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Sexual orientation and gender identity (SOGI) data in dermatologic studies and opportunities for inclusion

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Abstract

Dermatologists serve a vast array of patients with unique backgrounds. The National Institutes of Health (NIH) designated members of sexual and gender minorities as underrepresented in scholarly literature. Our study examines the past 10 years of studies published in highly-cited dermatologic journals, surveying each study for common data collection of sexual orientation and gender identity (SOGI) in dermatological studies. We found representation of sexual and gender minorities to be increasing in dermatological studies but recommend that SOGI data be collected regularly just as any other common variable in dermatological patient studies.

Keywords: bisexual, gay, gender identity, gender minorities, lesbian, queer, sexual orientation, transgender

Introduction

As of 2020, up to 5.3% of the United States (US) population self-identifies as members of the lesbian, gay, bisexual, transgender, or queer community, also known as sexual and gender minorities (SGM) in academic literature [1]. Although a recognized minority population in the US, this community may also be underrepresented in scholarly literature. In

2016, the National Institutes of Health (NIH) formally designated SGM as a health disparity population for research [2]. There are some well-recognized associations between SGMs and dermatologic disease, such as increased prevalence of skin cancer, sexually transmitted diseases (e.g., HIV, syphilis, viral hepatitides), and some inflammatory skin diseases (e.g., acne, alopecia), [3-5]. SGMs may also be more prone to psychiatric conditions and substance abuse, which are often intricately woven into dermatologic burden [6]. For example, the Youth Risk Behavior Surveillance System (YRBSS) found that 34% of lesbian, gay, or bisexual students were bullied at school and over 60% of the same population had felt so sad or helpless over the previous year that they stopped doing some usual activities [7]. Furthermore, a survey that examined relationship between family acceptance rates of sexual orientation and health outcomes in SGM young adults found that those with lower quality of family acceptance had higher rates of depression, substance abuse, and suicidal ideation and attempts, as well as lower rates of general health [8]. The identification of both psychiatric and dermatologic health disparities in the SGM population presents a unique opportunity for dermatologists to publish literature to address the burden of disease in this

Journal	Articles	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Total
Journal of the	# Total	488	746	604	625	617	594	603	810	999	1308	1645	9039
American	# LGBTQ	0	0	0	0	1	1	3	1	1	10	4	21
Academy of Dermatology	% LGBTQ	0	0	0	0	0.16	0.17	0.5	0.12	0.1	0.76	0.24	0.23
Journal of	# Total	530	522	599	657	658	564	552	612	574	514	538	6320
Investigative	# LGBTQ	0	0	0	0	0	0	0	0	0	0	0	0
Dermatology	% LGBTQ	0	0	0	0	0	0	0	0	0	0	0	0
British Journal of Dermatology	# Total	548	550	602	561	695	836	785	971	992	1152	954	8646
	# LGBTQ	2	0	0	0	1	0	3	0	0	3	2	11
	% LGBTQ	0.36	0	0	0	0.14	0	0.38	0	0	0.26	0.21	0.13
JAMA	# Total	378	384	405	382	373	388	390	424	375	347	345	4191
Dermatology	# LGBTQ	0	1	0	0	0	4	3	2	3	3	6	22
(Archives of Dermatology until January 2013)	% LGBTQ	0	0.26	0	0	0	1.03	0.77	0.47	0.8	0.86	1.74	0.52
Dermatologic Surgery	# Total	430	404	426	394	310	343	318	359	351	411	594	4340
	# LGBTQ	0	0	0	0	0	0	0	0	0	1	0	1
	% LGBTQ	0	0	0	0	0	0	0	0	0	0.24	0	0.02

Table 1. Total numbers and percentages of sexual and gender minorities-focused articles published by each journal from 2010-2020.

population. Herein, we aim to examine the prevalence of Sexual Orientation and Gender Information (SOGI) data available in the dermatologic literature between 2010 and 2020 to characterize representation of SGM literature.

Discussion

The top five dermatology journals by 2019 h-index (scimagojr.com), (**Table 1**) were individually searched in PubMed on December 21, 2020 using all twelve NIH-suggested SGM terms (**Table 2**). Each term was searched individually in each of the journals via their online portals and then cross-checked for availability in PubMed. Sexual and gender minorities publication data from 2010-2020

Table 2. Individually-searched NIH-suggested search terms for sexual and gender minorities (https://www.ncbi.nlm.nih.gov/mesh/2016685, accessed on December 21, 2020).

NIH-suggested sexual and gender minority search terms					
Lesbian	Sexual minority				
Gay	Men who have sex with men				
Bisexual	Women who have sex with women				
Transgender	Homosexual				
Queer	Non-heterosexual				
Gender minority	LGBTQ				

was collected and compared to the total number of publications in the same time frame for each journal surveyed. Duplicate articles that appeared under more than one search term were excluded.

A total of 32,536 articles were collected from 2010-2020, of which 55 (0.017%) were SOGI-related publications (**Table 1**). Between 2010 and 2015, an average of 1.7 publications/year were identified as being SOGI-focused, whereas 2016 to 2020 had an average of 9.0 SOGI-focused publications/year. *JAMA Dermatology* and the *Journal of the American Academy of Dermatology (JAAD)* published the highest number (N=43) and proportion (78%) of SGM articles from 2010-2020. In 2019, *JAAD* published 10 SGM-focused articles, the most of any year examined. *JAMA Dermatology* maintained the highest percentage of SOGI data-inclusive studies from 2014 to 2020 (**Figure 1**).

A limitation of our study is that dermatology publications focused on mechanistic, experimental, or surgical topics may not be highlighting specific patient populations, potentially explaining the observed lack of SOGI inclusive articles. Variation in PubMed search term indexing may also inadvertently omit occasional publications from consideration.

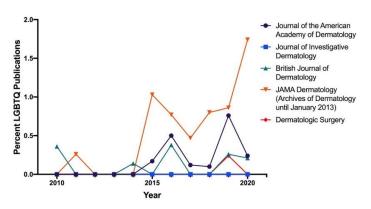


Figure 1. Trends in percentages of sexual and gender minorities-focused publications by journal over 2010-2020.

Conclusion

Our study highlights the relative dearth of dermatologic literature dedicated to SOGI and reframes the NIH's declaration of SGMs as a health disparity population from a dermatologic perspective [6]. Future SGM-dermatologic studies may aim to provide up-to-date epidemiologic data,

psychiatric associations (e.g., depression, anxiety), and therapeutic opportunities (e.g., hormonal and cosmetic therapies). Through systemic production of SOGI-related dermatologic studies, academics can help promote the identification of additional health disparities and expand public health knowledge within the SGM community, which will ultimately lead to creating a more transparent, inclusive, and safe clinical and social environment for SGM patients under dermatology care.

Potential conflicts of interest

Dr. Dellavalle is a Joint Coordinating Editor for Cochrane Skin, a dermatology section editor for UpToDate, a Social Media Editor for the Journal of the American Academy of Dermatology (JAAD), and a Podcast Editor for the Journal of Investigative Dermatology (JID). He is a coordinating editor representative on Cochrane Council.

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