledge and tools that allow comprehensive care not only of the adult patient, but also of children and adolescents. However, the reality is that you do not always feel comfortable caring for pediatric patients. That is why it is necessary to prepare them with a high professional scientific level and deep human values to face the evaluation from the dermatological point of view of this type of patient.[1]

In a study carried out by Santiago Martín,[9] in Spain, the author states that the pediatric dermatologist requires specific, extensive and complex training to adapt the diagnosis and treatments of skin diseases in adults to the particularities of the pediatric age. Zama et al.,[10] state that there is a marked shortage of dermatologists with adequate training in the field of pediatric dermatology, data that coincide with the present investigation. Menéndez Tuñón et al.,[11] point out that consultations for dermatological problems are frequent in Pediatrics, which reinforces the importance of dermatological training at these ages. In a study carried out by Toledo-Bahena,[12] the author points out that despite all the progress that has been made in the field of Pediatric Dermatology, there are still insufficient dermatologists with the necessary preparation to treat skin conditions in childhood.

The 40,5 % of the dermatologists included in the study reported that decision-making in daily dermatological practice is deficient and they did not act with the necessary independence in caring for pediatric patients. In the authors' opinion, greater improvement is necessary for the dermatology specialist in relation to the management of children and adolescents. The specialty program in Cuba is three years, and residents only rotate 12 weeks in a pediatric hospital in the last year.[2]

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According to Lizardo Castro,[13] pediatric dermatology is a subspecialty that emerged in the second half of the 20th century, and represents a challenge for Latin America and the world, to create the appropriate conditions for the training of a human resource capable of facing professional independence. the needs of the pediatric population with skin conditions. In Argentina, pediatric dermatology is considered a specialty, which aims to achieve specialists with the necessary hierarchy for the treatment of pediatric patients with skin conditions.[14] The authors consider that the dermatologist who specializes in the care ofChildren and adolescents must be able to make their own decisions in the face of the challenges currently imposed by the various dermatoses at these ages.

The 45,2 % stated that they only sometimes make the correct diagnosis when caring for pediatric patients with dermatological conditions; while only 7,1% reported that they always made the correct diagnosis. In a study carried out in Spain by Martin Gorgojo et al.,[15] the authors highlight the importance of reinforcing training activities aimed at dermatologists in the field of pediatrics, which will allow accurate diagnoses to be made that result in better care for children andteenagers.

According to Solís Solís,[16] to achieve better professional performance, the level of updating of the knowledge of the human resource is essential, as well as the degree of development of their technical-professional, interpersonal and problem-solving skills in medical practice, which is notescapes the reality of the pediatric dermatologist. For Almeida Benítez et al.,[17] pediatric dermatology represents a specialized field within medicine and faces unique challenges in the diagnosis of skin diseases in children, since patients at these ages present particular physiological and clinical characteristics. that require a differentiated approach.

Regarding the ability to manage skin conditions in these patients, 45,24 % indicated that they only sometimes establish the appropriate treatment, and 9,52 % even reported not being able to indicate an adequate treatment when caring for pediatric patients with skin conditions. In a study carried out by Lanchén Abarca et al.,[18] the authors point out that indicating appropriate therapy in the pediatric setting represents an additional challenge, so specialists must be prepared for it.

According to Santiago Martín,[9] the pediatric dermatologist requires specific training to adapt the treatment of skin diseases in adults to the particularities of the pediatric age. Kang et al.,[19] state that adequate preparation is necessary to apply a treatment, whether topical or systemic, in children. For Marqués Martín,[20] the management of dermatoses in childhood must be well known, because the delay in indicating treatment can sometimes harm their mental health.

In the opinion of the authors of this article, it is necessary to create spaces for permanent and continued improvement in the management of skin diseases in children and adolescents. The dermatologist must be prepared to face the challenges involved in indicating treatment in pediatric patients, where it is essential to take into account the particularities of the skin at these ages, as well as the affected body surface, and the possibility of drug reactions that may occur. can be presented.

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CONCLUSION

More than half of the dermatologists included in the study reported having basic or minimal knowledge regarding the care of pediatric patients with skin conditions. The majority do not act with professional independence and decision-making in daily dermatological practice with a child or adolescent is deficient. The largest number of specialists reported that they only sometimes make the correct diagnosis and establish the appropriate treatment when caring for this type of patient.

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Statement on the use of artificial intelligence
The authors declare that no artificial intelligence tools were used.

Authors' contribution
Conceptualization, data curation, formal analysis, research, methodology, validation, visualization, project administration, writing, final review and editing.
Data curation, formal analysis, research, project administration, writing, final review and editing.
Supervision, research, writing of the original draft and writing, final review and editing.

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